


From: [Fordham, Chelsea \(CPC\)](#)
To: [Rodarte, Desiree \(DPW\)](#); [Salgado, Rebecca \(CPC\)](#)
Subject: RE: ZSFG Building 5 - Not a Project
Date: Thursday, August 24, 2023 12:53:26 PM
Attachments: [image001.png](#)

Hi Desiree, Rebecca and I reviewed the interior renovation project at 1001 Potrero Avenue Building 5 and determined it's not a project under CEQA. Please include the following language in RAMS: "Not defined as a project under CEQA Guidelines Sections 15378 and 15060(c)(2) because it does not result in a physical change in the environment."

Thanks,
Chelsea

From: Rodarte, Desiree (DPW) <desiree.rodarte@sfdpw.org>
Sent: Monday, August 21, 2023 11:11 AM
To: Fordham, Chelsea (CPC) <chelsea.fordham@sfgov.org>; Salgado, Rebecca (CPC) <rebecca.salgado@sfgov.org>
Subject: RE: ZSFG Building 5 - Not a Project

Hi Chelsea,

I've uploaded the pictures from the project team. Please let me know if you need anything else. 
[ZSFG Building 5](#)

Thanks!
Desiree



Desiree Rodarte
Regulatory Affairs Specialist

Design and Engineering | San Francisco Public Works | City and County of San Francisco
49 South Van Ness Ave. 9th Fl | San Francisco, CA 94102 | sfpublicworks.org · twitter.com/sfpublicworks
Please note, I will be out of the office from July 12th to July 21st.

From: Rodarte, Desiree (DPW)
Sent: Monday, August 07, 2023 8:31 AM
To: Fordham, Chelsea (CPC) <chelsea.fordham@sfgov.org>; Salgado, Rebecca (CPC) <Rebecca.Salgado@sfgov.org>
Subject: RE: ZSFG Building 5 - Not a Project

Hi Chelsea,

Yes, I will get those from the PM and send along.

Best,
Desiree



Desiree Rodarte
Regulatory Affairs Specialist

Design and Engineering | San Francisco Public Works | City and County of San Francisco
49 South Van Ness Ave. 9th Fl | San Francisco, CA 94102 | sfpublicworks.org · twitter.com/sfpublicworks
Please note, I will be out of the office from July 12th to July 21st.

From: Fordham, Chelsea (CPC) <chelsea.fordham@sfgov.org>
Sent: Thursday, August 03, 2023 5:04 PM
To: Rodarte, Desiree (DPW) <desiree.rodarte@sfdpw.org>; Salgado, Rebecca (CPC) <rebecca.salgado@sfgov.org>
Subject: RE: ZSFG Building 5 - Not a Project

Hi Desiree, Can you send over pictures of the interiors and walls to be demolished? The building is historic, so I want to confirm that these spaces were not open to the public or have historic interiors.

Thanks,
Chelsea

Chelsea E. Fordham, Principal Planner
Environmental Planning Division
San Francisco Planning
49 South Van Ness Avenue, Suite 1400, San Francisco, CA 94103
Direct: 628.652.7579 | www.sfplanning.org
[San Francisco Property Information Map](#)

From: Rodarte, Desiree (DPW) <desiree.rodarte@sfdpw.org>
Sent: Thursday, August 03, 2023 9:41 AM
To: Fordham, Chelsea (CPC) <chelsea.fordham@sfgov.org>; Salgado, Rebecca (CPC) <rebecca.salgado@sfgov.org>
Subject: ZSFG Building 5 - Not a Project

Hi Chelsea and Rebecca,

We have an OSHPD project for interior renovation only at 1001 Potrero Avenue Building 5 to relocate the Family Health Center. Can this be determined not a project under CEQA? They have also received approval from the HCAI. This is in RAMS here:

<https://ramsweb.apps.sfdpw.org/projects/156/request>.

There is also an older CatEx that I've attached, but we wanted to follow the memo on OSHPD projects being determined not projects if they adhere to the memo.

Please let me know if you need anything else.

Best,
Desiree



Desiree Rodarte
Regulatory Affairs Specialist

Design and Engineering | San Francisco Public Works | City and County of San Francisco
49 South Van Ness Ave. 9th Fl | San Francisco, CA 94102 | sfpublicworks.org · twitter.com/sfpublicworks
Please note, I will be out of the office from July 12th to July 21st.



Bruce Robertson, Deputy Director | Financial Management & Administration

bruce.robertson@sfdpw.org | T. 628.271.3128 | 49 South Van Ness Ave. Suite 1600, San Francisco, CA 94103

August 27, 2024

VIA EMAIL ONLY: steve@buhlercommercial.com

Buhler Commercial
400 Brannan Street Suite #204
San Francisco, CA 94107
Attn: Steve Buhler – President

**Subject: Sourcing ID No. 0000009068
ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition
Notice of Non-Responsibility**

Dear Mr. Buhler:

The City and County of San Francisco (“City”) has made a preliminary determination based upon its review of Buhler Commercial’s (“Buhler”) qualifications for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project. The project experience provided by Buhler did not meet the contractor bidder qualifications, therefore the City finds Buhler non-responsible.

The City has broad discretion to determine whether a low bidder is "responsible"; that is, "whether the bidder has the fitness, quality, and capability to perform the proposed work satisfactorily." *D.H. Williams Construction, Inc. v. Clovis Unified School Dist.*, 146 Cal.App.4th 757, 763 (2007). In evaluating a bidder's responsibility, the City is not limited to the information presented with the original bid, but must consider any additional information received regarding the bidder's responsibility. *City of Inglewood v. Superior Court*, 7 Cal.3d 861, 870 (1972).

The subject project was bid on June 26, 2024. At bid time, Buhler did submit the Bidder’s Qualification Statement (Section 00 45 13), but it was deemed to be incomplete and inadequate for the City to make a determination of whether Buhler was “responsible.” Post-bid opening, the Project Manager, Lindsay Hu, issued a request on July 8, 2024, to Buhler requesting additional proof of experience and qualifications to meet the contract requirements. In response, Buhler submitted on July 12, 2024 a revised Bidder’s Qualifications Statement – Section 00 45 13 (Bidder’s Qualifications) that included supplemental information to demonstrate that they met the minimum bidder qualifications in Section 00 21 13 (attached).

Specifically, at bid time, Buhler listed one project, which was the San Francisco Public Works Job Order Contract (“JOC”) J37 General Building Services Contract ID #1000005796 with an overall contract amount of \$7,500,000 and a completion date of April 30, 2020 on the Bidder’s Qualifications Form (Section 00 45 13). This listing did not include specific projects or project contract amounts that were completed under each JOC Task Order to demonstrate compliance with the minimum qualifications specified in Section 00 21 13. Post-bid opening, Buhler submitted an updated Bidder Qualification Form (Section 00 45 13) that

listed additional projects and specific JOC task order projects and the associated task order amounts to demonstrate compliance with the specified minimum qualifications.

Bidder Qualification Analysis

1. Per Section 00 21 13, Paragraph 1.11.B.1.b and c., Bidder must demonstrate the successful completion of at least two projects that involve new construction or renovation scopes with each project having a **total construction cost (including change orders) of \$4,000,000 or greater, completed within the past 10 years.** All projects must include mechanical, electrical, plumbing, fire sprinkler, fire alarm, and hazardous material abatement work.
 - a. The City's Project Team reviewed the two projects submitted by Buhler and found that both the East Bay Municipal Utility District ("EBMUD") Operations Center project and the Willard Clubhouse project met the minimum qualification requirements.

2. Per Section 00 21 13, Paragraphs 1.11.B.1.a and c., Bidder must demonstrate the successful completion of at least one project in an occupied and operational **Department of Health Care Access and Information (HCAI) Type 1 or Type 1R hospital building that was substantially completed within the past 10 years with a total construction cost of \$2,000,000 or greater.** All projects must include mechanical, electrical, plumbing, fire sprinkler, fire alarm, and hazardous material abatement work.
 - a. The City's Project Team reviewed the HCAI projects submitted by Buhler, specifically the three (3) task orders under JOC J37: (1) Laguna Honda Hospital East Wing, (2) Laguna Honda Hospital Link Building, and (3) Laguna Honda Hospital South Wing.
 - b. All three JOC task order projects do not meet the minimum total construction cost of \$2,000,000. The submitted projects' construction costs ranged from \$79,035.62 to \$399,990.61, which is significantly less than the stipulated minimum construction cost criterion.
 - c. All three JOC task order projects do not meet the project scope requirements specified in this section because none of the projects include scopes related to mechanical, electrical, plumbing, fire sprinkler, fire alarm and hazardous material abatement work. The projects included only electrical and finish upgrades to charting rooms.

Based upon the above analysis, the City finds Buhler to be non-responsible.

If Buhler believes the City's determination has been made in error and/or would like to respond to the preliminary finding, please submit any response with all supporting materials to Dennis.Lam@sfdpw.org, by 5:00 PM on September 4, 2024. Failure to respond by the date and time provided will result in Public Works' initiating procedures to find Buhler non-responsible.

Yours truly,

DocuSigned by:

Bruce Robertson

8/28/2024 | 4:08:54 PM PDT

63398308AB81447...
Bruce Robertson

Deputy Director, Finance & Administration
San Francisco Public Works

Cc: Lindsay Hu, Project Manager
Joe Chin, Program Manager
Julia Laue, BDC Bureau Manager
Ronald Alameida, Deputy Director
Yadira Taylor, City Attorney
Ivan Oldenkamp – Contract Monitoring Division
Buhler Commercial

SECTION 00 40 13

BIDDING FORMS CHECKLIST

To be submitted with Bid for:

ZSFG BUILDING 5 FAMILY HEALTH CENTER RELOCATION PHASE 1 5C 5E DEMOLITION
(San Francisco Public Works Sourcing Event ID No. 0000009068)

A. Each Bidder shall submit with its Bid the following forms, properly completed and executed:

- Executed Bid Form (Section 00 41 00) with contractor's license number and expiration date.
- Bid security equal to 10% of the Bid (Section 00 43 13).
- Acknowledgment of Receipt of Addenda (Section 00 43 20).
- Proposed Subcontractors Form (Section 00 43 36).
- Bidder's Qualifications (Section 00 45 13)
- Bidder's Safety Record (Section 00 45 14)
- Release and Waiver Agreement (Section 00 45 16).
- Highest Prevailing Wage Rate Certification (Section 00 45 60).
- Certificate of Bidder Regarding Apprenticeship Training Program (Section 00 45 65).
- Certificate of Bidder Regarding Nondiscrimination in Contracts and Benefits (Section 00 45 70).
- Non-collusion Affidavit (Section 00 45 80).
- Certification of Bidder Regarding Debarment and Suspension (Section 00 45 82).
- FORM 2B: "Good Faith Efforts" Requirement Form and any required supporting documentation.

B. Digital file of the Bid shall be submitted by following the instructions in Section 00 21 13 Appendix A. Submitted Bid shall be a single file in PDF format containing all pages of the Bid and named as "**Bid for Sourcing Event ID No. 0000009068 by <Bidder Name>.pdf**". Unreadable files or pages may result in a Bid being found non-responsive.

C. The Director of the San Francisco Public Works reserves the right after opening Bids to reject any or all Bids, and to waive any minor irregularity in a Bid.

D. Bids must be submitted no later than the date and time specified in the Advertisement for Bids, or as subsequently specified if changed by Addendum by following the instructions provided in Section 00 21 13 Instructions to Bidders.

END OF SECTION

SECTION 00 41 00 (Rev.1)

BID FORM

Date of Bid: 06/26/24

TO THE DIRECTOR OF PUBLIC WORKS, CITY AND COUNTY OF SAN FRANCISCO

In response to the Advertisement for Bids for the following public work:

ZSFG BUILDING 5 FAMILY HEALTH CENTER RELOCATION PHASE 1 5C 5E DEMOLITION
 (San Francisco Public Works Sourcing Event ID No. 0000009068)

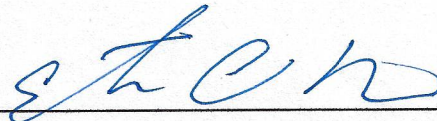
the undersigned Bidder hereby proposes and agrees to execute the required Contract, should it be awarded to the undersigned Bidder, and to do all the work and furnish all the materials therefor all in accordance with the Specifications and Drawings referred to in said Advertisement for Bids and at the prices named in the attached Schedule of Bid Prices.

The undersigned declares: That it is the Bidder (or by holding the position below indicated is authorized to execute this Bid Form on behalf of the Bidder); that said Bidder submits this Bid; that said Bidder has not, nor have any of its agents, officers, representatives or employees, been guilty of collusion with any officer or representative of the City and County of San Francisco, or with any other party or parties in the submission of this Bid; nor has said Bidder received any preferential treatment by any officer or employee of the City and County in the making or submitting of this Bid. The undersigned declares under penalty of perjury that all representations made on this Bid Form are true and correct.

The undersigned declares, under penalty of perjury under the laws of the State of California that the Bidder has read and agrees to the requirements of the San Francisco Administrative Code and applicable requirements of the California Labor Code for each of the attached Sections listed as follows:

Section No.	Title
00 43 13	Bid Security Form
00 43 20	Acknowledgment of Receipt of Addenda
00 43 36	Proposed Subcontractors Form
00 45 13	Bidder's Qualifications
00 45 14	Bidder's Safety Record
00 45 16	Release and Waiver Agreement
00 45 60	Highest Prevailing Wage Rate Certification
00 45 65	Certificate of Bidder Regarding Apprenticeship Training Program
00 45 70	Certificate of Bidder Regarding Nondiscrimination in Contracts and Benefits
00 45 80	Non-collusion Affidavit
00 45 82	Certification of Bidder Regarding Debarment and Suspension
CMD2B-1	Form 2B "Good Faith Efforts" Requirements Forms

The undersigned acknowledges that he or she has read and agrees to these documents:



 **SIGN HERE**

BUSINESS TAX REGISTRATION DECLARATION: The undersigned further declares and understands that if I am awarded the Contract, each of my Subcontractors and I must maintain a current business tax registration number. If the Tax Collector of the City and County of San Francisco determines that any of my Subcontractors or I do not have or maintain a current business tax registration number, the City may either cancel the Contract or withhold payment.

BOND OR CHECK REQUIRED: There is attached, as required by law, bid security in accordance with the Section 00 21 13 - Instructions to Bidders, Article "Bid Security."

LOCAL BUSINESS ENTERPRISE PARTICIPATION AND NON-DISCRIMINATORY EMPLOYMENT PRACTICES: Provisions of San Francisco Administrative Code Chapters 12B and 14B (including their implementing Rules and Regulations) are incorporated herein and by reference made a part of the Bid Documents as though fully set forth. The Bidder and all subcontractors and suppliers shall comply with these provisions and shall submit all required documents in a timely manner.

The undersigned, having examined all referenced documents and the Drawings, understanding the terms and conditions of the Contract Documents and the local conditions affecting the performance and costs of the Work, and having fully inspected the Site in all particulars, hereby proposes and agrees to fully perform the Work as indicated on the Drawings and in accordance with the requirements of the Contract Documents within the time stated therein, and for the following price(s):

SCHEDULE OF BID PRICES

Bid Item No.	Bid Item	Amount
1	Base Bid: Work as Indicated on the Plans and Specifications (Excluding bid items listed below)	\$ 5,300,000
2	Hazardous Materials Abatement Work	\$ 376,650
3	Allowance for Partnering Facilitation and Related Costs	\$22,500
TOTAL BID PRICE (Summation of All Bid Items):		\$ 5,699,150

The City reserves the right after opening Bids to reject any or all Bids, and to waive any minor irregularity in a Bid. In case of discrepancy between the sum of Bid item amounts and the Total Bid Price, the sum of said amounts shall prevail. In the case of discrepancy between words and figures, the words shall prevail. In case of discrepancy between unit prices Bid and extensions thereof, said unit prices shall prevail.

Department of Industrial Relations Registration: The undersigned further declares that the Bidder is compliant with the registration requirements of the California Department of Industrial Relations ("DIR") under California Labor Code section 1725.5, and that its registration with the DIR will be current as of the Bid date.

Time allowed for completion of all Work shall be as specified in Section 00 73 02, beginning with and including the official date of Notice to Proceed as established by the Director of the San Francisco Public Works

Check if you are: <input type="checkbox"/> Certified Small-LBE (10% Discount) <input checked="" type="checkbox"/> Micro-LBE (10% Discount) <input type="checkbox"/> Certified SBA-LBE (5% Discount if applicable)	For certified LBE only (check applicable): * <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> OBE
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* **MBE** = Minority Business Enterprise, **WBE** = Women Business Enterprise, **OBE** = Other Business Enterprise

ZSFG Building 5
Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

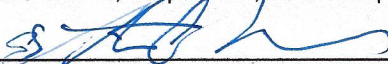
Executed on June 26th 2024

Buhler Commercial

Name of Firm, Corporation, Partnership or Joint Venture

steve@buhlercommercial.com

E-mail Address



415-610-8650

Steve Buhler

Telephone Number

Print Name of Authorized Representative

1003262

President

Contractor's California License No.

Position in Firm or Corporation

04/30/25

400 Brannan St Ste #204

License Expiration Date

Address of Firm or Corporation

1018541

San Francisco CA 94107

S.F. Business Tax Registration
Certificate Number

City State Zip Code

1000040432

Contractor's DIR Registration No.

Note: If Bidder is a corporation, set forth the legal name of the corporation together with the signature of the officer or officers authorized to sign contracts on behalf of the corporation. If Bidder is a partnership, set forth the name of the firm together with the signature of the partner or partners authorized to sign contracts on behalf of the partnership.

END OF SECTION

ZSFG Building 5
Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 0000009068

SECTION 00 43 13

BID SECURITY FORM

Bidder shall have this Bid Bond form executed as indicated below unless Bid is accompanied by certified check.

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned General Contractor as principal and the undersigned Surety as obligor, are held and firmly bound unto the City and County of San Francisco, a municipal corporation, as obligee, in the penal sum of Ten Percent (10%) of the Amount Bid Dollars, lawful money of the United States of America, for the payment of which, well and truly to be made, we bind ourselves, our successors, executors, administrators and assigns, jointly and severally, firmly by these presents.

That the General Contractor as principal is submitting a Bid for certain work to be performed for the said City and County of San Francisco described as follows:

ZSFG BUILDING 5 FAMILY HEALTH CENTER RELOCATION PHASE 1 5C 5E DEMOLITION
(San Francisco Public Works Sourcing Event ID No. 0000009068)

THE CONDITION OF THIS OBLIGATION IS SUCH that if the Bid submitted by said principal be accepted and the Contract be awarded to said principal and if said principal shall within a period of ten (10) days after such award enter into the Contract so awarded and file the required performance and payment corporate surety bonds certificates of insurance, then this obligation shall be void, otherwise to remain in full force and effect.

IN WITNESS THEREOF, the above bounden parties have executed this instrument this 21st day of May, 2024.

(Corporate Seal)

Buhler Commercial
Name of Firm, Corporation, Partnership or Joint Venture

Buhler Commercial
Principal

By: [Signature]

(Corporate Seal)

Arch Insurance Company
Surety

I declare under penalty of perjury, under the laws of the State of California, that I have executed the foregoing bond under an unrevoked power of attorney. Executed on [date] May 21st, 2024, in [City] Orange, [State] California, in conformance with the laws of the State of California.

[Signature]
Attorney-in-Fact, Shaunna Rozelle Ostrom

END OF SECTION



ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Orange)

On 05/21/2024 before me, Melissa Ann Vaccaro, Notary Public
(insert name and title of the officer)

personally appeared Shaunna Rozelle Ostrom,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are
subscribed to the within instrument and acknowledged to me that he/she/they executed the same in
his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the
person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing
paragraph is true and correct.

WITNESS my hand and official seal.

Signature Melissa Ann Vaccaro (Seal)
Melissa Ann Vaccaro



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated. Not valid for Note, Loan, Letter of Credit, Currency Rate, Interest Rate or Residential Value Guarantees.

POWER OF ATTORNEY

Know All Persons By These Presents:

That the Arch Insurance Company, a corporation organized and existing under the laws of the State of Missouri, having its principal administrative office in Jersey City, New Jersey (hereinafter referred to as the "Company") does hereby appoint:

Ben Stong, Michael D. Stong and R. Nappi of Riverside, CA (EACH) Benjamin Wolfe, Chelsea Liberatore of Sacramento, CA (EACH) Adrian Langrell, Arturo Ayala, Daniel Huckabay, Dwight Reilly, Frank Morones and Shaunna Rozelle Ostrom of Orange, CA (EACH)

its true and lawful Attorney(s)-in-Fact, to make, execute, seal, and deliver from the date of issuance of this power for and on its behalf as surety, and as its act and deed: Any and all bonds, undertakings, recognizances and other surety obligations, in the penal sum not exceeding One Hundred Fifty Million Dollars (\$150,000,000.00). This authority does not permit the same obligation to be split into two or more bonds In order to bring each such bond within the dollar limit of authority as set forth herein.

The execution of such bonds, undertakings, recognizances and other surety obligations in pursuance of these presents shall be as binding upon the said Company as fully and amply to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at its principal administrative office in Jersey City, New Jersey.

This Power of Attorney is executed by authority of resolutions adopted by unanimous consent of the Board of Directors of the Company on August 31, 2022, true and accurate copies of which are hereinafter set forth and are hereby certified to by the undersigned Secretary as being in full force and effect:

"VOTED, That the Chairman of the Board, the President, or the Executive Vice President, or any Senior Vice President, of the Surety Business Division, or their appointees designated in writing and filed with the Secretary, or the Secretary shall have the power and authority to appoint agents and attorneys-in-fact, and to authorize them subject to the limitations set forth in their respective powers of attorney, to execute on behalf of the Company, and attach the seal of the Company thereto, bonds, undertakings, recognizances and other surety obligations obligatory in the nature thereof, and any such officers of the Company may appoint agents for acceptance of process."

This Power of Attorney is signed, sealed and certified by facsimile under and by authority of the following resolution adopted by the unanimous consent of the Board of Directors of the Company on August 31, 2022:

VOTED, That the signature of the Chairman of the Board, the President, or the Executive Vice President, or any Senior Vice President, of the Surety Business Division, or their appointees designated in writing and filed with the Secretary, and the signature of the Secretary, the seal of the Company, and certifications by the Secretary, may be affixed by facsimile on any power of attorney or bond executed pursuant to the resolution adopted by the Board of Directors on August 31, 2022, and any such power so executed, sealed and certified with respect to any bond or undertaking to which it is attached, shall continue to be valid and binding upon the Company. In Testimony Whereof, the Company has caused this instrument to be signed and its corporate seal to be affixed by their authorized officers, this 10th day of February, 2023.

Attested and Certified

Regan A. Shulman, Secretary



Arch Insurance Company
Stephen C. Ruschak, Executive Vice President

STATE OF PENNSYLVANIA SS
COUNTY OF PHILADELPHIA SS

I, Michele Tripodi, a Notary Public, do hereby certify that Regan A. Shulman and Stephen C. Ruschak personally known to me to be the same persons whose names are respectively as Secretary and Executive Vice President of the Arch Insurance Company, a Corporation organized and existing under the laws of the State of Missouri, subscribed to the foregoing instrument, appeared before me this day in person and severally acknowledged that they being thereunto duly authorized signed, sealed with the corporate seal and delivered the said instrument as the free and voluntary act of said corporation and as their own free and voluntary acts for the uses and purposes therein set forth.



Michele Tripodi, Notary Public
My commission expires 07/31/2025

CERTIFICATION

I, Regan A. Shulman, Secretary of the Arch Insurance Company, do hereby certify that the attached Power of Attorney dated February 10, 2023 on behalf of the person(s) as listed above is a true and correct copy and that the same has been in full force and effect since the date thereof and is in full force and effect on the date of this certificate; and I do further certify that the said Stephen C. Ruschak, who executed the Power of Attorney as Executive Vice President, was on the date of execution of the attached Power of Attorney the duly elected Executive Vice President of the Arch Insurance Company.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the Arch Insurance Company on this 21st day of May, 2024

Regan A. Shulman, Secretary

This Power of Attorney limits the acts of those named therein to the bonds and undertakings specifically named therein and they have no authority to bind the Company except in the manner and to the extent herein stated.

PLEASE SEND ALL CLAIM INQUIRIES RELATING TO THIS BOND TO THE FOLLOWING ADDRESS:

Arch Insurance - Surety Division
3 Parkway, Suite 1500
Philadelphia, PA 19102



To verify the authenticity of this Power of Attorney, please contact Arch Insurance Company at SuretyAuthentic@archinsurance.com
Please refer to the above named Attorney-in-Fact and the details of the bond to which the power is attached.

SECTION 00 43 20

ACKNOWLEDGMENT OF RECEIPT OF ADDENDA

If Addenda to the Bid Documents have been issued for this Contract, please indicate receipt thereof by filling in the appropriate Addendum number and filling in date received below. If there are any questions on any Addenda that may have been issued, please contact Gabriel Lim, City and County of San Francisco, San Francisco Public Works, 49 South Van Ness Ave, Suite 1100, San Francisco, CA 94103, email: Gabriel.Lim@sfdpw.org.

Addendum No.	<u>1</u>	Date Received	<u>05/08/24</u>
Addendum No.	<u>2</u>	Date Received	<u>05/23/24</u>
Addendum No.	<u>3</u>	Date Received	<u>06/07/24</u>
Addendum No.	<u>4</u>	Date Received	<u>06/21/24</u>
Addendum No.	<u> </u>	Date Received	<u> </u>
Addendum No.	<u> </u>	Date Received	<u> </u>
Addendum No.	<u> </u>	Date Received	<u> </u>
Addendum No.	<u> </u>	Date Received	<u> </u>
Addendum No.	<u> </u>	Date Received	<u> </u>

A BID MAY BE RENDERED NONRESPONSIVE IF THE BIDDER DOES NOT ACKNOWLEDGE THE RECEIPT OF ALL ADDENDA WHICH MAY HAVE BEEN ISSUED FOR THIS CONTRACT.

Note: The above form is part of the Bid. Signing the Bid Form (Section 00 41 00) shall also constitute signature of this form and Bidder acknowledges that information provided above is true and correct.

END OF SECTION

SECTION 00 43 36 (Rev.1)
(This form replaces CMD FORM 2A)**PROPOSED SUBCONTRACTORS FORM**

06/26/24

Buhler Commercial

Date

Name of Firm, Corporation, Partnership, or Joint Venture

This Document implements listing requirements for (i) subcontractors who will perform work in excess of one-half of one percent of the Total Bid Price [Admin. Code § 6.21(a)(9) and California Public Contract Code §§ 4100 – 4114] and (ii) LBE subcontractors, suppliers and service contractors, regardless of the dollar amount of subcontract work [San Francisco Administrative Code Chapter 14B].

Important Notice: No subcontractor may be listed in a bid for a public works project unless registered with the California Department of Industrial Relations (“DIR”) pursuant to Labor Code § 1725.5 [with limited exceptions from this requirement for bid purposes only under Labor Code § 1771.1(a)]. An inadvertent listing of a subcontractor who is not registered under § 1725.5 will not be grounds for a bid protest or for determining a bid nonresponsive if the conditions set forth in Labor Code § 1771.1(c)(1) or (2) are met.

A. Subcontractors Who Will Perform Work In Excess of ½ of 1% Of Total Bid Price

Bidder shall submit with its bid a subcontractor list using the form below. Bidder shall identify each subcontractor¹ who will perform work in an amount in excess of one-half of one percent of Bidder's Total Bid Price. If this project involves the construction of streets, highways, or bridges, Bidder shall submit with its bid a subcontractor list, using the form below, identifying each subcontractor who will perform work in excess of one-half of one percent of the Total Bid Price, or \$10,000, whichever is greater.

At a minimum, Bidder must provide the following information with its Bid for each listed subcontractor: (i) name and email [Box 2]; (ii) location of the place of business [Box 3]; (iii) portion of work that will be performed by the subcontractor [Box 4] and (iv) the current valid subcontractors license [Box 8]. In addition, for items or portions of work not fully subcontracted, e.g., indicated as "partial", Bidder must provide the amount of subcontract work [Box 10] either at the time of Bid or within 24 hours after Bid opening. Bidders may provide additional identifying information [e.g., Boxes 5, 6, 7 and/or 9] within 24 hours of Bid opening.

If the City cannot identify the intended subcontractor or portion of work based on the information provided by Bidder, or where Bidder provides conflicting information, the City may consider the subcontractor or portion of work unlisted for purposes of Public Contract Code § 4106. An "unlisted" determination may render a Bid non-responsive if the technical specifications require that the work in question be performed by a subcontractor. In addition, an "unlisted" determination may render a Bidder not responsible if Bidder is not qualified to self-perform the work in question.

[Note: For an LBE subcontractor who will perform work in an amount in excess of one-half of one percent of Bidder's Total Bid Price, Bidder shall provide a single listing for that subcontractor that complies with the requirements of this paragraph A and paragraph B, below.]

B. LBE Subcontractors, Suppliers and Service Contractors

Bidder's subcontractor list submitted with its Bid shall also identify each LBE subcontractor,² supplier and service contractor (regardless of dollar amount of subcontract) for whom Bidder seeks credit toward the LBE Subcontractor Participation Requirement. Bidder must provide the following information with its Bid for each LBE: (i) type of subcontractor [Box 1]; (ii) name and email [Box 2]; (iii)

location of the place of business [Box 3]; (iv) portion of work that will be performed by the entity [Box 4]; (v) the current valid subcontractors license [Box 8]. and (vi) amount of subcontract work [Box 10]. Bidders may provide additional identifying information [e.g., Boxes 5, 6, 7, 9, 11 and/or 12] within 24 hours of Bid opening. Bidder's failure to provide the required minimum information with its Bid may result in a determination that Bidder has not met the LBE Subcontractor Participation Requirement and, therefore, its Bid is non-responsive.

LBE subcontractors who are not registered with the DIR at time of bid may not be used to receive credit towards the LBE Subcontractor Participation Requirement. The ready-mix concrete hauler need not be listed as a subcontractor on the Proposed Subcontractors Form, EXCEPT when such hauler is used to meet the LBE Subcontracting Participation Requirement.

¹For the purposes of Paragraph A, the term "subcontractor" shall mean a contractor as defined in California Public Contract Code § 4113.

²For the purposes of Paragraph B, the term "subcontractor" shall mean a person as defined in Section 14B.2 of the San Francisco Administrative Code.

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ZSFG Building 5
Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

Copy this page as needed to provide a complete listing.

Page 1 of 3

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME Bacon Plumbing		EMAIL shayne@baconplumbing.com
3. ADDRESS 1698 Hudson Avenue San Francisco, CA 94124		PHONE NO. 415-716-5600
4. BID ITEMS/PORCION OF WORK Plumbing		
5. DIR REGISTRATION NO. 1000009623	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 728650	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 171,955
11. CERTIFIED LBE? <input checked="" type="checkbox"/> Yes; <input type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input checked="" type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME Sterling Environmental Corporation		EMAIL gjacobs@sterlingenv.com
3. ADDRESS 10203 E Street Oakland, CA 94603		PHONE NO. 707-761-3101
4. BID ITEMS/PORCION OF WORK Demolition/Abatement		
5. DIR REGISTRATION NO. 1000006011	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 537909	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 376,650
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME ABCO		EMAIL ar@abcoair.com
3. ADDRESS 475 Barneveld Avenue San Francisco, CA 94124		PHONE NO. 415-648-7135
4. BID ITEMS/PORCION OF WORK HVAC		
5. DIR REGISTRATION NO. 1000024206	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 209064	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 1,174,750
11. CERTIFIED LBE? <input checked="" type="checkbox"/> Yes; <input type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input checked="" type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME McClure Electric		EMAIL sdouglas@mcclureelectric.com
3. ADDRESS 45 Rausch Street San Francisco, CA 94103		PHONE NO. 415-864-5656
4. BID ITEMS/PORCION OF WORK Electrical, Fire Alarm, Communications, Security, Access Controls		
5. DIR REGISTRATION NO. 1000014762	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 248877	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 1,236,656
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

* MBE = Minority Business Enterprise, WBE = Women Business Enterprise, OBE = Other Business Enterprise.

ZSFG Building 5
Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME Kim's Flooring		EMAIL kimsflooringinc@gmail.com
3. ADDRESS 390 Swift Avenue, Unit 21 South San Francisco, CA 94080		PHONE NO. 650-808-6888
4. BID ITEMS/PORION OF WORK Flooring		
5. DIR REGISTRATION NO. 1000006544	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 739226	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 47,500
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME Daley's Drywall		EMAIL danny@daleysdrywall.com
3. ADDRESS 960 Camden Avenue Campbell, CA 95008		PHONE NO. 408-374-7626
4. BID ITEMS/PORION OF WORK Drywall/Framing		
5. DIR REGISTRATION NO. 1000008978	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 336095	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 238,170
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME George E. Masker, Inc.		EMAIL mike.wright@maskerpainting.com
3. ADDRESS 7699 Edgewater Drive, Oakland, CA 94621		PHONE NO. 510-568-1206
4. BID ITEMS/PORION OF WORK Painting		
5. DIR REGISTRATION NO. 1000000521	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 219160	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 29,800
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME Battalion One Fire Protection		EMAIL pwhite@battaliononefire.com
3. ADDRESS 14755 Catalina St. San Leandro, CA 94577		PHONE NO. 510-653-8075
4. BID ITEMS/PORION OF WORK Fire Sprinklers		
5. DIR REGISTRATION NO. 1000003615	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 919683	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 27,944
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No	12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE	

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ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

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Page 3 of 3

1. TYPE OF SUBCONTRACTOR: <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME Miller Paneling Specialties		EMAIL stephanie@millerpaneling.com
3. ADDRESS 450 Douglas Lane Woodland, CA 95776		PHONE NO. 530-662-0860
4. BID ITEMS/PORTION OF WORK Wall Coverings/Accessories		
5. DIR REGISTRATION NO. 1000015026	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 774981	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 31,500
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No		12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE

1. TYPE OF SUBCONTRACTOR: <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME Cal West Acoustics		EMAIL joe@cwacoustics.com
3. ADDRESS 1435 Technology Ln, Suite B6 Petaluma, CA 94954		PHONE NO. 415-656-6454
4. BID ITEMS/PORTION OF WORK ACT		
5. DIR REGISTRATION NO. 1000005061	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO. 960381	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$ 33,744
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input checked="" type="checkbox"/> No		12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE

1. TYPE OF SUBCONTRACTOR: <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)		
2. SUBCONTRACTOR NAME		EMAIL
3. ADDRESS		PHONE NO.
4. BID ITEMS/PORTION OF WORK		
5. DIR REGISTRATION NO.	6. SUPPLIER ID	7. FEDERAL ID NO.
8. LICENSE NO.	9. SF BUSINESS TAX REG. NO.	10. AMOUNT OF SUB-CONTRACT WORK: \$
11. CERTIFIED LBE? <input type="checkbox"/> Yes; <input type="checkbox"/> No		12. IF LBE, CHECK APPLICABLE: <input type="checkbox"/> MBE; <input type="checkbox"/> WBE; <input type="checkbox"/> OBE* <input type="checkbox"/> Small LBE; <input type="checkbox"/> Micro LBE; <input type="checkbox"/> SBA-LBE

* MBE = Minority Business Enterprise, WBE = Women Business Enterprise, OBE = Other Business Enterprise.

If this is the last page, complete the following:

LBE Subcontractor Participation Requirement for this Contract: 20 %.

TOTAL LBE PARTICIPATION CLAIMED FOR BASE BID WORK: <u>23</u> %
--

END OF SECTION

SECTION 00 45 13

BIDDER'S QUALIFICATIONS

Refer to Section 00 21 13 (Instructions to Bidders – Contractor Bidder Qualifications) for instructions. Add additional sheets as necessary to demonstrate compliance with the requirements specified in Section 00 21 13.

1. BIDDER'S NAME: <p style="text-align: center;">Buhler Commercial</p>	
2. IS THIS A JOINT VENTURE? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No; If "Yes," list name of each joint venture partner:	
3. FEDERAL ID NO.: 47-2790101	4. SF BUSINESS TAX REG. NO.: 1018541
5. NAME OF RESPONSIBLE MANAGEMENT OFFICER: Steve Buhler	
6. DID BIDDER INSPECT THE PROJECT SITE? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No; If "Yes," list name and phone of person who did the inspection:	
7. NAME: Kapone Molina	8. PHONE NO: 415-613-5901
9. NUMBER OF YEARS BIDDER'S ORGANIZATION HAS HAD EXPERIENCE IN WORK COMPARABLE WITH THAT REQUIRED UNDER THE PROPOSED CONTRACT: <u>9</u> Years as a General Contractor _____ Years as a Subcontractor	

10. BIDDER'S PROJECT EXPERIENCE:

(a)

PROJECT TITLE: SF JOC Contract 1710		
PROJECT DESCRIPTION / SCOPE OF WORK: JOC that included work in hospitals (city owned)		
LOCATION: Address, City, State Varies		
START DATE: 10/27/17	PLANNED COMPLETION DATE: 10/27/19	ACTUAL COMPLETION DATE: 4/30/20
CONTRACT AMOUNT: \$ 7,500,000		CHANGE ORDER AMOUNT: \$ N/A
CONTRACT SATISFIES: <input checked="" type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED:	
	McKee Electric, Value Fire Protection, BBJ Electric, Lynn Safety, De Harro, Eagle Environmental	
NAME OF OWNER'S REPRESENTATIVE: Teenchee Le		
TITLE: Construction Contract Services		TELEPHONE: 415-530-0975
BUSINESS ADDRESS: 49 South Van Ness Ave, Suite #700, San Francisco, CA 94103		

DRAWING INDEX

GENERAL	
G0.1	COVER SHEET
G0.2	ABBREVIATIONS, SYMBOLS, MATERIALS, PROJECT DATA & SHEET INDEX
G0.3	CODE COMPLIANCE PLAN
ARCHITECTURAL	
A1.0	ARCHITECTURAL SPECIFICATIONS
A1.1	KEY PLAN
A4.1	PARTIAL FLOOR PLANS - V2 & L1
A4.2	PARTIAL FLOOR PLANS - L2 & L3
A4.3	PARTIAL FLOOR PLANS - L4 & L5
A4.4	PARTIAL FLOOR PLANS - L6
A5.1	INTERIOR ELEVATIONS
A9.1	INTERIOR DETAILS
A9.2	INTERIOR DETAILS
A9.5	UL LISTINGS
ELECTRICAL	
E0.1	LEGEND & GENERAL NOTES
E0.2	SPECIFICATIONS, DEMOLITION NOTE & ABBREVIATIONS
E0.3	LOAD CALCULATION
E0.4	PANEL BOARD SCHEDULE
E0.5	PANEL BOARD SCHEDULE
E0.6	PANEL BOARD SCHEDULE
E1.1	SECTIONS AND DETAILS - POWER & VOICE/DATA
E4.1	PARTIAL FLOOR PLANS - V2 & L1 - POWER AND VOICE/DATA
E4.2	PARTIAL FLOOR PLANS - L2 & L3 - POWER AND VOICE/DATA
E4.3	PARTIAL FLOOR PLANS - L4 & L5 - POWER AND VOICE/DATA
E4.4	PARTIAL FLOOR PLANS - L6 - POWER AND VOICE/DATA
E0.7	KEY PLAN - PANELBOARD LOCATIONS
E0.8	KEY PLAN - PANELBOARD LOCATIONS - LEVEL V2

SYMBOLS

	DRAWING NUMBER GROUP NUMBER DISCIPLINE PREFIX		CORNER GUARD
	(E) COLUMN LINE LETTERS IN ONE DIRECTION NUMBERS IN THE OTHER DIRECTION		EDGE GUARD/END CAP
			DIMENSION LINES
	DOOR SYMBOL DOOR MARK HARDWARE GROUP		CENTERLINE OF COLUMN OR STUD
	TYP. FURRING/PARTITION TAG SEE SHEET A9.1		FACE OF FINISH, F.O.F.
	REVISION CLOUD AROUND REVISION OPTIONAL		CENTERLINE OF OPENING
	SECTION SECTION IDENTIFICATION SHEET WHERE SECTION IS DRAWN.		CENTERLINE OF OPENING
	DETAIL DETAIL IDENTIFICATION SHEET WHERE DETAIL IS DRAWN.		AREAS WHERE NO WORK IS TO BE DONE
	INTERIOR ELEVATION(S) ELEVATION IDENTIFICATION (UNFOLD ELEVATIONS CLOCKWISE. NO ARROWS MEANS ELEVATION NOT SHOWN.) SHEET WHERE ELEVATION IS DRAWN.		EXISTING WALL OR PARTITION TO REMAIN
	ROOM TAG ROOM NAME ROOM NO. ROOM MATERIAL AND FINISH CODES 1ST NO.-FLOOR/BASE 2ND NO.-WALLS/WAINSCOT 3RD NO.-CEILING		EXISTING GYPSUM BOARD TO BE REMOVED
	OFFICE ROOM TAG ROOM NAME ROOM NO. ROOM MATERIAL AND FINISH CODES 1ST NO.-FLOOR/BASE 2ND NO.-WALLS/WAINSCOT 3RD NO.-CEILING		EXISTING CONSTRUCTION TO BE REMOVED
	CEILING ROOM TAG ROOM NAME ROOM NO. ROOM CLG. HEIGHT		DOOR TO BE REMOVED
	CODE COMPLIANCE ROOM I.D. ROOM NAME ROOM NO. AREA (SF) OCCUPANT LOAD OCCUPANCY		EXISTING DOOR TO REMAIN
	INTERIOR GLAZING PARTITION		SPRINKLER HEAD
	FURRING		ACCESS PANEL
	NEW PARTITION		DIFFUSER, SUPPLY
	PARTITION WITH SOUND INSULATION		REGISTER, EXHAUST OR RETURN
	1-HOUR FIRE RATED PARTITION		CEILING MOUNTED LIGHTING FIXTURE
	2-HOUR FIRE RATED PARTITION		PENDANT LIGHTING FIXTURE
	1 HOUR FIRE/SMOKE BARRIER		SMOKE OR HEAT DETECTOR
	FIRE EXTINGUISHER		OCCUPANCY SENSOR, CEILING MOUNTED
	FIRE EXTINGUISHER CABINET		EXIT SIGN, CEILING MOUNTED
	OWNER FURNISHED ITEMS (NOT IN CONTRACT)		WALL SCONCE
	LIMIT OF WORK WITH CONSTRUCTION BARRICADE		PAINT
	WINDOW SHADES		INTERNATIONAL SYMBOL OF ACCESSIBILITY (I.S.A.)
	SIGNAGE MARK DESIGNATED ON FLOOR PLAN A2.2 & DETAILED ON A9.4		STAIR DIRECTIONAL ARROW INDICATES UP
			RAMP DIRECTIONAL ARROW INDICATES UP

MATERIALS

	ACOUSTIC TILE OR BOARD
	CERAMIC TILE SHOW PROFILE ONLY
	CONCRETE CAST IN PLACE OR PRECAST
	EARTH
	GLASS OMIT INDICATION IN THIN MATERIAL
	GYPSUM BOARD OMIT DOUBLE LINES AT SMALL SCALE
	INSULATION, BATT
	INSULATION, RIGID
	METAL OMIT INDICATION IN THIN MATERIAL
	PLYWOOD
	WOOD, FINISH
	WOOD, FRAMING THROUGH MEMBER
	WOOD, FRAMING INTERRUPTED MEMBER
	Fire Alarm
	Floor Drain
	Foundation
	Fire Extinguisher
	Fire Hose Cabinet
	Flat Head Wood Screw
	Finish
	Fixture
	Floor
	Flashing
	Fluorescent
	Face of Concrete
	Face of Finish
	Face of Studs
	Fireproof
	Floor Sink
	Foot or Feet
	Footing
	Furring
	Future
	Gauge
	Galvanized
	Grab Bar
	Glass
	Ground
	Grade
	Gypsum
	Hose Bibb
	Hardwood
	Hardware
	Horizontal
	Hour
	Height
	High Point
	Inside Diameter (Dim.)
	Information
	Insulation
	Interior
	Intermediate
	Janitor
	Joint

ABBREVIATIONS

	And		Laminated
	Angle		Lavatory
	At		Locker
	Centerline		Light
	Diameter or Round		Masonry
	Pound or Number		Material
	Existing		Maximum
	New		Mechanical
	Relocated		Membrane
	Anchor Bolt		Metal
	Acoustical		Manufacturer
	Area Drain		Minimum
	Additional		Mirror
	Adjustable		Miscellaneous
	Above Finished Floor		Mounted
	Aggregate		Mullion
	Aluminum		North
	Alternate		Not In Contract
	Access Panel		Number
	Approximate		Nominal
	Architectural		Not To Scale
	Asbestos		Overall
	Bulletin Board		Obscure
	Board		On Center
	Backing		Outside Diameter (Dim.)
	Building		Office
	Block		Opposite Hand
	Blocking		Occupant Load Factor
	Beam		Opening
	Bottom		Opposite
	Cabinet		Owner Furnished Contractor Installed
	Cement		Office of Statewide Health Planning and Development
	Ceramic		Point
	Cast Iron		Pre-cast
	Corner Guard		Plate
	Construction Joint		Plastic Laminate
	Ceiling		Plaster
	Caulking		Plywood
	Closet		Plaster
	Clear		Point
	Cased Opening		Paper Towel Dispenser
	Column		Combination Paper Towel Dispenser & Receptacle
	Concrete		Partition
	Connection		Paper Towel Receptacle
	Construction		Quantity
	Continuous		Riser
	Corridor		Radius
	Carpet		Reference
	Countersunk		Refrigerator
	Counter		Register
	Cold Rolled Channel		Reinforced
	Center		Required
	Detail		Resilient
	Diameter		Room
	Dimension		Rough Opening
	Dispenser		Rubber
	Down		Robe Hook
	Door Opening		South
	Door		See Architectural Drawing
	Drawer		Solid Acrylic Polymer
	Downspout		Seat Cover Dispenser
	Drawing		Schedule
	Dishwasher		Soap Dispenser
	East		Section
	Each		See Electrical Drawing
	Expansion Bolt		Shelf
	Expansion Joint		Shower
	Elevation		Sheet
	Electrical		Similar
	Elevator		See Mechanical Drawing
	Emergency		Sheet Metal Screw
	Enclosure		Sanitary Napkin Dispenser
	Engineer		Sanitary Napkin Receptacle
	Electrical Panel Board		Specification
	Equal		See Plumbing Drawing
	Equipment		Square
	Existing		See Structural Drawing
	Exposed		Stainless Steel
	Expansion		Service Sink
	Exterior		Station
	Fire Alarm		Standard
	Floor Drain		Steel
	Foundation		Storage
	Fire Extinguisher		Structural
	Fire Hose Cabinet		Suspended
	Flat Head Wood Screw		Symmetrical
	Finish		Tread
	Fixture		Towel Bar
	Floor		Telephone
	Flashing		Thick
	Fluorescent		Threshold
	Face of Concrete		Toilet Paper Dispenser
	Face of Finish		Television
	Face of Studs		Top of Wall
	Fireproof		Typical
	Floor Sink		Unfinished
	Foot or Feet		Unless Otherwise Noted
	Footing		Urinal
	Furring		Vertical
	Future		Vestibule
	Gauge		Verify in Field
	Galvanized		West
	Grab Bar		With
	Glass		Wallcovering
	Ground		Water Closet
	Grade		Wood
	Gypsum		Wide Flange
	Hose Bibb		Window
	Hardwood		Where Occurs
	Hardware		Without
	Horizontal		Waterproof
	Hour		Wainscot
	Height		Weight
	High Point		Water Resistant
	Inside Diameter (Dim.)		Information
	Information		Without
	Insulation		Waterproof
	Interior		Wainscot
	Intermediate		Weight
	Janitor		Water Resistant
	Joint		

FONG & CHAN ARCHITECTS
ARCHITECTURE • PLANNING • INTERIOR DESIGN

1361 BUSH STREET TEL(415)931-8800 • SAN FRANCISCO, CA • CALIFORNIA 94109 • FAX(415)931-4601 • fca@fca-arch.com

Project

LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

ELECTRONIC HEALTH RECORDS EAST RESIDENCE

PROJECT ADDRESS: 375 LAGUNA HONDA BOULEVARD, SF, CA 94116

Consultant

ELECTRICAL ENGINEER

AAES, INC.

AGENCY APPROVAL

OSHPD PROJECT NUMBER: S181567-38-00

Issue

AUGUST 24TH, 2018

OSHPD BACKCHECK NO. 2

No.	Date	Revisions
2	8/24/2018	OSHPD BACKCHECK NO. 2
1	8/10/2018	OSHPD BACKCHECK NO. 1
1	7/7/2018	ISSUED FOR PERMIT

Drawn	BC, KL
Proj. Arch.	
Proj. Mgr.	JR
Section Head	
PROJECT NO.	FCA 437
Drawing Title	

ABBREVIATIONS, SYMBOLS, MATERIALS, PROJECT DATA & DRAWING INDEX

Sheet No. **G0.2**

Scale **NO SCALE**

Job No.

DRAWING INDEX

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SYMBOLS

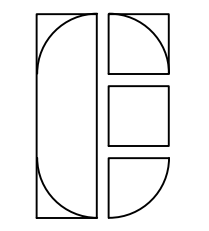
A2-3	DRAWING NUMBER GROUP NUMBER DISCIPLINE PREFIX		CORNER GUARD
			EDGE GUARD/END CAP
	(E) COLUMN LINE LETTERS IN ONE DIRECTION NUMBERS IN THE OTHER DIRECTION		DIMENSION LINES
	DOOR SYMBOL DOOR MARK HARDWARE GROUP		CENTERLINE OF COLUMN OR STUD
	TYP. FURRING/PARTITION TAG SEE SHEET A9.1		FACE OF FINISH, F.O.F.
	REVISION CLOUD AROUND REVISION OPTIONAL		CENTERLINE OF OPENING
	SECTION SECTION IDENTIFICATION SHEET WHERE SECTION IS DRAWN.		CENTERLINE OF OPENING
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	INTERIOR ELEVATION(S) ELEVATION IDENTIFICATION (UNFOLD ELEVATIONS CLOCKWISE. NO ARROWS MEANS ELEVATION NOT SHOWN.) SHEET WHERE ELEVATION IS DRAWN.		EXISTING WALL OR PARTITION TO REMAIN
	ROOM TAG ROOM NAME ROOM NO. ROOM MATERIAL AND FINISH CODES 1ST NO.-FLOOR/BASE 2ND NO.-WALLS/WAINSCOT 3RD NO.-CEILING		EXISTING GYPSUM BOARD TO BE REMOVED
	CEILING ROOM TAG ROOM NAME ROOM NO. ROOM CLG. HEIGHT		EXISTING CONSTRUCTION TO BE REMOVED
	CODE COMPLIANCE ROOM I.D. ROOM NAME ROOM NO. AREA (SF) OCCUPANT LOAD OCCUPANCY		DOOR TO BE REMOVED
	INTERIOR GLAZING PARTITION		EXISTING DOOR TO REMAIN
	FURRING		SPRINKLER HEAD
	NEW PARTITION		ACCESS PANEL
	PARTITION WITH SOUND INSULATION		DIFFUSER, SUPPLY
	1-HOUR FIRE RATED PARTITION		REGISTER, EXHAUST OR RETURN
	2-HOUR FIRE RATED PARTITION		CEILING MOUNTED LIGHTING FIXTURE
	1 HOUR FIRE/SMOKE BARRIER		PENDANT LIGHTING FIXTURE
	FIRE EXTINGUISHER		SMOKE OR HEAT DETECTOR
	FIRE EXTINGUISHER CABINET		OCCUPANCY SENSOR, CEILING MOUNTED
	OWNER FURNISHED ITEMS (NOT IN CONTRACT)		EXIT SIGN, CEILING MOUNTED
	LIMIT OF WORK WITH CONSTRUCTION BARRICADE		WALL SCONCE
	WINDOW SHADES		PAINT
	INTERNATIONAL SYMBOL OF ACCESSIBILITY (I.S.A.)		SIGNAGE MARK DESIGNATED ON FLOOR PLAN A2.2 & DETAILED ON A9.4
	STAIR DIRECTIONAL ARROW INDICATES UP		RAMP DIRECTIONAL ARROW INDICATES UP

MATERIALS

	ACOUSTIC TILE OR BOARD
	CERAMIC TILE SHOW PROFILE ONLY
	CONCRETE CAST IN PLACE OR PRECAST
	EARTH
	GLASS OMIT INDICATION IN THIN MATERIAL
	GYPSUM BOARD OMIT DOUBLE LINES AT SMALL SCALE
	INSULATION, BATT
	INSULATION, RIGID
	METAL OMIT INDICATION IN THIN MATERIAL
	PLYWOOD
	WOOD, FINISH
	WOOD, FRAMING THROUGH MEMBER
	WOOD, FRAMING INTERRUPTED MEMBER

ABBREVIATIONS

&	And	LAM.	Laminate
∠	Angle	LAV.	Lavatory
At	At	LKR.	Locker
C	Centerline	LT.	Light
∅	Diameter or Round	MAS.	Masonry
#	Pound or Number	MAT.	Material
(E)	Existing	MAX.	Maximum
(N)	New	MECH.	Mechanical
(R)	Relocated	MEMB.	Membrane
A.B.	Anchor Bolt	MET.	Metal
ACOUS.	Acoustical	MFR.	Manufacturer
A.D.	Area Drain	MIN.	Minimum
ADD.	Additional	MIR.	Mirror
ADJ.	Adjustable	MISC.	Miscellaneous
A.F.F.	Above Finished Floor	MTD.	Mounted
AGGR.	Aggregate	MUL.	Mullion
AL.	Aluminum	N.	North
ALT.	Alternate	N.I.C.	Not In Contract
A.P.	Access Panel	NO. or #	Number
APPROX.	Approximate	NOM.	Nominal
ARCH.	Architectural	N.T.S.	Not To Scale
ASB.	Asbestos	O.A.	Overall
B.B.	Bulletin Board	OBS.	Obscure
BD.	Board	O.C.	On Center
BKG.	Backing	O.D.	Outside Diameter (Dim.)
BLDG.	Building	OFF.	Office
BLK.	Block	O.H.	Opposite Hand
BLKG.	Blocking	O.L.F.	Occupant Load Factor
BM.	Beam	OPNG.	Opening
BOT.	Bottom	OPP.	Opposite
CAB.	Cabinet	O.F.C.I.	Owner Furnished Contractor Installed
CEM.	Cement	OSHPD	Office of Statewide Health Planning and Development
CER.	Ceramic	P.	Point
CI.	Cast Iron	PRCST.	Pre-cast
C.G.	Corner Guard	PL.	Plate
C.J.	Construction Joint	P.LAM.	Plastic Laminate
CLG.	Ceiling	PLAS.	Plaster
CLKG.	Caulking	PLYWD.	Plywood
CLD.	Closet	PR.	Point
CLR.	Clear	PT.	Point
C.O.	Cased Opening	P.T.D.	Paper Towel Dispenser
COL.	Column	P.T.D/R	Combination Paper Towel Dispenser & Receptacle
CONC.	Concrete	PTN.	Partition
CONN.	Connection	P.T.R.	Paper Towel Receptacle
CONSTR.	Construction	QTY.	Quantity
CONT.	Continuous	R.	Riser
CORR.	Corridor	RAD.	Radius
CPT.	Carpet	REF.	Reference
CTSK.	Countersunk	REFR.	Refrigerator
CNTR.	Counter	RGTR.	Register
C.R.C.	Cold Rolled Channel	REINF.	Reinforced
CTR.	Center	REQ.	Required
DET.	Detail	RESIL.	Resilient
DIA.	Diameter	RM.	Room
DIM.	Dimension	R.O.	Rough Opening
DISP.	Dispenser	RUB.	Rubber
DN.	Down	R.H.	Robe Hook
D.O.	Door Opening	S.	South
DR.	Door	S.A.D.	See Architectural Drawing
DWR.	Drawer	S.A.P.	Solid Acrylic Polymer
DS.	Downspout	S.C.D.	Seat Cover Dispenser
DWG.	Drawing	SCHED.	Schedule
D.W.	Dishwasher	S.D.	Soap Dispenser
E.	East	SECT.	Section
EA.	Each	S.E.D.	See Electrical Drawing
E.B.	Expansion Bolt	SH.	Shelf
E.J.	Expansion Joint	SHR.	Shower
EL.	Elevation	SH.T.	Sheet
ELEC.	Electrical	SIM.	Similar
ELEV.	Elevator	S.M.D.	See Mechanical Drawing
EMER.	Emergency	S.M.S.	Sheet Metal Screw
ENCL.	Enclosure	S.N.D.	Sanitary Napkin Dispenser
ENGR.	Engineer	S.N.R.	Sanitary Napkin Receptacle
E.P.B.	Electrical Panel Board	SPEC.	Specification
EQ.	Equal	S.P.D.	See Plumbing Drawing
EQPT.	Equipment	SQ.	Square
EXST.	Existing	S.S.D.	See Structural Drawing
EXPO.	Exposed	S.ST.	Stainless Steel
EXP.	Expansion	S.SK.	Service Sink
EXT.	Exterior	STA.	Station
F.A.	Fire Alarm	STD.	Standard
F.D.	Floor Drain	STL.	Steel
FDN.	Foundation	STOR.	Storage
F.E.	Fire Extinguisher	STR.	Structural
F.H.C.	Fire Hose Cabinet	SUSP.	Suspended
F.H.W.S.	Flat Head Wood Screw	SYM.	Symmetrical
FIN.	Finish	T.	Tread
FIXT.	Fixture	T.B.	Towel Bar
FL.	Floor	TEL.	Telephone
FLASH.	Flashing	THK.	Thick
FLUOR.	Fluorescent	THRES.	Threshold
F.O.C.	Face of Concrete	T.P.D.	Toilet Paper Dispenser
F.O.F.	Face of Finish	T.V.	Television
F.O.S.	Face of Studs	T.W.	Top of Wall
FPRF.	Fireproof	TYP.	Typical
F.S.	Floor Sink	UNF.	Unfinished
FT.	Foot or Feet	U.O.N.	Unless Otherwise Noted
FTS.	Footing	UR.	Urinal
FURR.	Furring	VERT.	Vertical
FUT.	Future	VEST.	Vestibule
GA.	Gauge	V.I.F.	Verify In Field
GALV.	Galvanized	W.	West
G.B.	Grab Bar	W/	With
GL.	Glass	WC.	Wallcovering
GND.	Ground	W.C.	Water Closet
GR.	Grade	WD.	Wood
GYP.	Gypsum	W.F.	Wide Flange
H.B.	Hose Bibb	WIN.	Window
HDWD.	Hardware	W/O.	Where Occurs
HDWE.	Hardware	W/O	Without
HORIZ.	Horizontal	WP.	Waterproof
HR.	Hour	WSCOT.	Wainscot
HGT. or H.	Height	WT.	Weight
H.P.	High Point	W.R.	Water Resistant
I.D.	Inside Diameter (Dim.)	JAN.	Janitor
INFO.	Information	JT.	Joint
INSUL.	Insulation		
INT.	Interior		
INTER.	Intermediate		



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 - E0.6 KEY PLAN - PANELBOARD LOCATIONS
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SYMBOLS

A2-3 ← DRAWING NUMBER
 ← GROUP NUMBER
 ← DISCIPLINE PREFIX

(A) (E) COLUMN LINE LETTERS IN ONE DIRECTION
1 NUMBERS IN THE OTHER DIRECTION

1 DOOR SYMBOL
1 DOOR MARK
2 HARDWARE GROUP

A1 TYP. FURRING/PARTITION TAG
 SEE SHEET A9.1

REVISION
 CLOUD AROUND REVISION
 OPTIONAL

20 SECTION IDENTIFICATION
8-1 SHEET WHERE SECTION IS DRAWN.

4 DETAIL IDENTIFICATION
9-1 SHEET WHERE DETAIL IS DRAWN.

INTERIOR ELEVATION(S)
 ELEVATION IDENTIFICATION
 (UNFOLD ELEVATIONS CLOCKWISE.
 NO ARROWS MEANS ELEVATION
 NOT SHOWN.)
4 SHEET WHERE ELEVATION IS
5-1 DRAWN.

ROOM TAG
104 ROOM NAME
1A2 ROOM NO.
1A2 ROOM MATERIAL AND FINISH CODES
 1ST NO.-FLOOR/BASE
 2ND NO.-WALLS/WAINSCOT
 3RD NO.-CEILING

CEILING ROOM TAG
104 ROOM NAME
8-0 ROOM NO.
8-0 ROOM CLG. HEIGHT

CODE COMPLIANCE ROOM I.D.
104 ROOM NAME
X SF ROOM NO.
X SF AREA (SF)
X OCC OCCUPANT LOAD
X OCCUPANCY

INTERIOR GLAZING PARTITION

FURRING

NEW PARTITION

PARTITION WITH SOUND INSULATION

1-HOUR FIRE RATED PARTITION

2-HOUR FIRE RATED PARTITION

1 HOUR FIRE/SMOKE BARRIER

FIRE EXTINGUISHER
 F.E.

FIRE EXTINGUISHER CABINET
 F.E.C.

OWNER FURNISHED ITEMS (NOT IN CONTRACT)
 N.I.C.

LIMIT OF WORK WITH CONSTRUCTION BARRICADE

WINDOW SHADES

CORNER GUARD

EDGE GUARD/END CAP

DIMENSION LINES

CENTERLINE OF COLUMN OR STUD

FACE OF FINISH, F.O.F.

CENTERLINE OF OPENING

CENTERLINE OF OPENING

AREAS WHERE NO WORK IS TO BE DONE

EXISTING WALL OR PARTITION TO REMAIN

EXISTING GYPSUM BOARD TO BE REMOVED

EXISTING CONSTRUCTION TO BE REMOVED

DOOR TO BE REMOVED

EXISTING DOOR TO REMAIN

SPRINKLER HEAD

ACCESS PANEL

DIFFUSER, SUPPLY

REGISTER, EXHAUST OR RETURN

CEILING MOUNTED LIGHTING FIXTURE

PENDANT LIGHTING FIXTURE

SMOKE OR HEAT DETECTOR

OCCUPANCY SENSOR, CEILING MOUNTED

EXIT SIGN, CEILING MOUNTED

WALL SCONCE

PAINT

INTERNATIONAL SYMBOL OF ACCESSIBILITY (I.S.A.)

SIGNAGE MARK DESIGNATED ON FLOOR PLAN A2.2 & DETAILED ON A9.4

STAIR DIRECTIONAL ARROW INDICATES UP

RAMP DIRECTIONAL ARROW INDICATES UP

MATERIALS

- ACOUSTIC TILE OR BOARD
- CERAMIC TILE SHOW PROFILE ONLY
- CONCRETE CAST IN PLACE OR PRECAST
- EARTH
- GLASS OMIT INDICATION IN THIN MATERIAL
- GYPSUM BOARD OMIT DOUBLE LINES AT SMALL SCALE
- INSULATION, BATT
- INSULATION, RIGID
- METAL OMIT INDICATION IN THIN MATERIAL
- PLYWOOD
- WOOD, FINISH
- WOOD, FRAMING THROUGH MEMBER
- WOOD, FRAMING INTERRUPTED MEMBER

ABBREVIATIONS

- &** And
- L** Lavatory
- ⊙** Centerline
- ⊘** Diameter or Round
- #** Pound or Number
- (E)** Existing
- (N)** New
- (R)** Relocated
- A.B.** Anchor Bolt
- ACOUS.** Acoustical
- A.D.** Area Drain
- ADD.** Additional
- ADJ.** Adjustable
- A.F.F.** Above Finished Floor
- AGGR.** Aggregate
- AL.** Aluminum
- ALT.** Alternate
- A.P.** Access Panel
- APPROX.** Approximate
- ARCH.** Architectural
- ASB.** Asbestos
- B.B.** Bulletin Board
- BD.** Board
- BKG.** Backing
- BLDG.** Building
- BLK.** Block
- BLKG.** Blocking
- BM.** Beam
- BOT.** Bottom
- CAB.** Cabinet
- CEM.** Cement
- CER.** Ceramic
- C.I.** Cast Iron
- C.G.** Corner Guard
- C.J.** Construction Joint
- CLG.** Ceiling
- CLKG.** Caulking
- CLO.** Closet
- CLR.** Clear
- C.O.** Cased Opening
- COL.** Column
- CONC.** Concrete
- CONN.** Connection
- CONSTR.** Construction
- CONT.** Continuous
- CORR.** Corridor
- CPT.** Carpet
- CTSK.** Countersunk
- CNTR.** Counter
- C.R.C.** Cold Rolled Channel
- CTR.** Center
- DET.** Detail
- DIA.** Diameter
- DIM.** Dimension
- DISP.** Dispenser
- DN.** Down
- D.O.** Door Opening
- DR.** Door
- DWR.** Drawer
- DS.** Downspout
- DWG.** Drawing
- D.W.** Dishwasher
- E.** East
- E.A.** Each
- E.B.** Expansion Bolt
- E.J.** Expansion Joint
- EL.** Elevation
- ELEC.** Electrical
- ELEV.** Elevator
- EMER.** Emergency
- ENCL.** Enclosure
- ENGR.** Engineer
- E.P.B.** Electrical Panel Board
- EQ.** Equal
- EQT.** Equipment
- EXST.** Existing
- EXPO.** Exposed
- EXP.** Expansion
- EXT.** Exterior
- F.A.** Fire Alarm
- F.D.** Floor Drain
- FDN.** Foundation
- F.E.** Fire Extinguisher
- F.H.C.** Fire Hose Cabinet
- F.H.W.S.** Flat Head Wood Screw
- FIN.** Finish
- FXT.** Fixture
- FL.** Floor
- FLASH.** Flashing
- FLUOR.** Fluorescent
- F.O.C.** Face of Concrete
- F.O.F.** Face of Finish
- F.O.S.** Face of Studs
- F.P.R.F.** Fireproof
- F.S.** Floor Sink
- FT.** Foot or Feet
- FTG.** Footing
- FURR.** Furring
- FUT.** Future
- G.A.** Gauge
- GALV.** Galvanized
- G.B.** Grab Bar
- GL.** Glass
- GND.** Ground
- GR.** Grade
- GYP.** Gypsum
- H.B.** Hose Bibb
- HDWD.** Hardwood
- HDWE.** Hardware
- HORIZ.** Horizontal
- HR.** Hour
- HGT or H.** Height
- H.P.** High Point
- I.D.** Inside Diameter (Dim.)
- INFO.** Information
- INSUL.** Insulation
- INT.** Interior
- INTER.** Intermediate
- JAN.** Janitor
- JT.** Joint
- LAM.** Laminate
- LAV.** Lavatory
- LKR.** Locker
- LT.** Light
- MAS.** Masonry
- MAT.** Material
- MAX.** Maximum
- MECH.** Mechanical
- MEMB.** Membrane
- MET.** Metal
- MFR.** Manufacturer
- MIN.** Minimum
- MIR.** Mirror
- MISC.** Miscellaneous
- MTD.** Mounted
- MUL.** Mullion
- N.** North
- N.I.C.** Not in Contract
- NO. or #** Number
- NOM.** Nominal
- N.T.S.** Not To Scale
- O.A.** Overall
- OBS.** Obscure
- O.C.** On Center
- O.D.** Outside Diameter (Dim.)
- OFF.** Office
- O.H.** Opposite Hand
- O.L.F.** Occupant Load Factor
- OPNG.** Opening
- OPP.** Opposite
- O.F.C.I.** Owner Furnished Contractor Installed
- OSHPD** Office of Statewide Health Planning and Development
- P.** Point
- PRCST.** Pre-cast
- PL.** Plate
- P.LAM.** Plastic Laminate
- PLAS.** Plaster
- PLYWD.** Plywood
- PR.** Pair
- PT.** Point
- P.T.D.** Paper Towel Dispenser
- P.T.D/R** Combination Paper Towel Dispenser & Receptacle
- PTN.** Partition
- P.T.R.** Paper Towel Receptacle
- QTY.** Quantity
- R.** Riser
- RAD.** Radius
- REF.** Reference
- REFR.** Refrigerator
- RGR.** Register
- REINF.** Reinforced
- REQ.** Required
- RESIL.** Resilient
- RM.** Room
- R.O.** Rough Opening
- RUB.** Rubber
- R.H.** Robe Hook
- S.** South
- S.A.D.** See Architectural Drawing
- S.A.P.** Solid Acrylic Polymer
- S.C.D.** Seat Cover Dispenser
- SCHED.** Schedule
- S.D.** Soap Dispenser
- SECT.** Section
- S.E.D.** See Electrical Drawing
- SH.** Shelf
- SHR.** Shower
- SHT.** Sheet
- SIM.** Similar
- S.M.D.** See Mechanical Drawing
- S.M.S.** Sheet Metal Screw
- S.N.D.** Sanitary Napkin Dispenser
- S.N.R.** Sanitary Napkin Receptacle
- SPEC.** Specification
- S.P.D.** See Plumbing Drawing
- SQ.** Square
- S.S.D.** See Structural Drawing
- S.S.T.** Stainless Steel
- S.SK.** Service Sink
- STA.** Station
- STD.** Standard
- STL.** Steel
- STOR.** Storage
- STR.** Structural
- SUSP.** Suspended
- SYM.** Symmetrical
- T.** Tread
- T.B.** Towel Bar
- TEL.** Telephone
- THK.** Thick
- THRES.** Threshold
- T.P.D.** Toilet Paper Dispenser
- T.V.** Television
- T.W.** Top of Wall
- TYP.** Typical
- UNF.** Unfinished
- U.O.N.** Unless Otherwise Noted
- UR.** Urinal
- VERT.** Vertical
- VEST.** Vestibule
- V.I.F.** Verify in Field
- W.** West
- W/** With
- WC.** Wallcovering
- W.C.** Water Closet
- WD.** Wood
- W.F.** Wide Flange
- WIN.** Window
- W.O.** Where Occurs
- W/O** Without
- WP.** Waterproof
- WSCT.** Wainscot
- WT.** Weight
- W.R.** Water Resistant



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 FCA 437

Drawing Title

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Sheet No. **G0.2**

Scale **NO SCALE**

Job No.

SECTION 00 52 00

AGREEMENT FORM

THIS AGREEMENT made for the convenience of the parties this 27th day of October 20 17 by and between Buhler Commercial located at 400 Brannan Street, Suite 204, San Francisco, CA 94107 ("CONTRACTOR"), and the City and County of San Francisco, State of California (the "CITY"), acting through the Director (the "DIRECTOR") of the San Francisco Public Works, under and by virtue of the Charter and Administrative Code of the City and County of San Francisco.

WHEREAS, the DIRECTOR awarded this AGREEMENT to CONTRACTOR on the 27th day of October, 2017, under AWARD OF CONTRACT ORDER NO. 186,618, as more fully appears in the formal record of the DIRECTOR:

**PW JOC J37 GEN BLDG SVC
(San Francisco Public Works Contract No. 100005796)**

NOW, THEREFORE, CONTRACTOR, in consideration of the mutual covenants set forth in this AGREEMENT, promises and agrees to provide all services to construct the Project in accordance with the requirements of the Contract Documents, to perform the Work in good and workmanlike manner to the satisfaction of the DIRECTOR, to prosecute the Work with diligence from day to day to Final Completion, to furnish all construction work, labor and materials to be used in the execution and completion of the Work in accordance with the Contract Documents, and to otherwise fulfill all of CONTRACTOR's obligations under the Contract Documents, as and when required under the Contract Documents to the satisfaction of the DIRECTOR.

CONTRACTOR's execution of this AGREEMENT signifies its acceptance of the Contract Term and Adjustment Factors as being sufficient for completion of the Work, as well as acceptance of the other terms and conditions of the Contract Documents.

ARTICLE 1 - WORK

- 1.01 Contract Documents. CONTRACTOR shall Provide all Work according to the Contract Documents, which are incorporated into and made a part of this AGREEMENT by this reference, and all labor and materials used in providing the Work shall comply with the Contract Documents. The Work will be set forth in the Detailed Scopes of Work referenced in the Task Orders. The Contract Documents, which comprise the entire agreement between CONTRACTOR and the CITY concerning the Provision of the Work, are defined in the General Conditions (Section 00 72 00). Any undefined term used in this AGREEMENT shall be given the definition set forth in the General Conditions (Section 00 72 00).
- 1.02 Contractor's General Responsibilities. CONTRACTOR shall provide a fully functional, complete and operational Project constructed in accordance with the Contract Documents and as set forth in the Detailed Scopes of Work referenced in the Task Orders, including but not limited to, all investigations, analyses, surveys, engineering, procurement, materials, labor, workmanship, construction and erection, commissioning, equipment, shipping, subcontractors, material suppliers, permits, insurance, bonds, fees, taxes, duties, documentation, spare parts, materials for initial operation, security, disposal, startup, testing, training, warranties, guarantees, and all incidentals.

ARTICLE 2 - CONTRACT TIME

- 2.01 Contract Term: This Contract shall commence on the date of notification to Contractor of executed Contract and shall expire after two years thereafter, or when the cumulative amount of issued Task Orders reaches the Maximum Contract Value, whichever comes first. The Contract Term may be

extended for a total duration of not more than five years from the date of commencement for the completion of issued Task Orders, but no new Task Orders will be issued after the first four years.

- 2.02 Task Order Time and Completion Dates. The Task Order Time for an individual Task Order begins with the issuance of the Task Order Notice to Proceed and expires on the date indicated on the Task Order Notice to Proceed plus any extensions thereof allowed, and Finally Complete in accordance with the General Conditions (Section 00 72 00).
- 2.03 Liquidated Damages. It is understood and agreed by and between CONTRACTOR and the CITY that time is of the essence in all matters relating to the Contract Documents and that the CITY will suffer financial loss if the Work of a Task Order is not completed within the above-stated Task Order Time, plus any extensions thereof allowed in accordance with Article 8 of the General Conditions (Section 00 72 00). The CITY and CONTRACTOR further understand and agree that the actual cost to CITY which would result from CONTRACTOR's failure to complete the Work of a Task Order within the Task Order Time is extremely difficult, if not impossible, to determine. Accordingly, CONTRACTOR and the CITY agree that as liquidated damages for delay (but not as a penalty), CONTRACTOR shall pay the CITY the amounts set forth in each Task Order in accordance with Section 00 73 02 (Contract Time and Liquidated Damages) for each calendar day that expires after the Task Order Time and the Work remains incomplete.

ARTICLE 3 – CONTRACT SUM

3.01 Contract Sum.

- A. Maximum Contract Value: \$5,000,000 (five million dollars). The cumulative value of Task Orders will not exceed the Maximum Contract Value. The Maximum Contract Value may be extended to not more than 150% of the original Maximum Contract Value. The City does not guarantee the Contractor will receive this volume of Work.

Minimum Contract Value: \$50,000 (Fifty Thousand Dollars). The Contractor will receive the opportunity to perform Task Orders totaling at least \$50,000 during the Contract Term.

- B. CONTRACTOR and the CITY agree that, upon performance and fulfillment of the mutual covenants set forth herein, the CITY will, in the manner provided by law and as set forth in the Contract Documents, pay or cause to be paid to CONTRACTOR the following price(s), as indicated in the Schedule of Bid Adjustment Factors on the Bid Form (Section 00 41 00):

1. Lump Sum Amounts for Task Order Work, including any Supplemental Task Orders or Unilateral Task Orders.
2. Task Order Sum shall be based on the Adjustment Factors as submitted in the Bid and listed below:

Normal Working Hours (NWH): Undersigned shall perform any or all functions called for during Normal Working Hours (7:00 a.m. to 5:00 p.m.) in the quantities specified in individual Task Orders for this Contract for the Unit Prices specified in the Construction Task Catalog® multiplied by the Adjustment Factor of **1.3700**.

Other Than Normal Working Hours (OTN): Undersigned shall perform any or all functions called for during Other Than Normal Working Hours in the quantities specified in individual Task Orders for this Contract for the Unit Prices specified in the Construction Task Catalog® multiplied by the Adjustment Factor of **1.7000**.

Contractor's aforesaid Adjustment Factors shall be adjusted annually by using actual escalation/de-escalation as measured by the Construction Cost Index (CCI) for San Francisco, published in the ENR (formally known as Engineering News Record).

- C. CONTRACTOR understands and agrees that the CONTRACTOR shall be solely responsible for providing all resources that may be necessary to provide the Work, and that the CITY shall have no obligation whatsoever to finance any part of such costs except with respect to those amounts which become due under the terms and conditions of the Contract Documents.

- 3.02 Certification by Controller. This AGREEMENT is subject to the budget and fiscal provisions of the CITY's Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of the CITY's obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization.

ARTICLE 4 – LABOR REQUIREMENTS

- 4.01 Applicable Laws and Agreements. Compensation and working conditions for labor performed or services rendered under this AGREEMENT shall be in accordance with the Contract Documents, the San Francisco Charter, and applicable sections of the San Francisco Administrative Code, including section 6.22(e). In Addition, this Project is subject to the requirements of the San Francisco Local Hiring Policy for Construction. San Francisco Administrative Code section 6.22(g). Refer to Section 00 73 30 for further information.
- 4.02 Prevailing Wages. The latest Wage Rates for Private Employment on Public Contracts in the City and County of San Francisco, as determined by the San Francisco Board of Supervisors and the Director of the California Department of Industrial Relations, and, when federal funds are involved, the current General Wage Determination Decisions, as determined by the U.S. Secretary of Labor, as same may be changed during the term of this AGREEMENT, shall be included in this AGREEMENT and are hereby incorporated by this reference. CONTRACTOR agrees that any person performing labor in the provision of the Work shall be paid not less than the highest general prevailing rate of wages as so determined. If federal funds are involved, where the minimum rate of pay for any classification differs among State, City and Federal wage rate determinations, the highest of the three rates of pay shall prevail. CONTRACTOR shall include, in any contract or subcontract relating to the Work, a requirement that all persons performing labor under such contract or subcontract shall be paid not less than the highest prevailing rate of wages for the labor so performed. CONTRACTOR shall require any contractor to provide, and shall deliver to CITY every month during any construction period, certified payroll reports with respect to all persons performing labor in the Provision of the Work.
- A. Copies of the latest prevailing wage rates are on file at the San Francisco Public Works, City and County of San Francisco, Maurice Williams, Manager, PCS, 30 Van Ness Avenue, 3rd Floor, San Francisco, CA, 94102 and are also available on the Internet at <http://www.dir.ca.gov/oprl/DPreWageDetermination.htm> .
- 4.03 Penalties. CONTRACTOR shall forfeit to the CITY back wages due plus not less than fifty dollars (\$50.00) for:
- A. Each laborer, workman, or mechanic employed in the provision of the Work, for each calendar day or portion thereof during which such laborer, workman, or mechanic is not paid the highest general prevailing rate of wage for the work performed; or
- B. Each laborer, mechanic or artisan employed in the provision of the Work, for each calendar day or portion thereof during which such laborer, mechanic or artisan is compelled or permitted to work for a longer period than five days (Monday-Friday) per

calendar week of eight hours each, and not compensated in accordance with the prevailing overtime standard and rate.

ARTICLE 5 – NOTICES TO PARTIES

5.01 Unless otherwise indicated in the Contract Documents, all written communications sent by the Parties may be by U.S. mail, e-mail or by fax, and shall be addressed as follows:

To CITY: Jason Chin, JOC Program Manager
30 Van Ness Avenue, 3rd Floor
San Francisco, CA 94102
Jason.Chin@sfdpw.org
(415) 558-4420

To CONTRACTOR: Buhler Commercial
Steve Buhler, President
400 Brannan Street, Suite 204
San Francisco, CA 94107
Steve@buhlercommercial.com
(415) 608-0610

5.02 From time to time, the parties may designate new address information by notice in writing, delivered to the other Party.

5.03 The delivery to CONTRACTOR at the legal address listed above, as it may be amended upon written notice, or the depositing in any post office or post office box regularly maintained by the United States Postal Service in a postage paid wrapper directed to CONTRACTOR at such address, of any drawing, notice, letter or other communication shall be deemed legal and sufficient service thereof upon CONTRACTOR.

ARTICLE 6 – TERMINATION AND SURVIVAL

6.01 This AGREEMENT and the other Contract Documents shall terminate when all obligations required to be performed by CONTRACTOR and the CITY have been fulfilled, unless sooner terminated as set forth in Article 14 of the General Conditions (Section 00 72 00).

6.02 The provisions of the Contract Documents which by their nature survive termination of the Contract, including without limitation all warranties, indemnities, payment obligations, and the City's right to audit Contractor's books and records, shall remain in full force and effect after termination of the Contract.

IN WITNESS WHEREOF, the CONTRACTOR and the CITY have hereunto set their hands and seals, and have executed this AGREEMENT in duplicate, the day and year first above written.

CONTRACTOR:

By my signature hereunder, as CONTRACTOR, I certify that I have read and understand the section captioned MacBride Principles – Northern Ireland including in Section 00 73 73, the CITY's statement urging companies doing business in Northern Ireland to move towards resolving employment inequities, encouraging compliance with the MacBride Principles, and urging San Francisco companies to do business with corporations that abide by the MacBride Principles.

I further certify that I am aware of the provisions of section 3700 of the Labor Code which require every employer to be insured against liability for worker's compensation or to undertake self-insurance in accordance with the provisions of that code, and I will comply with such provisions before commencing the performance of the Work of this Contract.

Principal
BY: _____

Title

CITY:

Recommended By:

Project Manager: _____

Division Manager: _____

Deputy Director: _____

Approved as to form:
DENNIS J. HERRERA
City Attorney

APPROVED:

Director of Public Works

By: _____
Deputy City Attorney

END OF SECTION



**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION**

RECEIVED

OFFICE USE ONLY	
Project #	Increment #

Notice of Start of Construction

Facility

Project # S181567-38-00
 Facility # 12432 Facility Name Laguna Honda Hospital and Rehabilitation Center
 OSHPD Building # BLD - 5918 Building Name East Residence - Bldg 08
 Type of Facility Acute Psychiatric Hospital General Acute Care Hospital Skilled Nursing or Intermediate Care Facility
 Correctional Treatment Center Licensed Clinic

Record Detail

Record/Project Name Electronic Health Records - Workstations - East Residence
 Detailed Description

Install power/data and in-wall supports for new electronic health records workstations throughout east residence.

Applicant

Notice of Start of Construction made by
 Administrator Authorized Agent (Authorization must be attached) Legal Owner
 Print Name BENITO OCQUIN Title EXEC. PROF. IYGR
 Signature Date 12.05.18

Application Specific Information – Notice of Start of Construction

Construction Start Date 12.13.18
Contractor Information License Number 1003262
 First Name Steve M.I. C Last Name Buhler
 Organization Name Buhler Commercial
 Street Address 400 Brannan Street
 Address Line 2 Suite 204
 City San Francisco State CA Zip Code 94107
 Phone (415)610-8650 Phone 2 _____ Fax _____
 Notes _____

Contract Costs

Contract Award Date 12/4/18

Contract Construction Costs <i>(excluding fixed equipment, imaging equipment, design fees, inspection fees, and off-site improvements)</i>	\$ <u>399,960.61</u>
Contract Fixed Equipment Costs <i>(sterilizers, chillers, boilers, etc., excluding installation)</i>	\$ _____
Contract Cost of Imaging Equipment <i>(X-ray, MRI, CT Scan, etc., excluding installation cost)</i>	\$ _____

Note: See Instructions for Fee Information





**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION**

**INSTRUCTIONS FOR NOTICE OF START OF CONSTRUCTION
(OSH-FD-801)**

Facility

- Enter the Office of Statewide Health Planning and Development (OSHPD) project number.
- Enter the OSHPD facility identification number.
- Enter the name of the facility as it appears on the facility license.
- Enter the OSHPD building number and building name where the work is to be performed.
- Indicate the type of facility as it is licensed.

Record Detail

- Enter the record/project name.
- Enter a detailed description of the work to be performed.

Applicant

- Indicate if this notice is being submitted by the Administrator, Authorized Agent (authorization must be attached), or the Legal Owner, and print the respective name, title, sign and date.

Application Specific Information – Notice of Start of Construction

- Enter the construction start date.
- Provide the contractor information for the project. Include the Contractor's license number, name, organization name, street address, city, state, zip code, phone number and fax number.

Contract Costs

- Enter the contract award date.
- Enter the contract construction cost of the project excluding fixed equipment to be permanently attached (electrically, mechanically or structurally) to the building, imaging equipment, design fees, inspection fees, and off-site improvements.
- Enter the contract cost or value of fixed equipment (items that are permanently affixed to the building or permanently connected to a service distribution system that is designed and installed for the specific use of the equipment), excluding installation costs.
- Enter the contract cost or value of imaging equipment (X-ray, MRI, CT Scan, etc.), excluding installation cost.

Fee Information:

Acute Care Hospital fees shall be 1.64% of the contract/estimated construction cost, including fixed equipment. Imaging equipment shall be 0.164% of the contract/estimated cost or value.

Skilled Nursing Facility fees shall be 1.5% of the contract/estimated construction cost, including fixed equipment.

**For construction in Northern California,
Seismic Review and Clinics, submit to:**

Office of Statewide Health Planning and Development
Facilities Development Division
2020 W. El Camino Ave., Suite 800
Sacramento, CA 95833
(916) 440-8300 phone
(916) 324-9188 fax

For construction in Southern California, submit to:

Office of Statewide Health Planning and Development
Facilities Development Division
700 North Alameda Street, Suite 2-500
Los Angeles, CA 90012
(213) 897-0166 phone
(213) 897-0168 fax





**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION**

RECEIVED

OFFICE USE ONLY

Project #	Increment #
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Notice of Start of Construction

Facility

Project # S181568-38-00
 Facility # 12432 Facility Name Laguna Honda Hospital and Rehabilitation Center
 OSHPD Building # BLD - 03809 Building Name South Residence - Bldg 10
 Type of Facility Acute Psychiatric Hospital General Acute Care Hospital Skilled Nursing or Intermediate Care Facility
 Correctional Treatment Center Licensed Clinic

Record Detail

Record/Project Name Electronic Health Records - Workstations - South Residence
 Detailed Description

Install power/data and in-wall supports for new electronic health records workstations throughout South residence.

Applicant

Notice of Start of Construction made by
 Administrator Authorized Agent (Authorization must be attached) Legal Owner
 Print Name GENITO OLQUIA Title EXEC. PROJ. MGR
 Signature [Signature] Date 12.05.18

Application Specific Information – Notice of Start of Construction

Construction Start Date 12.13.18
Contractor Information License Number 1003262
 First Name Steve M.I. C Last Name Buhler
 Organization Name Buhler Commercial
 Street Address 400 Brannan Street
 Address Line 2 Suite 204
 City San Francisco State CA Zip Code 94107
 Phone (415)610-8650 Phone 2 _____ Fax _____
 Notes _____

Contract Costs

Contract Award Date 12/4/18

Contract Construction Costs <i>(excluding fixed equipment, imaging equipment, design fees, inspection fees, and off-site improvements)</i>	\$ <u>308,795.44</u>
Contract Fixed Equipment Costs <i>(sterilizers, chillers, boilers, etc., excluding installation)</i>	\$ _____
Contract Cost of Imaging Equipment <i>(X-ray, MRI, CT Scan, etc., excluding installation cost)</i>	\$ _____

Note: See Instructions for Fee Information



**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION**

**INSTRUCTIONS FOR NOTICE OF START OF CONSTRUCTION
(OSH-FD-801)**

Facility

- Enter the Office of Statewide Health Planning and Development (OSHPD) project number.
- Enter the OSHPD facility identification number.
- Enter the name of the facility as it appears on the facility license.
- Enter the OSHPD building number and building name where the work is to be performed.
- Indicate the type of facility as it is licensed.

Record Detail

- Enter the record/project name.
- Enter a detailed description of the work to be performed.

Applicant

- Indicate if this notice is being submitted by the Administrator, Authorized Agent (authorization must be attached), or the Legal Owner, and print the respective name, title, sign and date.

Application Specific Information – Notice of Start of Construction

- Enter the construction start date.
- Provide the contractor information for the project. Include the Contractor's license number, name, organization name, street address, city, state, zip code, phone number and fax number.

Contract Costs

- Enter the contract award date.
- Enter the contract construction cost of the project excluding fixed equipment to be permanently attached (electrically, mechanically or structurally) to the building, imaging equipment, design fees, inspection fees, and off-site improvements.
- Enter the contract cost or value of fixed equipment (items that are permanently affixed to the building or permanently connected to a service distribution system that is designed and installed for the specific use of the equipment), excluding installation costs.
- Enter the contract cost or value of imaging equipment (X-ray, MRI, CT Scan, etc.), excluding installation cost.

Fee Information:

Acute Care Hospital fees shall be 1.64% of the contract/estimated construction cost, including fixed equipment. Imaging equipment shall be 0.164% of the contract/estimated cost or value.

Skilled Nursing Facility fees shall be 1.5% of the contract/estimated construction cost, including fixed equipment.

**For construction in Northern California,
Seismic Review and Clinics, submit to:**

Office of Statewide Health Planning and Development
Facilities Development Division
2020 W. El Camino Ave., Suite 800
Sacramento, CA 95833
(916) 440-8300 phone
(916) 324-9188 fax

For construction in Southern California, submit to:

Office of Statewide Health Planning and Development
Facilities Development Division
700 North Alameda Street, Suite 2-500
Los Angeles, CA 90012
(213) 897-0166 phone
(213) 897-0168 fax





**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION**

RECEIVED

OFFICE USE ONLY	
Project #	Increment #

Notice of Start of Construction

Facility

Project # S181569-38-00
 Facility # 12432 Facility Name Laguna Honda Hospital and Rehabilitation Center
 OSHPD Building # BLD - 05919 Building Name Pavilion Building - Building 09
 Type of Facility Acute Psychiatric Hospital General Acute Care Hospital Skilled Nursing or Intermediate Care Facility
 Correctional Treatment Center Licensed Clinic

Record Detail

Record/Project Name Electronic Health Records - Workstations - Link Building
 Detailed Description

Install power/data and in-wall supports for new electronic health records workstations at select locations in Pavilion Building (Link Building)

Applicant

Notice of Start of Construction made by
 Administrator Authorized Agent (Authorization must be attached) Legal Owner
 Print Name BENITO OCGUIN Title EXEC. PROJ. MGR
 Signature Date 12.05.18

Application Specific Information – Notice of Start of Construction

Construction Start Date 12.13.18
Contractor Information License Number 1003262
 First Name Steve Buhler M.I. C Last Name Buhler
 Organization Name Buhler Commercial
 Street Address 400 Brannan Street
 Address Line 2 Suite 204
 City San Francisco State CA Zip Code 94107
 Phone (415)610-8650 Phone 2 _____ Fax _____
 Notes _____

Contract Costs

Contract Award Date <u>12/4/18</u>	<p style="text-align: center;">Contract Construction Costs <i>(excluding fixed equipment, imaging equipment, design fees, inspection fees, and off-site improvements)</i></p>	\$ <u>79,035.62</u>
	<p style="text-align: center;">Contract Fixed Equipment Costs <i>(sterilizers, chillers, boilers, etc., excluding installation)</i></p>	\$ _____
	<p style="text-align: center;">Contract Cost of Imaging Equipment <i>(X-ray, MRI, CT Scan, etc., excluding installation cost)</i></p>	\$ _____

Note: See Instructions for Fee Information





**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION**

**INSTRUCTIONS FOR NOTICE OF START OF CONSTRUCTION
(OSH-FD-801)**

Facility

- Enter the Office of Statewide Health Planning and Development (OSHPD) project number.
- Enter the OSHPD facility identification number.
- Enter the name of the facility as it appears on the facility license.
- Enter the OSHPD building number and building name where the work is to be performed.
- Indicate the type of facility as it is licensed.

Record Detail

- Enter the record/project name.
- Enter a detailed description of the work to be performed.

Applicant

- Indicate if this notice is being submitted by the Administrator, Authorized Agent (authorization must be attached), or the Legal Owner, and print the respective name, title, sign and date.

Application Specific Information – Notice of Start of Construction

- Enter the construction start date.
- Provide the contractor information for the project. Include the Contractor’s license number, name, organization name, street address, city, state, zip code, phone number and fax number.

Contract Costs

- Enter the contract award date.
- Enter the contract construction cost of the project excluding fixed equipment to be permanently attached (electrically, mechanically or structurally) to the building, imaging equipment, design fees, inspection fees, and off-site improvements.
- Enter the contract cost or value of fixed equipment (items that are permanently affixed to the building or permanently connected to a service distribution system that is designed and installed for the specific use of the equipment), excluding installation costs.
- Enter the contract cost or value of imaging equipment (X-ray, MRI, CT Scan, etc.), excluding installation cost.

Fee Information:

Acute Care Hospital fees shall be 1.64% of the contract/estimated construction cost, including fixed equipment. Imaging equipment shall be 0.164% of the contract/estimated cost or value.

Skilled Nursing Facility fees shall be 1.5% of the contract/estimated construction cost, including fixed equipment.

**For construction in Northern California,
Seismic Review and Clinics, submit to:**

Office of Statewide Health Planning and Development
Facilities Development Division
2020 W. El Camino Ave., Suite 800
Sacramento, CA 95833
(916) 440-8300 phone
(916) 324-9188 fax

For construction in Southern California, submit to:

Office of Statewide Health Planning and Development
Facilities Development Division
700 North Alameda Street, Suite 2-500
Los Angeles, CA 90012
(213) 897-0166 phone
(213) 897-0168 fax



**CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF PUBLIC WORKS
PROJECT CONTROLS & SERVICES**

Contract Modification

CONTRACT: JOC No. J37 General Building Services **CONTRACT MODIFICATION No.** 1
DATE: December 28, 2018
TO: Buhler Commercial **DOCUMENT No.** 1000005796 **Contract No.** JOC-J37
400 Brannan Street, Suite 204 **DPW ORDER No.** 186, 618 **ID No.** N/A
San Francisco, CA 94107

***Description of Scope of Work under this Contract Modification:**

1. Increase the not-to-exceed amount of the Contract from \$5,000,000.00 to a new not-to-exceed amount of \$7,500,000.00 in accordance with the San Francisco Administrative Code section 6.62F.

COST:	DECREASE: \$0.00	INCREASE: \$2,500,000.00
Original Not-to-Exceed (NTE) Contract Amount	\$	<u>\$5,000,000.00</u>
Previous Modifications	\$	<u>0.00</u>
Contract Amount Prior to this Contract Modification	\$	<u>\$5,000,000.00</u>
Amount of this Contract Modification	\$	<u>\$2,500,000.00</u>
NEW (NTE) CONTRACT AMOUNT (Including this Contract Modification)	\$	<u>\$7,500,000.00</u>

BY REASONS OF THIS CONTRACT MODIFICATION, THE CONTRACT TIME WILL BE ADJUSTED AS FOLLOWS:

Extend Contract Time	0 Months
Original Contract Time	24 Months
Previous Modifications	0 Months
Contract Term Prior to this Contract Modification	December 26, 2017 to December 26, 2019
NEW CONTRACT TERM (Including this Contract Modification)	December 26, 2017 to December 26, 2019

DISTRIBUTION	RECOMMENDED BY:	DATE:
Contractor DPW-PCS JOC DPW Contract Admin CMD	<u>Teenchee Le , Project Controls & Services</u>	_____
	ACCEPTED BY: <u>Steve C. Buhler</u> Steve Buhler, Buhler Commercial	DATE: <u>1/2/19</u>
	RECOMMENDED BY: <u>Maurice Williams, Project Controls & Services</u>	DATE: _____
	RECOMMENDED BY: <u>Edgar Lopez, City Architect & Deputy Director for Buildings</u>	DATE: _____
	APPROVED BY: <u>Mohammed Nuru, Director of Public Works</u>	DATE: _____

**CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF PUBLIC WORKS
PROJECT CONTROLS & SERVICES**

Contract Modification

CONTRACT: JOC No. J37 General Building Services **CONTRACT MODIFICATION No.** 2
DATE: November 13, 2019
TO: Buhler Commercial **DOCUMENT No.** 1000005796 **Contract No.** JOC-J37
400 Brannan Street, Suite 204 **DPW ORDER No.** 186, 618 **ID No.** N/A
San Francisco, CA 94107


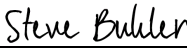
***Description of Scope of Work under this Contract Modification:**

1. Extend the expiration term by 12 months from 24 months to 36 months in accordance with the San Francisco Administrative Code Section 6.62(g).

COST:	DECREASE: \$0.00	INCREASE: \$0.00
Original Not-to-Exceed (NTE) Contract Amount	\$	<u>\$5,000,000.00</u>
Previous Modifications	\$	<u>\$2,500,000.00</u>
Contract Amount Prior to this Contract Modification	\$	<u>\$7,500,000.00</u>
Amount of this Contract Modification	\$	<u>\$0.00</u>
NEW (NTE) CONTRACT AMOUNT (Including this Contract Modification)	\$	<u>\$7,500,000.00</u>

BY REASONS OF THIS CONTRACT MODIFICATION, THE CONTRACT TIME WILL BE ADJUSTED AS FOLLOWS:

Extend Contract Time	0 Months
Original Contract Time	12 Months
Previous Modifications	0 Months
Contract Term Prior to this Contract Modification	December 26, 2017 to December 26, 2019
NEW CONTRACT TERM (Including this Contract Modification)	December 26, 2017 to December 26, 2020

DISTRIBUTION	RECOMMENDED BY:	DATE:
Contractor DPW-PCS JOC DPW Contract Admin CMD	 Digitally signed by Teenchee Le Date: 2019.11.13 14:50:05 -08'00' Teenchee Le , Project Controls & Services	
	DocuSigned by:  Steve Buhler, Buhler Commercial <small>3961FAC341014C...</small>	11/13/2019
	RECOMMENDED BY: Severino Caranto, Acting Manager, Project Controls & Services	
	RECOMMENDED BY: Ronald Alameida, Acting City Architect & Deputy Director for Buildings	
	APPROVED BY: Mohammed Nuru, Director of Public Works	

City and County of San Francisco

San Francisco Public Works



GENERAL - DIRECTOR'S OFFICE

City Hall, Room 348
 1 Dr. Carlton B. Goodlett Place, S.F., CA 94102
 (415) 554-6920 ■ www.SFPublicWorks.org



London N. Breed, Mayor
 Mohammed Nuru, Director

Public Works Order No: 201578

CERTIFICATE OF COMPLETION

OWNER:	City and County of San Francisco
CONTRACT SERVICE ORDER (CSO):	Purchase Order No.: 0000255179 JOC Task Order No.: J37-14 CSO Title: LHH Electronic Health Records - East Residence
CONTRACTOR:	Buhler Commercial
ADDRESS:	400 Brannan Street, Suite 204 San Francisco, CA 94107
REFERENCE:	Contract ID No.: 1000005796 Master JOC Contract Title: JOCJ37 General Building Services


Statement of Inspection and Acceptance of Completed Work under San Francisco Administrative Code Section 6.22(k):

The work performed under this contract consisted of installation of electrical and data outlets for new wall-mounted computer workstations.

The above-described work was inspected and accepted as of **July 1, 2019** as fully and satisfactorily completed in accordance with the plans and specifications for the task order, and to the satisfaction of the Director of Public Works.

X DocuSigned by:


 Laue, Julia BA768D78B79E4A2...
 Principal Architect & Manager

X DocuSigned by:


 Alameida, Ronald B11CB1699C5486...
 Project Manager IV



X

DocuSigned by:
Nuru, Mohammed
81145AB17F474FA...

Nuru, Mohammed
Director

City and County of San Francisco

San Francisco Public Works



GENERAL - DIRECTOR'S OFFICE

City Hall, Room 348
 1 Dr. Carlton B. Goodlett Place, S.F., CA 94102
 (415) 554-6920 ■ www.SFPublicWorks.org



London N. Breed, Mayor
 Mohammed Nuru, Director

Public Works Order No: 201580

CERTIFICATE OF COMPLETION

OWNER:	City and County of San Francisco
CONTRACT SERVICE ORDER (CSO):	Purchase Order No.: 0000255211 JOC Task Order No.: J37-15 CSO Title: LHH Electronic Health Records – Link Building
CONTRACTOR:	Buhler Commercial
ADDRESS:	400 Brannan Street, Suite 204 San Francisco, CA 94107
REFERENCE:	Contract ID No.: 1000005796 Master JOC Contract Title: JOCJ37 General Building Services


Statement of Inspection and Acceptance of Completed Work under San Francisco Administrative Code Section 6.22(k):

The work performed under this contract consisted of installation of electrical and data outlets for new wall-mounted computer workstations.

The above-described work was inspected and accepted as of **July 1, 2019** as fully and satisfactorily completed in accordance with the plans and specifications for the task order, and to the satisfaction of the Director of Public Works.

X DocuSigned by:


 Laue, Julia BA768D78B79E4A2...
 Principal Architect & Manager

X DocuSigned by:


 Alameida, Ronald B11CB1699C5486...
 Project Manager IV



X

DocuSigned by:
Nuru, Mohammed
81145AB17F474FA...

Nuru, Mohammed
Director

City and County of San Francisco

San Francisco Public Works



GENERAL - DIRECTOR'S OFFICE

City Hall, Room 348
 1 Dr. Carlton B. Goodlett Place, S.F., CA 94102
 (415) 554-6920 ■ www.SFPublicWorks.org



London N. Breed, Mayor
 Mohammed Nuru, Director

Public Works Order No: 201581

CERTIFICATE OF COMPLETION

OWNER:	City and County of San Francisco
CONTRACT SERVICE ORDER (CSO):	Purchase Order No.: 0000255231 JOC Task Order No.: J37-16 CSO Title: LHH Electronic Health Records - South Residence
CONTRACTOR:	Buhler Commercial
ADDRESS:	400 Brannan Street, Suite 204 San Francisco, CA 94107
REFERENCE:	Contract ID No.: 1000005796 Master JOC Contract Title: JOCJ37 General Building Services


Statement of Inspection and Acceptance of Completed Work under San Francisco Administrative Code Section 6.22(k):

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 Alameida, Ronald H11CB1699C5486...
 Project Manager IV



X

DocuSigned by:
Nuru, Mohammed
81145AB17F474FA...

Nuru, Mohammed
Director

(b)

PROJECT TITLE: Dumbarton Quarry		
PROJECT DESCRIPTION / SCOPE OF WORK: Installation of pre-fab metal building, interior finishes, MEP, and site work		
LOCATION: <i>Address, City, State</i> 9580 Quarry Road Fremont, CA 94555		
START DATE: 2/17/2022	PLANNED COMPLETION DATE: 2024	ACTUAL COMPLETION DATE: 2024
CONTRACT AMOUNT: \$ 4,000,000	CHANGE ORDER AMOUNT: \$ N/A	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input checked="" type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED:	
	Legacy Mechanical, Arrow Acoustics, KC&S Specialties, Bay Cities Fire Protection, Innovate Concrete	
NAME OF OWNER'S REPRESENTATIVE: Jim Devlin		
TITLE: Construction Manager	TELEPHONE: 510-544-2314	
BUSINESS ADDRESS: 2950 Peralta Oaks Court Oakland, CA 94605		

(c)

PROJECT TITLE: EBMUD Main Wastewater Treatment Plant Operations Center Improvements		
PROJECT DESCRIPTION / SCOPE OF WORK: Interior and exterior improvements to an existing operations building including architectural, mechanical, and electrical work		
LOCATION: <i>Address, City, State</i> 2020 Wake Avenue Oakland, CA 94607		
START DATE: 07/28/23	PLANNED COMPLETION DATE: 2024	ACTUAL COMPLETION DATE: 2024
CONTRACT AMOUNT: \$ 7,118,690	CHANGE ORDER AMOUNT: \$	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input checked="" type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED:	
	Magnum Drywall, Asbestos Management Group, Andy's Roofing Marina Mechanical, Con J. Frankie Electric	
NAME OF OWNER'S REPRESENTATIVE: Dominic La Marche		
TITLE: Associate Engineer, Project & Construction Management	TELEPHONE: 510-882-6897	
BUSINESS ADDRESS: 2020 Wake Avenue Oakland, CA 94607		

(Add sheets if necessary.)

TECHNICAL SPECIFICATIONS
SECTION 000110
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Community Development
39550 Liberty Street, P.O.
Box 5006 Fremont, CA
94537-5006
(510) 494-4400
www.fremont.gov

INSPECTION RECORD

POST THIS JOB SITE CARD AT OR NEAR
FRONT OF BUILDING

Request Inspections at:
On-line at Fremont.gov/CitizenAccess or (510) 494-4885
All Commercial AFES, Fire Alarm, and Fire Code Inspections
Request by completing the request form at
www.fremont.gov/FireInspectionRequest
Have your permit number available when you request an inspection.

Paid in Full - City of
Fremont

Invoiced Amount:
\$0.00

Permit No.: BLD2020-04119
Project Name: Dumbarton Quarry Yard
Project Address: 9580 Quarry Rd
Project Description: Service yard and new building at the Dumbarton Quarry Campground on the Bay.
Issued Date: 4,962 Sq. Ft. building Warehouse
WUI Area: N/A
Inspection Area: N/A Inspector: Phone:

For any Planning,
Engineering and/or
Landscape Inspection please
request at:
dr_insp@fremont.gov

Do not cover work until inspector has signed appropriate category

Inspection Type	Date	Insp.	Inspection Type	Date	Insp.	Inspection Type	Date	Insp.
BUILDING INSPECTIONS			PLUMBING INSPECTIONS			FIRE ALARM INSPECTIONS		
CONCRETE & MASONRY			301 Underground Plumbing → 11/21/22 DW			412 HVAC Smoke Detection		
101 Piers	11/20/22	DW	302 Underfloor Plumbing			420 Fire/Smoke Dampers Functional		
102 Footings	4/14/23	STB	303 Storm Drains			609 Monitoring	- 3/21/24	ISW
103 Slab			304 Top-Out Plumbing			611 Pre-Test Printout		
104 Grade Beam Forms/Steel			305 Rough Plumbing			701 Fire Alarm System	- 3/21/24	ISW
105 Retaining Wall Forms/Steel			306 Water Piping			707 Auto Fire Ext. Systems		
109 Column Steel			307 Water Heater			713 Fire Alarm Rough		
110 Wall Panel Steel			308 Shower Pan Test/Liner	11/16/22	JL	714 Fan Door Test/Concentration Test		
111 Masonry Block/Steel			309 Gas Test			717 Functional/Pipe Pressure/Interlock		
POOLS			310 Underground Water Service			FIRE CODE INSPECTIONS		
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Planning Department Roof/Shear			406 Type II Hood			710 Fire/Compatible Extinguishers		
124 Roof Sheathing/Roof Deck			409 Hazardous Process Piping			711 Exit Signs/Emergency Lights	2/20/24	ISW
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ELECTRICAL INSPECTIONS			603 Flush			Hazmat Final, Call 510-494-4444		
201 Service UFER Ground			604 Welds/Glue			Engineering Department Final		
202 Underground Electrical	10/17/22	WLB	605 Overhead Hydro			Planning/Landscaping Final	2/15/24	YKL
203 Underfloor Electrical	11/21/22	STB	606 Size & Spacing	=		290 Electrical Final	1/23/24	JW
204 Rough Electrical			607 Above Ceiling	=		399 Plumbing Final		
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207 Equipment Hook-Up			610 Corrosion Protection			599 Insulation Final		
208 Main Switch Board			RESIDENTIAL R3 AFES INSPECTION			650 Res. R3 AFES Final		
209 Panel Boards			653 Res. R3 Rough			699 Commercial AFES Final	- 3/21/24	ISW
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806 Electric Meter Release			198 Fire final	*		PERMIT FINAL 6-7-24 DAW		

THIS INSPECTION RECORD AND ASSOCIATED PLANS SHALL REMAIN AT THE JOB SITE UNTIL AFTER FINAL INSPECTION.

This permit shall expire by limitation and become null and void if this work is not commenced within 365 days of permit issuance. Upon completion of the first building inspection, should any work authorized by this permit be suspended or abandoned for 180 days, this permit shall be null and void. A new permit will be required for any expired permit.

DRAWING INDEX

Table with columns: SHT. NO., DRAWING NUMBER, REV. NO., DRAWING TITLE. Includes sections for GENERAL, STRUCTURAL, ARCHITECTURAL, and MECHANICAL drawings.

Table with columns: SHT. NO., DRAWING NUMBER, REV. NO., DRAWING TITLE. Continuation of drawing index for plumbing, HVAC, and electrical systems.

Table with columns: SHT. NO., DRAWING NUMBER, REV. NO., DRAWING TITLE. Includes sections for STANDARD DRAWINGS, REFERENCE DRAWINGS, and CONDUIT SCHEDULES.

Table with columns: REFERENCE DRAWINGS, DRAWING TITLE. Lists various reference drawings and their corresponding titles.

Vertical text on the left margin: REF 7: REF 8: REF 9: REF 4: REF 5: REF 6: REF 1: REF 2: REF 3: PLOT SCALE: USER: DATE: FILE:

3" ON ORIGINAL DOCUMENT

AET ARCHITECTS & ENGINEERS logo and contact information: 7 FREELON STREET, SAN FRANCISCO, CA 94107, PHONE: 415-762-8388, www.aetypic.com

Table with columns: NO., DATE, REVISION, BY, REC., APP. Contains revision history for drawing SD424.

Project information block for SD-424 MWTP OPERATIONS CENTER IMPROVEMENTS. Includes design by (DAVID TRITT), design checked by (ANDRES SANDOVAL), project manager (STEVE GRIST), and drawing title (MAIN WASTEWATER TREATMENT PLANT OPERATIONS CENTER GENERAL DRAWING INDEX).



**SPECIFICATION SD-424
EAST BAY MUNICIPAL UTILITY DISTRICT
MAIN WASTEWATER TREATMENT PLANT
OPERATIONS CENTER IMPROVEMENTS**

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(DIVISION 00), GENERAL REQUIREMENTS (DIVISION 01), AND APPENDICES**

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----------	-----------------------------------

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----------	-------------------------

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CONTRACT

DATE OF CONTRACT April 25, 2023	CONSTRUCTION OR INSTALLATION
CONTRACTOR BUHLER COMMERCIAL, a corporation organized and existing under and by virtue of the laws of the State of California.	
CONTRACT FOR (Specification title, brief description of work, and bid items) SD-424 includes interior and exterior improvements to the Operations Center Building. Improvements include architectural, mechanical, and electrical work; the same being the total of Items 1 through 9 of the Bidding Form contained in and all in accordance with the Contract Documents.	
CONTRACT PRICE (Words and figures) SEVEN MILLION ONE HUNDRED EIGHTEEN THOUSAND SIX HUNDRED NINETY AND NO/100 DOLLARS. (\$7,118,690)	
CONTRACT COMPLETION All contract work shall be complete within 450 calendar days after the issuance of the Notice to Proceed, in accordance with the Contract Documents.	
CONTRACT DOCUMENTS: The Contract Documents include the District's contract form and any exhibits attached thereto, Notice to Contractors, Instruction to Bidders, Proposal, General Conditions, Supplementary General Conditions, Designation of Subcontractors, Contract Equity Program Forms, Specifications, Addenda, Appendices, Approved Change orders, if any, and Drawings, contained in and by reference made part of the Specifications. SPECIFICATION SD-424; ADDENDUM 1 dated December 30, 2022; ADDENDUM 2 dated January 18, 2023; ADDENDUM 3 dated January 31, 2023; and ADDENDUM 4 dated February 16, 2023 of the District.	

WITNESSETH: That the East Bay Municipal Utility District, a public corporation of the State of California, hereinafter called the District, and the individual, partnership, joint venture, or corporation named above, hereinafter called the Contractor, agree as follows:

1. The Contractor, at its own risk and expense, agrees to perform and complete the work set forth in the Contract Documents named above, all now on file in the office of the Secretary of the District, which said Contract Documents are hereby referred to for a definite and distinct description of the work to be performed under this Contract and are made part of this Contract the same as though fully set forth herein.

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

11. LIST ALL CONTRACTS DURING THE PAST 10 YEARS FOR WHICH THE BIDDER, OR A MEMBER OF THE BIDDER'S ORGANIZATION, RECEIVED AN UNSATISFACTORY PERFORMANCE RATING, WAS CITED FOR OSHA VIOLATIONS OR FAILED TO COMPLETE WORK.

(a)

PROJECT: N/A	NAME OF OWNER:
LOCATION: Address, City, State	
EXPLAIN:	

(b)

PROJECT: N/A	NAME OF OWNER:
LOCATION: Address, City, State	
EXPLAIN:	

(Add sheets if necessary.)

12. LIST MAJOR CONSTRUCTION EQUIPMENT, FACILITIES OR AIDS THAT BIDDER REPRESENTS IT POSSESSES OR CAN OBTAIN IN TIME TO PERFORM THE WORK; INDICATING WHETHER OWNED OR RENTED AND WHERE OBTAINED:

EQUIPMENT	OWNED	LEASED	RENTED	RENTAL AGENT NAME	TELEPHONE
(a) Scaffolding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A
(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
(e)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

13. BIDDER REFERS TO THE FOLLOWING BANK(S) AS TO FINANCIAL RESPONSIBILITY OF BIDDER:

(a)

NAME OF BANK: Tasi Bank	
BUSINESS ADDRESS: 400 Montgomery Street Suite 1100 San Francisco, 94104	
CONTACT NAME: Jesus Leon Guerrero	TELEPHONE: 415-912-0143

(b)

NAME OF BANK: N/A	
BUSINESS ADDRESS: N/A	
CONTACT NAME: N/A	TELEPHONE: N/A

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

14. INSURANCE AND SURETY COMPANIES AND AGENTS WHO WILL PROVIDE THE REQUIRED INSURANCE AND BONDS ON THIS CONTRACT:

(a)

NAME OF COMPANY: Commercial Surety Bond Agency	TYPE OF INSURANCE OR BOND:
BUSINESS ADDRESS: 1411 N. Batavia St., Ste 201 Orange, CA 92867	
AGENT'S NAME: Shaunna Ostrom	TELEPHONE: (714) 516-1232

(b)

NAME OF COMPANY: Epic Insurance	TYPE OF INSURANCE OR BOND: All Insurance
BUSINESS ADDRESS: 10877 White Rock Road Suite 300 Rancho Cordova, CA 95670	
AGENT'S NAME: Brian Laney	TELEPHONE: 916-316-8889

(Add sheets if necessary.)

Note: The above Bidder's Qualifications form is part of the Bid. Signing the Bid Form shall also constitute signature of this form.

By Signing the Bid Form, the Contractor permits the City to contact the Owner of each sample project submitted above.

END OF SECTION

SECTION 00 45 14

BIDDER'S SAFETY RECORD

Refer to Section 00 21 13 Instructions to Bidders, Paragraph 1.11B Bidders Qualification Statement.

The Contractor's Responsibility includes its record of safe performance on construction projects, including, but not limited to, consideration of federal or state Occupational Safety and Health Administration ("OSHA") violations and work place fatalities, including OSHA citations under appeal in order for the City to find the entity to be Responsible and eligible for contract award.

The City and County of San Francisco (CCSF) Safety Prequalification Form can be found and completed online at <https://sfpuc.org/construction-contracts/contract-opportunities-payments/prequalify-construction>.

Follow the online instructions on how to complete the form and submit the required safety documents. This Form must be completed specifically for each project bid. Previous completed Safety Prequalification Forms cannot be re-used for this bid.



Check this box to confirm that Safety Prequalification Form has been submitted online for this bid.

Note: The above Certification is part of the Bid. Signing the Bid Form shall also constitute signature of this Certification. Providing false information may result in criminal prosecution or administrative sanctions.

Bidder must submit this completed form with its Bid.

END OF SECTION

matthew.anderson@buhlercommercial.com

From: Steve Buhler <steve@buhlercommercial.com>
Sent: Tuesday, May 21, 2024 2:50 PM
To: Matthew Anderson
Subject: Fwd: CONFIRMATION: New Safety Prequalification Submission From Buhler Commercial/Contract Number 0000009068

Steve Buhler

President

Office: (415) 610-8650

Mobile: (415) 608-0610

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

www.BuhlerCommercial.com

----- Forwarded message -----

From: No Reply <noreply@sfwater.org>
Date: Tue, May 21, 2024 at 2:27 PM
Subject: CONFIRMATION: New Safety Prequalification Submission From Buhler Commercial/Contract Number 0000009068
To: <steve@buhlercommercial.com>

DO NOT REPLY TO THIS EMAIL.

Hello,

You have a new Safety Prequal Submission. A copy of the submission can be found below. The submission was deemed completed at **Page 3**:

1. Contact Information

Company Name: Buhler Commercial
Address: 400 Brannan St Ste #204, San Francisco, CA 94107
Corporate Phone: 4156108650

Company Safety Representative:
Steve Buhler
steve@buhlercommercial.com
Mobile Phone: 4156080610

2. Procurement Information

Department: SFDPW
Contract Number for this solicitation: 0000009068
Contract Title: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition

3. Prior Safety Prequalification Form Submission Information for reference years 2021, 2022, and 2023

A. Did your firm pass the Safety Prequalification during the three Reference Years? Yes

B. At which step did your firm pass? 1

City Department Issuing the Previous Solicitation: SFDPW

Prior Safety Prequalification Form Submission Date: 12/06/2023

Contract Number: 1000031117

Contract Title: LHH Pharmacy Compounding Room Code Compliance Project

C. Does your firm have any incidents (violations, injuries or fatalities) under review by Occupational Safety and Health Administration (OSHA) that occurred since your previous Safety Prequalification Form submission?No

4. Step 1 Questions

Step 1

D. Please provide data from your firm's Occupational Safety and Health Administration (OSHA) Form 300A, Summary of Work-Related Injuries and Illness. The data should be for all construction work your firm performed whether as a prime, as part of a joint venture, or as a subcontractor.

Reference Year	2021	2022	2023
Total number of deaths (G)	undefined	undefined	undefined
Total number of cases with days away from work (H)	undefined	undefined	undefined
Total number of cases with job transfer or restriction (I)	undefined	undefined	undefined

Total number of other recordable cases (J)	undefined	undefined	undefined
Average number of employees	undefined	undefined	undefined
Total hours worked by all employees	undefined	undefined	undefined
Total recordable case rate	**	**	**
Total cases with days away from work, job restriction, or transfer rate	**	**	**

E. Please enter the North America Industrial Classification System (NAICS) rate associated with your industry from these sources

Reference Year	2021	2022
What is the NAICS Industry Code from your annual Form 300A?		
What is the "Industry" description for your firm's NAICS code?		
What is the annual "Total Recordable Cases" Rate for your Firm's NAICS Industry Code?	undefined	undefined
What is the annual "Total Work Loss" Rate for your Firm's NAICS Industry Code?	undefined	undefined

F. Is your firm's recordable case rate worse than industry standard for two of the last three years? (autocalculated; your annual reported data is compared to that year's OSHA Rate for your industry) **

G. Has your firm received an OSHA Serious, Willful or Repeat violation in the last three years, regardless of appeal status?

H. Has your firm experienced a workplace fatality in the last three years?

5. Step 2 Questions

Step 2

I. Is your firm's Work Loss rate worse than industry standard for two of the last three years? (autocalculated based on previous inputs) *No*

J. Has your firm received an OSHA Willful or Repeat violation in the last three years, regardless of appeal?

K. The annual total hours worked for last three (3) years by all employees as reported on your OSHA 300A form (autocalculated based on previous inputs). *0*

L. Provide the number of Serious violations issued by OSHA over the last 36 months (different time period than the past 3 years of OSHA 300A forms), regardless of appeal status. *undefined*

M. Your serious OSHA violation rate per 200,000 hours (autocalculated based on previous inputs) **

N. Does your firm have more than one serious OSHA violations per 200,000 hours, regardless of appeal status? (autocalculated based on previous inputs) *No*

O. Did OSHA issue your firm a citation for any incident in which there was a fatality in the last 3 years?

6. Step 3 Safety Document Submission

Step 3

P. Safety Document Submittals

Upload Source Documents for each "Yes" response through the link that will be provided after the Form is submitted

	Document available for submission?	Maximum Possible Score	Your Submission Score
P.1. Does your firm have an Injury and Illness Prevention Program?	No	10	0
P.2. Does your firm have a Drug and Alcohol Free Workplace Policy?	No	10	0
P.3. Does your firm have a Job Hazard Analysis (JHA) Procedure?	No	5	0
P.4. Does your firm have a Corporate Safety Manual?	No	5	0
P.5. Does your firm have an Injury and Incident Investigation Process?	No	5	0
P.6. Does your firms have any Employee Safety Training Programs?	No	5	0
P.7. Does your firm have a Safety Field Audit Process?	No	5	0
P.8. Does your firm have a Daily Safety Pre-Task Planning Process?	No	5	0
		Total Document Submission Score (calculated and to be verified):	0

7. Step 3 Occupational Safety and Health Administration (OSHA) Violation History

Step 3 (cont'd)

Q. OSHA Serious Violations

Provide copies of the citation, any appeal, and an explanation of any corrective actions taken.

Date OSHA Opened Case	Citation #	Violation #	Standard	Citation Info Available?	Appeal Available?	Explanation of Corrective Action Available?
				No	No	No
				No	No	No
				No	No	No
				No	No	No
				No	No	No
				No	No	No
				No	No	No
				No	No	No
				No	No	No
				No	No	No
				No	No	No

R. OSHA Wilful and Repeat Violations

Provide copies of the citation, any appeal, and an explanation of any corrective actions taken.

Date OSHA Opened Case	Citation #	Violation #	Standard	Citation Info Available?	Appeal Available?	Explanation of Corrective Action Available?
				No	No	No
				No	No	No
				No	No	No

S. Workplace Fatality

Provide copies of the citation, any appeal, and an explanation of any corrective actions taken.

Date of Fatality	Citation #	Violation #	Standard	Citation Info Submitted	Appeal Submitted	Explanation of Corrective Action Submitted
				No	No	No
				No	No	No
				No	No	No

8. Injury and Lost Work Rates Scores

T. Occupational Safety and Health Administration (OSHA) Form 300A Summary of Work-Related Injuries and Illness

Reference Year	2021	2022	2023	Points
Current Total Recordable Rate from U.S. Department of Labor for Firm's NAICS (automatically populated from Part 3)	0	0		
Total Recordable Rate (automatically populated from Question A)	0	0	0	
Possible maximum points	10	10	10	
Points Earned for being equal to or better than industry rate (automatically calculated)	5	5	5	15
Current Total Work loss Rate from U.S. Department of Labor for Firm's NAICS (automatically populated from Part 3)	0	0		
Total cases with days away from work, job restriction, or transfer rate (automatically populated from Question A)	0	0	0	
Possible maximum points	20	20	20	
Points Earned for being equal to or better than industry rate (automatically calculated)	10	10	10	30
			Total OSHA 300A Score	45

These are the documents that should be uploaded:

- OSHA 300 forms
- OSHA 300A forms
- P.1. Injury and Illness Prevention Program
- P.2. Drug and Alcohol Free Workplace Policy
- P.3. Job Hazard Analysis (JHA) Procedure
- P.4. Corporate Safety Manual
- P.5. Injury and Incident Investigation Process
- P.6. Employee Safety Training Programs
- P.7. Safety Field Audit Process
- P.8. Daily Safety Pre-Task Planning Process
- OSHA Violation Documents
- Explanation of OSHA Violations
- Other

Acknowledgement

Name: Steve Buhler
 Title: President
 Date: 05/21/2024

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name Buhler Commercial
City San francisc State Ca

Identify the person			Describe the case			Classify the case				Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness:					
(A) Case no.	(B) Employee's name	(C) Job title <i>(e.g., Welder)</i>	(D) Date of injury or onset of illness	(E) Where the event occurred <i>(e.g., Loading dock north end)</i>	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill <i>(e.g., Second degree burns on right forearm from acetylene torch)</i>	CHECK ONLY ONE box for each case based on the most serious outcome for that case:				Away from work	On job transfer or restriction	(M)					
						Death	Days away from work	Job transfer or restriction	Other recordable cases	(K)	(L)	Injury	Skin disorder	Respiratory condition	Poisoning	Hearing loss	All other illnesses
						(G)	(H)	(I)	(J)	_____ days	_____ days	(1)	(2)	(3)	(4)	(5)	(6)
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Summary of Work-Related Injuries and Illnesses

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>0</u>	<u>0</u>
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	(1) Injuries	(2) Skin disorders	(3) Respiratory conditions	(4) Poisonings	(5) Hearing loss	(6) All other illnesses
	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name Buhler Commercial

Street 400 Brannan st Suite 204

City San Francisco State CA ZIP 94107

Industry description (e.g., Manufacture of motor truck trailers)

Construction

Standard Industrial Classification (SIC), if known (e.g., 3715)

OR

North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information (If you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees 5.43

Total hours worked by all employees last year 12607.99

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Kapone Molina Superintendent
Company executive Title

(415) 613-5901
Phone

1/26/2021
Date

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name Buhler Commercial
City San francisc State Ca

Identify the person			Describe the case			Classify the case				Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness:					
(A) Case no.	(B) Employee's name	(C) Job title <i>(e.g., Welder)</i>	(D) Date of injury or onset of illness	(E) Where the event occurred <i>(e.g., Loading dock north end)</i>	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill <i>(e.g., Second degree burns on right forearm from acetylene torch)</i>	CHECK ONLY ONE box for each case based on the most serious outcome for that case:				Away from work	On job transfer or restriction	(M)					
						Death	Days away from work	Job transfer or restriction	Other recordable cases	(K)	(L)	Injury	Skin disorder	Respiratory condition	Poisoning	Hearing loss	All other illnesses
						(G)	(H)	(I)	(J)	_____ days	_____ days	(1)	(2)	(3)	(4)	(5)	(6)
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Summary of Work-Related Injuries and Illnesses

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	(1) Injuries	(2) Skin disorders	(3) Respiratory conditions	(4) Poisonings	(5) Hearing loss	(6) All other illnesses
	0	0	0	0	0	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name Buhler Commercial

Street 400 Brannan st Suite 204

City San Francisco State CA ZIP 94107

Industry description (e.g., Manufacture of motor truck trailers)

Construction

Standard Industrial Classification (SIC), if known (e.g., 3715)

OR

North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information (If you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees 8

Total hours worked by all employees last year 17056.43

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Kapone Molina

Superintendent

Company executive

Title

(415) 613-5901

2/14/2022

Phone

Date

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name Buhler Commercial
City San Francisco State Ca

Identify the person			Describe the case			Classify the case				Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness:					
(A) Case no.	(B) Employee's name	(C) Job title <i>(e.g., Welder)</i>	(D) Date of injury or onset of illness	(E) Where the event occurred <i>(e.g., Loading dock north end)</i>	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill <i>(e.g., Second degree burns on right forearm from acetylene torch)</i>	Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)	Away from work (K)	On job transfer or restriction (L)	(M) Injury (1)	Skin disorder (2)	Respiratory condition (3)	Poisoning (4)	Hearing loss (5)	All other illnesses (6)
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Summary of Work-Related Injuries and Illnesses

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types

Total number of . . . (M)	(1) Injuries	(2) Skin disorders	(3) Respiratory conditions	(4) Poisonings	(5) Hearing loss	(6) All other illnesses
	0	0	0	0	0	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name Buhler Commercial

Street 400 Brannan st Suite 204

City San Francisco State CA ZIP 94107

Industry description (e.g., Manufacture of motor truck trailers)

Construction

Standard Industrial Classification (SIC), if known (e.g., 3715)

OR

North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information (If you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees 14

Total hours worked by all employees last year 28,227

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Kapone Molina Superintendent
Company executive Title

(415) 613-5901
Phone

1/17/2023
Date

SECTION 00 45 16

RELEASE AND WAIVER AGREEMENT

ZSFG BUILDING 5 FAMILY HEALTH CENTER RELOCATION PHASE 1 5C 5E DEMOLITION

(San Francisco Public Works Sourcing Event ID No. 0000009068)

This Release and Waiver Of Liability (hereinafter the "Release") is entered into between
The City and County of San Francisco through **San Francisco Public Works** and
Buhler Commercial, a Bidder.

RECITALS

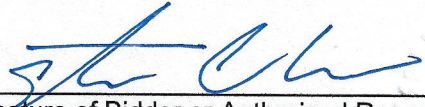
1. The City and County of San Francisco through its Department of Public Works has issued Bid Documents for Sourcing Event ID No. 0000009068 with a requirement that Bidders submit certain information to demonstrate their qualifications to perform the Work for the ZSFG BUILDING 5 FAMILY HEALTH CENTER RELOCATION PHASE 1 5C 5E DEMOLITION.
2. In accordance with the Bid Documents, Bidder has submitted information pertaining to its qualifications, including a list of projects and project owners/owner representatives as references for its qualifications.
3. The City seeks candid comments on the Bidder's performance on the listed projects from the owners and the owners' representatives.

RELEASE AND WAIVER

Bidder hereby fully and forever releases, exonerates, discharges, and covenants not to sue, the City, its commissions and boards, officers and employees, and all individuals and entities furnishing comments on Bidder's performance, from and for, and does hereby waive, any and all claims, causes of action, demands, damages and any and all other liabilities of any kind or description, in law, equity, or otherwise, arising out of information furnished about Bidder's performance on the projects that Bidder has identified pursuant to Recital number 2, above.

INTENDED BENEFICIARIES

The City, its commissions and boards, officers and employees and all individuals and entities furnishing any information relating to Bidder's qualifications are intended beneficiaries of this Release and Waiver and are entitled to enforce its terms.



 Signature of Bidder or Authorized Representative

 President

 Title

 Buhler Commercial

 Bidder's Name

 06/26/24

 Date

END OF SECTION

SECTION 00 45 60

HIGHEST PREVAILING WAGE RATE CERTIFICATION

Bidder, by submitting the attached Bid Form, hereby acknowledges that Bidder has read the San Francisco Charter section A7.204, San Francisco Administrative Code section 6.22(e), and California Labor Code section 1770 et. seq.

Bidder further acknowledges and certifies that, if awarded the Contract, Bidder will comply with the requirement that any person performing labor or rendering service under a contract for public work or improvement shall be paid not less than the highest general prevailing rate of wages in private employment for similar work. Bidder is aware that failure to comply with such wage provision shall result in a forfeiture of back wages due plus the penalties as set forth in Labor Code section 1775, but not less than \$50 per day per worker, and may result in disqualification as a contractor or subcontractor on any public work or improvement for the City and County of San Francisco for a period of up to five years.

Bidder further attests by submitting the attached Bid Form, that Bidder will require from all of its subcontractors that they acknowledge having read San Francisco Charter section A7.204, San Francisco Administrative Code section 6.22(e), and California Labor Code section 1770 et. seq., and that they will comply with the same requirements under this Contract.

Note: The above Certification is part of the Bid. Signing the Bid Form shall also constitute signature of this Certification.

Bidder must submit this certification with its Bid.

END OF SECTION

SECTION 00 45 65

CERTIFICATE OF BIDDER REGARDING APPRENTICESHIP TRAINING PROGRAM

I, the Bidder, by affixing my signature on the Bid Form, acknowledge that I have read San Francisco Administrative Code section 6.22(n) and I make the following declaration regarding each apprenticeable trade for which I will provide labor to the Project: *(Please **check the appropriate box(es)** and complete the listing of trade(s) in the space provided below)*

I am a signatory to a recognized apprenticeship or training program under chapter 4 of the California Labor Code as certified by the State of California Division of Apprenticeship Standards for the following apprenticeable trades for which I will provide labor on the Project, and I will provide written proof of my status as a signatory within 10 days after the date of the City's written notification of award of the Contract:
(List Trades Here) Carpenters & Laborers

I have applied to become a signatory for the trades listed below but have not been accepted. Nevertheless, pursuant to San Francisco Administrative Code section 6.22(n) and California Labor Code section 1777.5, I will pay into the appropriate apprenticeship fund(s) an amount equal to that paid by signatories. I acknowledge that I will be required to submit written evidence of such payments with all progress payment requests for payment for Work on the Project starting with the second such progress payment request and that providing such evidence is a condition that I must meet in order for to qualify for payment by the City.
(List Trades Here) _____

Additionally, I attest that I will require each of my subcontractors to submit in accordance with Section 00 21 13 a completed and signed Certificate of Subcontractor Regarding Apprenticeship Training Program form (Section 00 49 15). I acknowledge that, for subcontractor(s) who declare on said Section 00 49 15 that they have applied to become a signatory but have not been accepted and will pay into the appropriate apprenticeship fund(s) an amount equal to that paid by signatories, I must submit written evidence of such payments with all progress payment requests for payment for Work on the Project starting with the second such request and that providing such evidence is a condition I must meet in order to qualify for payment by the City.

I also attest that I and all of my subcontractors will comply, as a material term of the Contract, with the requirements of the State Apprenticeship Program as set forth in the California Labor Code, division 3, chapter 4 (commencing at section 3070) and section 1777.5 and San Francisco Administrative Code section 6.22(n) and all requests by the City to provide proof that I and all subcontractors are in compliance with those requirements. I declare (or certify) under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that I am authorized to bind this entity contractually.

If the Contract involves one or more trades with a recognized apprenticeship program for which you have declared that you are a signatory to a recognized apprenticeship or training program, written proof of status must be submitted for each trade within 10 working days after the date of the City's written notification of award of the Contract.

Note: The above Certification is part of the Bid. Signing the Bid Form shall also constitute signature of this Certification. Bidders are cautioned that making a false certification may subject the certifier to criminal prosecution.

Bidder must submit this certification with its Bid.

END OF SECTION

SECTION 00 45 70**CERTIFICATE OF BIDDER REGARDING
NONDISCRIMINATION IN CONTRACTS AND BENEFITS**

Bidder, by submitting the attached Bid Form, hereby acknowledges that Bidder has read and will comply with chapter 12B "Nondiscrimination in Contracts" of the San Francisco Administrative Code and attests to the following (*please **check** the applicable box*):

- COMPLIES:** The San Francisco Contract Monitoring Division ("CMD") has certified that Bidder is in compliance with chapter 12B of the San Francisco Administrative Code, and all applicable related requirements as specified in the Contract Documents, and the certification is in effect on the date of Bid opening.
- COMPLIANCE PENDING:** Bidder has submitted Form CMD-12B-101 and all required documentation to the CMD seeking certification of compliance with chapter 12B, and determination of compliance is pending review by the CMD. Bidder agrees to resolve all non-compliance through conciliation with CMD as a condition precedent to award of the Contract. If the CMD determines that Bidder is non-compliant, Bidder's Bid shall be deemed non-responsive.
- NON-COMPLIANCE:** Bidder acknowledges that full compliance with chapter 12B of the San Francisco Administrative Code is a condition precedent for award of the Contract, and if determined to be the low Bidder, Bidder will submit Form CMD-12B-101 and all required documentation within 10 working days after the date of Bid opening. If the CMD determines that Bidder is non-compliant, Bidder's Bid shall be deemed non-responsive.

Note: The text chapter 12B of the San Francisco Administrative Code and Form CMD-12B-101 is available from the CMD, 1155 Market Street, 4th Floor, San Francisco, CA 94103, telephone (415) 581-2310 and posted on the Web <http://sfgsa.org/index.aspx?page=6125>. Compliance with the requirements of Chapter 12B is a condition precedent to receiving a contract. Non-compliant Bidders are advised to submit Form CMD-12B-101 and accompanying documentation to the CMD at the earliest possible opportunity to avoid delays in obtaining certification with these requirements; waiting to file during the 10 day period after Bid opening could cause delays.

Note: The above Certification is part of the Bid. Signing the Bid Form shall also constitute signature of this Certification.

Bidder must submit this completed form with its Bid.

END OF SECTION

SECTION 00 45 80**NONCOLLUSION AFFIDAVIT**

TO THE DIRECTOR OF PUBLIC WORKS, CITY AND COUNTY OF SAN FRANCISCO

In accordance with California Public Contract Code section 7106 the Bidder declares that the Bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the Bid is genuine and not collusive or sham; that the Bidder has not directly or indirectly induced or solicited any other Bidder to put in a false or sham Bid, and has not directly or indirectly colluded, conspired, connived, or agreed with any Bidder or anyone else to put in a sham Bid, or that anyone shall refrain from Bidding; that the Bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the Bid price of the Bidder or any other Bidder, or to fix any overhead, profit, or cost element of the Bid price, or of that of any other Bidder, or to secure any advantage against the public body awarding the Contract of anyone interested in the proposed Contract; that all statements contained in the Bid are true; and, further, that the Bidder has not, directly or indirectly, submitted his or her Bid price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company association, organization, bid depository, or to any member or agent thereof to effectuate a collusive or sham Bid.

Note: The above Noncollusion Affidavit is part of the Bid. Signing the Bid Form shall also constitute signature of this Noncollusion Affidavit. Bidders are cautioned that making a false certification may subject the certifier to criminal prosecution.

Bidder must submit this form with its Bid.

END OF SECTION

SECTION 00 45 82

CERTIFICATION OF BIDDER REGARDING DEBARMENT AND SUSPENSION*

The Bidder, by signing the attached Bid Form, under penalty of perjury, certifies that, except as noted below, the Bidder and its principals:

1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by a government agency;
2. have not within a 3-year period preceding this Bid been convicted of or had a civil judgment rendered against us for: (i) commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; (ii) violation of federal or state antitrust statutes; or (iii) commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in item 2 above; and
4. have not within a 3-year period preceding this Bid had one or more public transactions (federal, state or local) terminated for cause or default.
5. Where the Bidder is unable to certify to any of the statements in this certification because it currently violates or has previously violated the above conditions 1 to 4, such prospective participant shall provide a description of each instance of violation and attach an explanation to this Bid. The Bidder declares the following exceptions to the above representations: *(If there are exceptions to this Certification, insert the exceptions in the space provided below.)*

N/A

Exceptions will not necessarily result in denial of award of the Contract, but will be considered in determining Bidder responsibility. For each exception noted above, Bidder shall indicate below to whom it applies, name of the government entity and dates of action:

<u>Exception</u>	<u>Person</u>	<u>Government Entity</u>	<u>Dates Inclusive</u>
N/A	N/A	N/A	N/A

**Fulfills requirements of Title 49, CFR, Part 29*

Note: *The above Certification is part of the Bid. Signing the Bid Form shall also constitute signature of this Certification. Providing false information may result in criminal prosecution or administrative sanctions.*

Bidder must submit this completed form with its Bid.

END OF SECTION



FORM 2B: “GOOD FAITH EFFORTS” REQUIREMENTS FORM

This “Good Faith Efforts” form, along with the required supporting documentation, must be completed and submitted per the instructions in this form, EVEN IF the LBE subcontracting/subconsulting participation requirement has been met (*Section 14B.8 of the San Francisco Administrative Code*). At the time of bid/proposal, Bidders/Proposers must submit this form along with its Bid/Proposal to be responsive. Failure to fulfill at least one of the three different approaches below may deem the Bid/Proposal nonresponsive.

To assist Bidders/Proposers with outreach to LBEs, the CMD website has a directory of certified LBEs: <https://sfgov.org/cmd/>.

Choose one of the three approaches listed below on this form. Approaches B and C require submittal of supporting documentation.

Approach A - 35% Approach

This approach is codified in Section 14B.8 of the San Francisco Administrative Code.

Under Approach A, a Bidder/Proposer must demonstrate that the total LBE participation requirement established for this project will be exceeded by at least 35%. This approach is illustrated in this CMD Attachment under Part IV.

- If a Contract has *separate* LBE sub participation requirements, the Bidder/Proposer must exceed by at least 35% the total sum of all the LBE sub participation requirements.
- A Small or Micro-LBE Prime Bidder/Proposer may not count its own contract work toward the LBE sub participation requirement portion, but may count its own contract work for the portion that exceeds the LBE sub participation requirement (i.e., 35% good faith outreach exception portion).
- An SBA-LBE Prime Bidder/Proposer may not count its own contract work towards the LBE sub participation requirement portion or the 35% good faith outreach exception portion.
- An SBA-LBE sub may count its participation towards the 35% good faith outreach exception portion if the Contract Monitoring Division Director permitted Bidders/Proposers to list SBA-LBE firms to satisfy the LBE sub participation requirement.

Select the boxes that apply:

Does your Bid/Proposal demonstrate that you have exceeded the established LBE sub participation requirement(s) by 35% or more in accordance with Section 14B.8(B)? YES NO

I am a Small or Micro-LBE Prime Bidder/Proposer. I have listed LBE subs on Section 00 43 36/Form 2A/equivalent form to meet the established LBE sub participation requirement(s). I am relying on self-performed contract work to meet the 35% good faith outreach approach. Below is the total value of contract work I will perform with my own forces:

Percent (%) or Amount (\$) of Work: _____

I am NOT a Small or Micro-LBE Bidder/Proposer. I have demonstrated on Section 00 43 36/Form 2A/equivalent form that the proposed LBE sub participation exceeds the sum of the established LBE sub participation requirements by at least 35%.



Approach B - Inclusion of Micro-LBE

This approach establishes that the Prime is utilizing Micro-LBEs on their projects.

Under Approach B, the Bidder’s/Proposer’s good faith efforts must be demonstrated by listing a different Micro-LBE subcontractor/subconsultant on this Bid or Proposal than they have listed in the last five (5) most recently awarded CCSF Contracts with LBE sub participation requirements.

- A Prime Bidder/Proposer that has been awarded at least five (5) CCSF Contracts at the time of the current Bid/Proposal must list at least one (1) Micro-LBE firm on its team that the Prime Bidder/Proposer has not listed on its last five (5) most recently awarded CCSF Contracts.
- A Prime Bidder/Proposer that has been awarded four (4) or less CCSF Contracts at the time of the current Bid/Proposal must list at least one (1) Micro-LBE firm on its team that the Prime Bidder/Proposer has not listed on any of its previously awarded CCSF Contracts and must indicate below the number of CCSF Contracts that it has been previously awarded.

Enter exact number of CCSF awarded Contracts:

- If there are separate LBE sub participation requirements on this Bid/Proposal, the Prime Bidder/Proposer is only required to list at least one Micro-LBE on its team to meet the "Good Faith Efforts" requirement.
- A Prime Bidder/Proposer that has never listed a Micro-LBE sub on any of its CCSF awarded Contracts or that has never bid on a CCSF Contract, may also utilize this approach.

A Bidder/Proposer must list the last five (5) most recently awarded CCSF Contracts below. If a Bidder/Proposer has four (4) or less CCSF awarded Contracts, it must list below all of its CCSF awarded Contracts. This includes Contracts where the Bidder/Proposer received a notification of award, even if work has not begun or if the Contract is not yet complete.

- CCSF Contracts that do not have an LBE sub participation requirement are excluded from this approach.
- Contracts where a Micro-LBE was utilized for a substitution, firm addition, or a trade package for CM/GC or DB projects are excluded from this approach.

Contract Awarding Department	Contract Title	Contract Number	Contract Awarding Department’s Award Date
1.			
2.			
3.			
4.			
5.			



Bidder/Proposer must submit the following supporting documents for verification purposes; failure to submit this documentation may result in the Bid/Proposal found non-responsive:

- For each of the Contracts listed above, the Prime Bidder/Proposer must include Section 00 43 36/CMD Form 2A/equivalent form submitted to the Contract Awarding Department.
- The Section 00 43 36, CMD Form 2A, or equivalent form must indicate the Contract Awarding Department, the Project Title and the Contract Number.

The Micro-LBE sub listed for Approach B must sign below. By signing below, the Micro-LBE is verifying that it has not been utilized on the Prime Bidder's/Proposal's projects provided above.

Contract Number and Name: _____

Signature of Micro-LBE Owner/Authorized Representative: _____

Micro-LBE Owner/Authorized Representative (Print): _____

Name of Firm (Print): _____

Title and Position: _____

Address, City, ZIP: _____

Telephone/E-mail: _____

Date: _____

Approach C - Good Faith Negotiation(s)

This approach awards points for negotiating with LBEs in good faith.

Under Approach C, the Bidder's/Proposer's good faith outreach will be evaluated based on the entire team listed for the contract, even if the contract includes separate LBE sub participation requirement(s).

- A Bidder/Proposer must achieve at least 50 points with any combination of Items #1 through #3 below, as determined by CMD, to be deemed compliant with the "good faith outreach" requirements. A Bidder/Proposer who fails to achieve at least 50 points will be declared nonresponsive, and the Bid/Proposal will be rejected. Please check "yes" or "no" for each item listed below. Supporting documentation for Items #1 through #3 below must be submitted with the Bid/Proposal.



<p>1. Did your firm contact CMD certified LBE firms, not less than 10 calendar days prior to the due date of the Bid/Proposal? If so, you must include email documentation showing the date of the contact with your Bid/Proposal to verify that contacts were made timely.</p> <p>The purpose of contacting LBE firms is to provide notice of interest in bidding/proposing for this project. When contacting LBEs, you should provide adequate information about the plans, specifications, and requirements for the work.</p> <p>A Bidder/Proposer will receive 1 point for each LBE firm contacted, not less than 10 calendar days prior to the due date of the Bids/Proposals. The Bidder/Proposer may receive up to a maximum of 10 points for this item. There is no limitation to how many LBE firms a Bidder/Proposer can contact. Where there are fewer than 10 LBE firms available for subcontracting, and CMD has confirmed as such prior to the bid/proposal due date, the bidder/proposer will receive the 10 points as long as all potential LBE firms are contacted.</p> <p>If the City gave public notice of the project less than 15 calendar days prior to the Bid/Proposal due date, the allocation of points above still applies, except that the Bidder/Proposer may contact those LBE firms identified less than 10 calendar days prior to the due date of the Bid/Proposal.</p>	<p><input checked="" type="checkbox"/> Yes (Maximum of 10 points)</p>	<p><input type="checkbox"/> No (0 points)</p>
<p>2. Did your firm follow-up/negotiate in good faith with interested LBEs? Your follow-up contact(s) with interested LBEs should include, but are not limited to correspondence regarding: the scope of work/services, quotes/billing rates, qualifications and/or expectations; the City's bonding and financial assistance program(s); assistance available to potential LBE subcontractors/subconsultants to properly mobilize; reduction of your firm's pre-qualification standards; etc.</p> <p>The Bidder/Proposer shall submit the following documentation:</p> <ul style="list-style-type: none"> a) Identify each interested LBE firm you are submitting email correspondence/documentation for; b) Copies of ALL email correspondence for each LBE identified for Item #2 (Note that the initial email correspondence from Items #1 above will not count towards the subject Item)—At a minimum, the Bidder/Proposer must include email documentation showing a response to the interested LBE; c) A full and complete statement of the reason(s) why any of the LBE firms identified for Item #2 was not selected for the subject project. <p>For each interested LBE firm that the Bidder/Proposer does follow-up with, the Bidder/Proposer will receive 10 points. There is no maximum amount of points/limitation to how many LBE firms a Bidder/Proposer can correspond with and follow-up/negotiate in good faith.</p> <p>A Bidder/Proposer who does not perform any follow-up contact with interested LBEs will receive zero points for Item #2.</p> <p>* "Interested LBE" shall mean an LBE firm that expresses interest in being a subcontractor/subconsultant/supplier to the Bidder/Proposer for the subject solicitation.</p>	<p><input checked="" type="checkbox"/> Yes (Minimum of 10 points to no Maximum)</p>	<p><input type="checkbox"/> No (0 points)</p>

matthew.anderson@buhlercommercial.com

From: Matthew Anderson <matthew.anderson@buhlercommercial.com>
Sent: Wednesday, May 15, 2024 1:23 PM
Cc: Steve Buhler
Subject: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Bid Request

Buhler Commercial is seeking LBE subcontractors and suppliers for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Sourcing event ID No. 0000009068. You are receiving this email because your firm is listed as an LBE certified contractor within one or more of the trades of work we have identified on the project.

Bid Closing: 5/29/2024 at 2:30PM Local Time
Bids Due From Subcontractors: 5/29/2024 at 1:30PM Local Time

PROJECT NAME: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID No.: 0000009068
BID DUE DATE: 05/29/2024 at 2:30PM (local time)
AWARDING AGENCY/OWNER: San Francisco Public Works Department of Public Health
PROJECT LOCATION: San Francisco, CA

Buhler Commercial is requesting quotes from San Francisco (Local) Small & Micro LBE certified firms (20% Participation), for Construction of ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition.

The objective of the project is to primarily of interior demolition and corridor renovation mainly at Ward C & E on the 5th floor of at Zuckerberg San Francisco General Hospital & Trauma Center Building 5 at 1001 Potrero Avenue San Francisco, CA. The Engineer's Estimate is \$5,900,000. Contract duration is 540 consecutive calendar days from NTP to substantial completion.

Quotes are sought qualified Subcontractors, Suppliers & Haulers for scopes of work, including but not limited to; Saw-Cutting, Demolition, Mechanical, Plumbing, Electrical, Data/Communications, Fire Sprinkler, Gypsum/Metal Framing, Metal Fabrications, Doors, Frames, Hardware, Glass/Glazing, Concrete, Architectural Woodwork, Flooring, Painting, Window Coverings, Other Required Work and Trades.

The Local Business Enterprise (LBE) subcontractor participation requirement for this Contract is 20.00%. The LBE subcontracting requirement can only be met with CMD certified San Francisco Micro and Small-LBEs. Micro and Small-LBE subcontracting participation breakdown:

10.3% MBE; 1.7% WBE; 8.0% OBE.

While no DBE Participation goal is currently set, participation from DBE & SBE is strongly encouraged.

The plans and specs are available for your review through Building Connected (ask Matthew Anderson for bid invite through Building Connected) or can be viewed on San Francisco Public Works' website.

<https://webapps.sfpuc.org/bids/BidDetail.aspx?bidid=4483>

Please contact our office with any questions or for help with bidding, bonding, or insurance. We are an equal opportunity employer. Bonds will only be required from qualified subcontractors if your bid value is above \$300,000. Please submit your bid proposals through Building Connected and/or emailed to matthew.anderson@buhlercommercial.com.

NOTE: All subcontractors must have a valid DIR number at the Time of bid.

Thank you,

Matthew Anderson
Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

matthew.anderson@buhlercommercial.com

From: Matthew Anderson <matthew.anderson@buhlercommercial.com>
Sent: Monday, June 3, 2024 2:05 PM
To: nick@abcoair.com
Subject: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Bid Request

Hello,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I sent you all an invite through Building Connected, but wanted to send a follow up email to see if you all would be interested in providing pricing for the HVAC scope of work. The project entails full demolition/abatement of two existing wards on the fifth floor of an active hospital along with a corridor and the reconstruction of the corridor. Since most of the project scope involves demolition your scope is primarily involved with just installing some new ducts at the corridor along with cutting/capping/safe off of items to be demoed (removal/disposal of items will be by others). Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24. If you can't find the invite let me know and I can resend the invite.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson
Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

Re: ZSFG Building 5 Family Health Center Relocation Scope Letter

Nick Lanthier <nick@abcoair.com>

Tue 6/25/2024 4:36 PM

To: Matthew Anderson <matthew.anderson@buhlercommercial.com>

Matthew,

Please hold on my bond %. I think what I put in Building Connected was wrong. I will confirm in the morning

Nick Lanthier

ABCO Mechanical Contractors inc.

475 Barneveld Avenue

San Francisco CA, 94124

[415.648.7135](tel:415.648.7135) - Office

[415.648.7105](tel:415.648.7105) – Fax

[415.722.0824](tel:415.722.0824) – Cell

nick@abcoair.com

On Jun 25, 2024, at 12:57 PM, Matthew Anderson
<matthew.anderson@buhlercommercial.com> wrote:

Received! I'll review and get back with any questions/comments either tonight or early tomorrow.

Thank you!

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

From: Nick Lanthier <nick@abcoair.com>

Sent: Tuesday, June 25, 2024 12:55 PM

To: Matthew Anderson <matthew.anderson@buhlercommercial.com>

Subject: Re: ZSFG Building 5 Family Health Center Relocation Scope Letter

Just sent through Building Connected.

Nick Lanthier
ABCO Mechanical Contractors inc.
475 Barneveld Avenue
San Francisco CA, 94124
[415.648.7135](tel:415.648.7135) - Office
[415.648.7105](tel:415.648.7105) – Fax
[415.722.0824](tel:415.722.0824) – Cell
nick@abcoair.com

On Jun 25, 2024, at 9:16 AM, Matthew Anderson
<matthew.anderson@buhlercommercial.com> wrote:

Everything looks covered on the scope Nick thanks for sending over. Look forward to seeing the final price once you have it. Maybe if possible when you send over the bid could you provide a deduct cost for doing only 31 dampers per the plans in lieu of the 39. Just curious what that would be.

Thanks,

Matthew Anderson
Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

From: Nick Lanthier <nick@abcoair.com>
Sent: Tuesday, June 25, 2024 7:17 AM
To: matthew.anderson@buhlercommercial.com
<matthew.anderson@buhlercommercial.com>
Subject: ZSFG Building 5 Family Health Center Relocation Scope Letter

Good Morning Matthew,
Please find the scope letter for ZSFG Building 5 Family Health Center Relocation attached. Once I have Siemens number I will send our proposal.
Thank you.

Nick Lanthier
<image001.png>

475 Barneveld Avenue
San Francisco CA, 94124
415.648.7135 - Office
415.648.7105 – Fax
415.722.0824 – Cell
nick@abcoair.com

matthew.anderson@buhlercommercial.com

From: Matthew Anderson <matthew.anderson@buhlercommercial.com>
Sent: Monday, June 3, 2024 8:16 AM
To: karen@apelectricalsf.com
Subject: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Project

Karen,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I sent you all an invite through Building Connected on 5/15/24 but not sure if you all have viewed the project or not, but wanted to send a follow up email to see if you all would be interested in providing pricing for the electrical, fire alarm, and/or low voltage scope of work for this project. The project entails full demolition/abatement of two existing wards on the fifth floor along with a corridor and the reconstruction of the corridor. Since most of the project scope involves demolition your scope is primarily involved with capping/safe off of existing electrical items to be demoed by the demo sub. You will have some new lighting, power, fire alarm, and low voltage needs in the corridor when we reconstruct it. Furthermore, please ensure to review the project manual in full as there are references to experience needed, specifically for the electrical and fire alarm subcontractor on previous OSHPD Type 1 acute care hospital projects (ensure to reference section 01 35 44 as well). Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24. If you can't find the invite let me know and I can resend the invite.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

matthew.anderson@buhlercommercial.com

From: Brock Bacon <brock@baconplumbing.com>
Sent: Tuesday, June 4, 2024 4:43 PM
To: Matthew Anderson
Subject: Re: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition

Hi Matthew,

Yes we are planning to submit a number for this project. Could you please clarify which scope you'd like us to handle. There is a separate demo set with seismic bracing, do we need to pick this up as well?

Brock Bacon

[A San Francisco LBE Certified Company](#) | [Cal-OSHA 30 Certified](#)

c 415.798.0002

On Monday, June 3, 2024 at 08:05:15 AM PDT, Matthew Anderson <matthew.anderson@buhlercommercial.com> wrote:

Brock,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I saw that you all are interested in the project and just wanted to confirm if you all planned to provide pricing for this project in relation to the plumbing scope of work? The project entails full demolition/abatement of two existing wards on the fifth floor along with a corridor and the reconstruction of the corridor. As you know the main portion of the project involves the demolition of two existing wards which means your scope of work primarily deals with cutting/capping/safe off of existing plumbing items to be demoed by the demo subcontractor. Also if interested ensure to reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson
Estimator

Re: ZSFG - Proposal

Brock Bacon <brock@baconplumbing.com>

Tue 6/25/2024 3:16 PM

To: Matthew Anderson <matthew.anderson@buhlercommercial.com>

Matthew,

Add Alt for domestic water piping as shown on sheet P2.52.2 is \$60,255.00

Brock Bacon

[A San Francisco LBE Certified Company](#) | [Cal-OSHA 30 Certified](#)

c 415.798.0002

On Tuesday, June 25, 2024 at 02:21:59 PM PDT, Matthew Anderson <matthew.anderson@buhlercommercial.com> wrote:

Yes I am referring to that area. Just assume continuation up to the point where it shows on the plans, so basically it stops right when it enters the two wards we are to demo.

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

From: Brock Bacon <brock@baconplumbing.com>

Sent: Tuesday, June 25, 2024 2:20 PM

To: Matthew Anderson <matthew.anderson@buhlercommercial.com>

Subject: Re: ZSFG - Proposal

P2.52.2 doesn't show a clouded area for the addendum. Assuming your referring to DCW, DWH/R between grid lines 6-7, how far are we to assume for each continuation?

Brock Bacon

[A San Francisco LBE Certified Company](#) | [Cal-OSHA 30 Certified](#)

c 415.798.0002

On Tuesday, June 25, 2024 at 02:15:13 PM PDT, Matthew Anderson <matthew.anderson@buhlercommercial.com> wrote:

Brock,

Does this include the cost for the new lines shown in the corridor on P2.52.2 in the addendum #3 drawings? If not please revise and resubmit.

Thank you,

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

From: Brock Bacon <brock@baconplumbing.com>

Sent: Tuesday, June 25, 2024 2:12 PM

To: Matthew Anderson <matthew.anderson@buhlercommercial.com>

Subject: ZSFG - Proposal

Matthew,

We propose the following for above referenced project:

(80) Cut & Cap

(84) Demo fixtures

(9) Seismic bracing

We acknowledge Addendums 1,2,3,4.

Total = \$111,700.00

Exclusions - shutdown and drain down, OT

Brock Bacon

A San Francisco LBE Certified Company | Cal-OSHA 30 Certified

c 415.798.0002

matthew.anderson@buhlercommercial.com

From: samuel bird <samuel@bird-electric.com>
Sent: Wednesday, June 5, 2024 6:58 PM
To: Matthew Anderson
Subject: Re: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition

Mathew , Thank you for the invite on this project . Unfortunately we have to pass on this one . We are an LBE electrical contractor in the city but we have 6 project bidding next week . We just have too many project on our plate right now bidding .

Please allow 1-2 days for any response. For immediate response please call .



Samuel Bird

Vice President

Phone: 415-963-4407 Ext. 702

Mobile: 408-417-7694

Email: Samuel@bird-electric.com

MAIN OFFICE: 1067 Market Street, Ste 1027, San Francisco, CA 94103

MAILING ADDRESS: 9030 Brentwood Blvd, Ste B, Brentwood, CA 94513

CSLB #1031168

SF LBE Cert #CMD6241000403

On Jun 3, 2024, at 7:53 AM, Matthew Anderson
<matthew.anderson@buhlercommercial.com> wrote:

Samuel,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I believe you all are aware of the project and wanted to understand if you all planned to provide pricing for this project in relation to the electrical, low voltage, and fire alarm scopes of work? The project entails full demolition of two existing wards on the fifth floor along with a corridor and the reconstruction of the corridor. For you all the scope would entail capping/safe off of existing electrical items to be demoed by the demo subcontractor and then new lighting and power requirements for the corridor construction along with any low voltage, security/intrusion, and fire alarm (deferred submittal) work. Furthermore, please ensure to review the project manual in full as there are references to experience needed, specifically for the electrical and fire alarm subcontractor on previous OSHPD Type 1 acute care hospital projects (ensure to reference section 01 35 44 as well). Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson
Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

Re: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Bid Request

William Delao <billdelao@sbcglobal.net>

Tue 6/4/2024 4:14 PM

To:Matthew Anderson <matthew.anderson@buhlercommercial.com>

Hi Matthew,

I wanted to make sure that we are only looking at bidding on the Phase 1 Demo Bid Set Plans. I see they have included the Permit Set & Reference Drawings but I assumed these drawings are only for references. Can you please confirm?

Thanks.

Brandon

Delao Electric, Inc.

617 Moraga Street, San Francisco, CA 94122

Office (415) 681-7011 Cell (415) 420-3054

On Monday, June 3, 2024 at 02:10:42 PM PDT, Matthew Anderson <matthew.anderson@buhlercommercial.com> wrote:

Bill,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. Wanted to confirm that you planned to price the electrical scope of work along with the deferred submittal for the fire alarm and any low voltage/security system requirements. I believe you all have done work with Zuckerberg Hospitals before and thought you would be a great candidate for this project. The project entails full demolition/abatement of two existing wards on the fifth floor along with a corridor and the reconstruction of the corridor. As you know the main portion of the project involves the demolition meaning your scope of work mainly deals with safe off of existing electrical items to be demoed by the demo subcontractor. You do have some new construction with your scope that entails power/lighting requirements for the corridor renovation along with any fire alarm and low voltage needs. Furthermore, please ensure to review the project manual in full as there are references to experience needed, specifically for the electrical and fire alarm subcontractor on previous OSHPD Type 1 acute care hospital projects (ensure to reference section 01 35 44 as well). Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.


Thank you,

Re: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Project

HANSAN FLOORING <hansan8822@yahoo.com>

Tue 6/11/2024 3:15 PM

To: Matthew Anderson <matthew.anderson@buhlercommercial.com>

 1 attachments (315 KB)

Proposal - ZSFG Building 5 Revised - Buhler.pdf;

Hi Matthew,

Sorry for the confusion... and thank you for letting me know.

Attached is the revised proposal for the C5C, C5D, and C5E Corridors. We don't do the Urethane Flooring. So I am not include the rooms 5C22 and 5D22 Waste Holding in the proposal.

If you have any question, please call me at the number below.

Best Regards,

Kien Chau

HANSAN FLOORING COMPANY
1555 Powell St. San Francisco, CA 94133
License: 1034439 DIR: 1000010239
LBE: CMD052617168
Phone: (408) 223-8822
Mobile (Kien): (408) 891-9067

On Monday, June 10, 2024 at 08:57:05 AM PDT, Matthew Anderson <matthew.anderson@buhlercommercial.com> wrote:

Kien,

Thank you for sending this quote over. Unfortunately I think there was some confusion in terms of scope. We are only doing the work shown on the demo set plans which means the only new flooring we need on the project is located at Rooms 5C22 Waste Holding, C5C Corridor, 5D22 Waste Holding, C5D Corridor, and C5E Corridor. Ensure to review the addendum #3 drawings that provides a new room finish schedule to clarify the scope. Please provide revised pricing per this change no later than end of business on 6/25.

Thank you,

Matthew Anderson
Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

From: HANSAN FLOORING <hansan8822@yahoo.com>

Sent: Saturday, June 8, 2024 4:22 PM

To: Matthew Anderson <matthew.anderson@buhlercommercial.com>; Steve Buhler <steve@buhlercommercial.com>

Subject: Re: ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Project

Hi Matthew,

It was nice to speak with you. Attached is the proposal for ZSFG Building 5 Family Health Center Relocation project.

If you have any question, please call me at the number below.

Best Regards,

Kien Chau

HANSAN FLOORING COMPANY
1555 Powell St. San Francisco, CA 94133
License: 1034439 DIR: 1000010239
LBE: CMD052617168
Phone: (408) 223-8822
Mobile (Kien): (408) 891-9067

On Thursday, June 6, 2024 at 03:43:49 PM PDT, HANSAN FLOORING <hansan8822@yahoo.com> wrote:

Hi Matthew,

Please let me know the material of resilient sheet from Nora Sentica is 2mm or 3mm?

If you have any question, please call me at the number below.

Best Regards,

Kien Chau

HANSAN FLOORING COMPANY
1555 Powell St. San Francisco, CA 94133
License: 1034439 DIR: 1000010239
Phone: (408) 223-8822
Mobile (Kien): (408) 891-9067

On Monday, June 3, 2024 at 01:36:43 PM PDT, Matthew Anderson <matthew.anderson@buhlercommercial.com> wrote:

Kien,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I sent you all an invite through Building Connected, but wanted to send a follow up email to see if you all would be interested in providing pricing for the flooring scope of work. The project entails full demolition/abatement of two existing wards on the fifth floor of an active hospital along with a corridor and the reconstruction of the corridor. Since most of the project scope involves demolition your scope is primarily involved with just new flooring for the corridor renovation, we are not installing new flooring at the two wards we are demoing. Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24. If you can't find the invite let me know and I can resend the invite.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson
Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Project Bid Request

Matthew Anderson <matthew.anderson@buhlercommercial.com>

Mon 6/3/2024 11:42 AM

To:triston@streamlinedrywall.com <triston@streamlinedrywall.com>

Streamline Drywall,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I sent you all an invite through Building Connected, but wanted to send a follow up email to see if you all would be interested in providing pricing for the framing, gypsum, and/or in wall insulation scope of work for this project. The project entails full demolition/abatement of two existing wards on the fifth floor of an active hospital along with a corridor and the reconstruction of the corridor. Since most of the project scope involves demolition your scope is primarily involved with just building new walls for the corridor renovation. If possible we would love for you all to provide pricing for the metal framing of the walls and gypsum for the walls. If possible, please provide pricing for the insulation in the walls along with caulking/fire caulking the walls as needed. Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24. If you can't find the invite let me know and I can resend the invite.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition

Matthew Anderson <matthew.anderson@buhlercommercial.com>

Mon 5/20/2024 3:15 PM

To: Jim Corners <jcorners@cpmenvironmental.com>

Jim,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on May 29th, 2024 at 2:30PM. I believe you all are aware of the project and wanted to understand if you all planned to provide pricing for this project in relation to the demolition, abatement, and hazardous materials scope of work? The project entails full demolition/abatement of two existing wards on the fifth floor along with a corridor and the reconstruction of the corridor. As you know the main portion of the project involves the demo/abatement/hazardous materials scopes. Furthermore, please ensure to review the project manual in full as there are references to experience needed, specifically for the demolition and abatement subcontractor on previous OSHPD Type 1 acute care hospital projects (ensure to reference section 01 35 44 as well). Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 5/29/24.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262




400 Brannan St., Ste. #204, San Francisco, CA 94107

ZSFGH DEMO - Bldg. 5 Phase 1 5E

Cesar Salinas <csalinas@cpmenvironmental.com>

Tue 6/25/2024 12:16 PM

To:matthew.anderson@buhlercommercial.com <matthew.anderson@buhlercommercial.com>

 3 attachments (2 MB)

Experience Statement - CPM.pdf; ZSFGH DEMO - Bldg. 5 Phase 1 5E.pdf; ZSFG DEMO BLDG. 5 PHASE 1- Bid Form.pdf;

Hi Mattew,

See attached proposal for the demolition and abatement scope for the ZSFGH Building 5 Phase 1 5E project. Let me know if you have any questions or need any additional information.

Thank you,

Cesar A. Salinas

PM/Estimator

T. 415.552.5511 | M. 510.755.0415

A. 2044 Union Street, San Francisco, CA 94123

CPM  NVIRONMENTAL, INC.

HAZARDOUS MATERIALS ABATEMENT & DEMOLITION

ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition LBE Bid Request

Matthew Anderson <matthew.anderson@buhlercommercial.com>

Mon 6/3/2024 1:57 PM

To:valuefire@gmail.com <valuefire@gmail.com>

Hello,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I sent you all an invite through Building Connected, but wanted to send a follow up email to see if you all would be interested in providing pricing for the fire sprinkler scope of work. The project entails full demolition/abatement of two existing wards on the fifth floor of an active hospital along with a corridor and the reconstruction of the corridor. Since most of the project scope involves demolition your scope is primarily involved with just revisions to the existing system for the corridor renovation, this is a deferred submittal so you will have to provide design/engineering as well. Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24. If you can't find the invite let me know and I can resend the invite.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition

Matthew Anderson <matthew.anderson@buhlercommercial.com>

Mon 6/3/2024 7:44 AM

To:miguel@km106.com <miguel@km106.com>

Miguel,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I believe you all are aware of the project and wanted to understand if you all planned to provide pricing for this project in relation to the demolition, abatement, and hazardous materials scope of work? The project entails full demolition/abatement of two existing wards on the fifth floor along with a corridor and the reconstruction of the corridor. As you know the main portion of the project involves the demo/abatement/hazardous materials scopes. Furthermore, please ensure to review the project manual in full as there are references to experience needed, specifically for the demolition and abatement subcontractor on previous OSHPD Type 1 acute care hospital projects (ensure to reference section 01 35 44 as well). Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson
Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition Project

Matthew Anderson <matthew.anderson@buhlercommercial.com>

Mon 6/3/2024 1:48 PM

To:RITA@CITYDOOR.COM <RITA@CITYDOOR.COM>;celena@citydoor.com <celena@citydoor.com>;don@citydoor.com <don@citydoor.com>

Hello,

Hope you are doing well today. Wanted to reach out as we are bidding as a prime GC for the ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition project located at 1001 Potrero Ave San Francisco, CA 94110 that bids on June 12th, 2024 at 2:30PM. I sent you all an invite through Building Connected, but wanted to send a follow up email to see if you all would be interested in providing pricing for the doors, frames, and hardware scope of work. The project entails full demolition/abatement of two existing wards on the fifth floor of an active hospital along with a corridor and the reconstruction of the corridor. Since most of the project scope involves demolition your scope is primarily involved with just new doors, frames, and hardware for the corridor renovation, we are not installing new doors at the two wards we are demoing. Also reference the Apprenticeship Training Program form (Section 00 49 15) along with the local hiring requirements (section 00 73 30).

I sent you an invite through Building Connected which will have all of the project drawings, specifications, and any other pertinent information, if you have trouble viewing anything please let me know. If possible, please submit your bids no later than 10AM 6/12/24. If you can't find the invite let me know and I can resend the invite.

We do have to meet a 20% LBE requirement for this job. Therefore, please ensure to submit all LBE back up documentation with your bid if you meet the LBE requirement.

Thank you,

Matthew Anderson

Estimator

Office: (415) 610-8650

Mobile: (770) 605-1936

CSLB #1003262



400 Brannan St., Ste. #204, San Francisco, CA 94107

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

SECTION 00 45 13
BIDDER'S QUALIFICATIONS

SF Public Works
 Date Received: 06/26/2024

Refer to Section 00 21 13 (Instructions to Bidders – Contractor Bidder Qualifications) for instructions. Add additional sheets as necessary to demonstrate compliance with the requirements specified in Section 00 21 13.

1. BIDDER'S NAME: <p align="center">Buhler Commercial</p>	
2. IS THIS A JOINT VENTURE? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No; If "Yes," list name of each joint venture partner:	
3. FEDERAL ID NO.: 47-2790101	4. SF BUSINESS TAX REG. NO.: 1018541
5. NAME OF RESPONSIBLE MANAGEMENT OFFICER: Steve Buhler	
6. DID BIDDER INSPECT THE PROJECT SITE? <input checked="" type="checkbox"/> Yes, <input type="checkbox"/> No; If "Yes," list name and phone of person who did the inspection:	
7. NAME: Kapone Molina	8. PHONE NO: 415-613-5901
9. NUMBER OF YEARS BIDDER'S ORGANIZATION HAS HAD EXPERIENCE IN WORK COMPARABLE WITH THAT REQUIRED UNDER THE PROPOSED CONTRACT: <u>9</u> Years as a General Contractor _____ Years as a Subcontractor	

10. BIDDER'S PROJECT EXPERIENCE:

(a)

PROJECT TITLE: SF JOC Contract 1710		
PROJECT DESCRIPTION / SCOPE OF WORK: JOC that included work in hospitals (city owned)		
LOCATION: Address, City, State Varies		
START DATE: 10/27/17	PLANNED COMPLETION DATE: 10/27/19	ACTUAL COMPLETION DATE: 4/30/20
CONTRACT AMOUNT: \$ 7,500,000		CHANGE ORDER AMOUNT: \$ N/A
CONTRACT SATISFIES: <input checked="" type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: McKee Electric, Value Fire Protection, BBJ Electric, Lynn Safety, De Harro,	
	Eagle Environmental	
NAME OF OWNER'S REPRESENTATIVE: Teenchee Le		
TITLE: Construction Contract Services		TELEPHONE: 415-530-0975
BUSINESS ADDRESS: 49 South Van Ness Ave, Suite #700, San Francisco, CA 94103		

DRAWING INDEX

GENERAL

G0.1 COVER SHEET

G0.2 ABBREVIATIONS, SYMBOLS, MATERIALS, PROJECT DATA & DRAWING INDEX

G0.3 CODE COMPLIANCE PLAN

ARCHITECTURAL

A1.0 ARCHITECTURAL SPECIFICATIONS

A1.1 KEY PLAN

A4.1 PARTIAL FLOOR PLANS - LV2

A5.1 INTERIOR ELEVATIONS

A9.1 INTERIOR DETAILS

A9.2 INTERIOR DETAILS

A9.5 UL LISTINGS

ELECTRICAL

E0.1 LEGEND & GENERAL NOTES

E0.2 SPECIFICATIONS, DEMOLITION NOTE & ABBREVIATIONS

E0.3 LOAD CALCULATION

E0.4 PANEL BOARD SCHEDULE

E1.1 SECTION AND DETAILS - POWER & VOICE/DATA

E4.1 POWER AND VOICE/DATA PLAN - LINK BLDG LV2 VALLEY SECOND FLOOR

E0.5 KEY PLAN - PANELBOARD LOCATIONS

SYMBOLS

A2-3 ← DRAWING NUMBER
← GROUP NUMBER
← DISCIPLINE PREFIX

(E) COLUMN LINE LETTERS IN ONE DIRECTION
NUMBERS IN THE OTHER DIRECTION

DOOR SYMBOL
DOOR MARK
HARDWARE GROUP

TYP. FURRING/PARTITION TAG
SEE SHEET A9.1

REVISION
CLOUD AROUND REVISION
OPTIONAL

SECTION
SECTION IDENTIFICATION
SHEET WHERE SECTION IS DRAWN.

DETAIL
DETAIL IDENTIFICATION
SHEET WHERE DETAIL IS DRAWN.

INTERIOR ELEVATION(S)
ELEVATION IDENTIFICATION
(UNFOLD ELEVATIONS CLOCKWISE.
NO ARROWS MEANS ELEVATION
NOT SHOWN.)
SHEET WHERE ELEVATION IS
DRAWN.

ROOM TAG
ROOM NAME
ROOM NO.
ROOM MATERIAL AND FINISH CODES
1ST NO.-FLOOR/BASE
2ND NO.-WALLS/WAINSCOT
3RD NO.-CEILING

CEILING ROOM TAG
ROOM NAME
ROOM NO.
ROOM CLG. HEIGHT

CODE COMPLIANCE ROOM I.D.
ROOM NAME
ROOM NO.
AREA (SF)
OCCUPANT LOAD
OCCUPANCY

INTERIOR GLAZING PARTITION

FURRING

NEW PARTITION

PARTITION WITH
SOUND INSULATION

1-HOUR FIRE RATED
PARTITION

2-HOUR FIRE RATED
PARTITION

1 HOUR FIRE/SMOKE
BARRIER

FIRE EXTINGUISHER

FIRE EXTINGUISHER CABINET

OWNER FURNISHED ITEMS
(NOT IN CONTRACT)

LIMIT OF WORK WITH
CONSTRUCTION BARRICADE

WINDOW SHADES

CORNER GUARD

EDGE GUARD/END CAP

DIMENSION LINES

CENTERLINE OF
COLUMN OR STUD

FACE OF FINISH, F.O.F.

CENTERLINE OF OPENING

CENTERLINE OF OPENING

AREAS WHERE NO
WORK IS TO BE DONE

EXISTING WALL OR
PARTITION TO REMAIN

EXISTING GYPSUM BOARD
TO BE REMOVED

EXISTING CONSTRUCTION
TO BE REMOVED

DOOR TO BE REMOVED

EXISTING DOOR
TO REMAIN

SPRINKLER HEAD

ACCESS PANEL

DIFFUSER, SUPPLY

REGISTER, EXHAUST
OR RETURN

CEILING MOUNTED
LIGHTING FIXTURE

PENDANT
LIGHTING FIXTURE

SMOKE OR HEAT DETECTOR

OCCUPANCY SENSOR,
CEILING MOUNTED

EXIT SIGN,
CEILING MOUNTED

WALL SCONCE

PAINT

INTERNATIONAL SYMBOL
OF ACCESSIBILITY (I.S.A.)

SIGNAGE MARK
DESIGNATED ON FLOOR
PLAN A2.2 & DETAILED
ON A9.4

STAIR DIRECTIONAL
ARROW INDICATES UP

RAMP DIRECTIONAL
ARROW INDICATES UP

MATERIALS

ACOUSTIC TILE OR BOARD

CERAMIC TILE
SHOW PROFILE ONLY

CONCRETE
CAST IN PLACE OR PRECAST

EARTH

GLASS
OMIT INDICATION IN
THIN MATERIAL

GYPSUM BOARD
OMIT DOUBLE LINES
AT SMALL SCALE

INSULATION, BATT

INSULATION, RIGID

METAL
OMIT INDICATION IN
THIN MATERIAL

PLYWOOD

WOOD, FINISH

WOOD, FRAMING
THROUGH MEMBER

WOOD, FRAMING
INTERRUPTED MEMBER

DET.
DIA.
DIM.
DISP.
DN.
D.O.
DR.
DWR.
DS.
DWG.
D.W.
E.
E.A.
E.B.
E.J.
EL.
ELEC.
ELEV.
EMER.
ENCL.
ENGR.
E.P.B.
EQ.
EQPT.
EXST.
EXPO.
EXP.
EXT.

Detail
Diameter
Dimension
Dispenser
Down
Door Opening
Door
Drawer
Downspout
Drawing
Dishwasher
East
Each
Expansion Bolt
Expansion Joint
Elevation
Electrical
Elevator
Emergency
Enclosure
Engineer
Electrical Panel Board
Equal
Equipment
Existing
Exposed
Expansion
Exterior

F.A.
F.D.
FDN.
F.E.
F.H.C.
F.H.W.S.
FIN.
FIXT.
FL.
FLASH.
FLUOR.
F.O.C.
F.O.F.
F.O.S.
FPRF.
F.S.
FT.
FTS.
FURR.
FUT.

Fire Alarm
Floor Drain
Foundation
Fire Extinguisher
Fire Hose Cabinet
Flat Head Wood Screw
Finish
Fixture
Floor
Flashing
Fluorescent
Face of Concrete
Face of Finish
Face of Studs
Fireproof
Floor Sink
Foot or Feet
Footing
Furring
Future

GA.
GALV.
G.B.
GL.
GND.
GR.
GYP.

Gauge
Galvanized
Grab Bar
Glass
Ground
Grade
Gypsum

H.B.
HDWD.
HDWE.
HORIZ.
HR.
HGT. or H.
H.P.

Hose Bibb
Hardwood
Hardware
Horizontal
Hour
Height
High Point

I.D.
INFO.
INSUL.
INT.
INTER.

Inside Diameter (Dim.)
Information
Insulation
Interior
Intermediate

JAN.
JT.

Janitor
Joint

ABBREVIATIONS

& L
@
C

(E)
(N)
(R)

And
Angle
At
Centerline
Diameter or Round
Pound or Number
Existing
New
Relocated

A.B.
ACOUS.
A.D.
ADD.
ADJ.
A.F.F.
AGGR.
AL.
ALT.
A.P.
APPROX.
ARCH.
ASB.

Anchor Bolt
Acoustical
Area Drain
Additional
Adjustable
Above Finished Floor
Aggregate
Aluminum
Alternate
Access Panel
Approximate
Architectural
Asbestos

B.B.
BD.
BKG.
BLDG.
BLK.
BLKG.
BM.
BOT.

Bulletin Board
Board
Backing
Building
Block
Blocking
Beam
Bottom

CAB.
CEM.
CER.
C.I.
C.G.
C.J.
CLG.
CLKG.
CLO.
CLR.
C.O.
COL.
CONC.
CONN.
CONSTR.
CONT.
CORR.
CPT.
CTSK.
CNTR.
C.R.C.
CTR.

Cabinet
Cement
Ceramic
Cast Iron
Corner Guard
Construction Joint
Ceiling
Caulking
Closet
Clear
Cased Opening
Column
Concrete
Connection
Construction
Continuous
Corridor
Carpet
Countersunk
Counter
Cold Rolled Channel
Center

DET.
DIA.
DIM.
DISP.
DN.
D.O.
DR.
DWR.
DS.
DWG.
D.W.
E.
E.A.
E.B.
E.J.
EL.
ELEC.
ELEV.
EMER.
ENCL.
ENGR.
E.P.B.
EQ.
EQPT.
EXST.
EXPO.
EXP.
EXT.

Detail
Diameter
Dimension
Dispenser
Down
Door Opening
Door
Drawer
Downspout
Drawing
Dishwasher
East
Each
Expansion Bolt
Expansion Joint
Elevation
Electrical
Elevator
Emergency
Enclosure
Engineer
Electrical Panel Board
Equal
Equipment
Existing
Exposed
Expansion
Exterior

F.A.
F.D.
FDN.
F.E.
F.H.C.
F.H.W.S.
FIN.
FIXT.
FL.
FLASH.
FLUOR.
F.O.C.
F.O.F.
F.O.S.
FPRF.
F.S.
FT.
FTS.
FURR.
FUT.

Fire Alarm
Floor Drain
Foundation
Fire Extinguisher
Fire Hose Cabinet
Flat Head Wood Screw
Finish
Fixture
Floor
Flashing
Fluorescent
Face of Concrete
Face of Finish
Face of Studs
Fireproof
Floor Sink
Foot or Feet
Footing
Furring
Future

GA.
GALV.
G.B.
GL.
GND.
GR.
GYP.

Gauge
Galvanized
Grab Bar
Glass
Ground
Grade
Gypsum

H.B.
HDWD.
HDWE.
HORIZ.
HR.
HGT. or H.
H.P.

Hose Bibb
Hardwood
Hardware
Horizontal
Hour
Height
High Point

I.D.
INFO.
INSUL.
INT.
INTER.

Inside Diameter (Dim.)
Information
Insulation
Interior
Intermediate

JAN.
JT.

Janitor
Joint

LAM.
LAV.
LKR.
LT.

Laminate
Lavatory
Locker
Light

MAS.
MAT.
MAX.
MECH.
MEMB.
MET.
MFR.
MIN.
MIR.
MISC.
MTD.
MUL.

Masonry
Material
Maximum
Mechanical
Membrane
Metal
Manufacturer
Minimum
Mirror
Miscellaneous
Mounted
Mullion

N.
N.I.C.
NO. or #
NOM.
N.T.S.

North
Not In Contract
Number
Nominal
Not To Scale

O.A.
OBS.
O.C.
O.D.
OFF.
O.H.
O.L.F.
OPNG.
OPP.
O.F.C.I.
OSHDP

Overall
Obscure
On Center
Outside Diameter (Dim.)
Office
Opposite Hand
Occupant Load Factor
Opening
Opposite
Owner Furnished Contractor Installed
Office of Statewide Health Planning
and Development

P.
PRCST.
PL.
P.LAM.
PLAS.
PLYWD.
PR.
PT.
P.T.D.
P.T.D/R

Point
Pre-cast
Plate
Plastic Laminate
Plaster
Plywood
Point
Point
Paper Towel Dispenser
Combination Paper Towel
Dispenser & Receptacle

PTN.
P.T.R.

Partition
Paper Towel Receptacle

QTY.

Quantity

R.
RAD.
REF.
REFR.
RGR.
REINF.
REQ.
RESIL.
RM.
R.O.
RUB.
R.H.

Riser
Radius
Reference
Refrigerator
Register
Reinforced
Required
Resilient
Room
Rough Opening
Rubber
Robe Hook

S.
S.A.D.
S.A.P.
S.C.D.
SCHED.
S.D.
SECT.
S.E.D.
SH.
SHR.
SH.T.
SIM.
S.M.D.
S.M.S.
S.N.D.
S.N.R.
SPEC.
S.P.D.
SQ.
S.S.D.
S.S.T.
S.S.K.
STA.
STD.
STL.
STOR.
STR.L.
SUSP.
SYM.

South
See Architectural Drawing
Solid Acrylic Polymer
Seat Cover Dispenser
Schedule
Soap Dispenser
Section
See Electrical Drawing
Shelf
Shower
Sheet
Similar
See Mechanical Drawing
Sheet Metal Screw
Sanitary Napkin Dispenser
Sanitary Napkin Receptacle
Specification
See Plumbing Drawing
Square
See Structural Drawing
Stainless Steel
Service Sink
Station
Standard
Steel
Storage
Structural
Suspended
Symmetrical

T.
T.B.
TEL.
THK.
THRES.
T.P.D.
T.V.
T.W.
TYP.

Tread
Towel Bar
Telephone
Thick
Threshold
Toilet Paper Dispenser
Television
Top of Wall
Typical

UNF.
U.O.N.
UR.

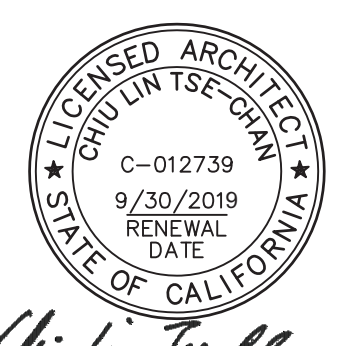
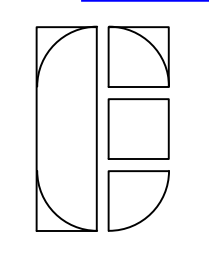
Unfinished
Unless Otherwise Noted
Urinal

VERT.
VEST.
V.I.F.

Vertical
Vestibule
Verify in Field

W.
W/
WC.
W.C.
WD.
W.F.
WIN.
W.O.
W/O
WP.
WSCOT.
WT.
W.R.

West
With
Wallcovering
Water Closet
Wood
Wide Flange
Window
Where Occurs
Without
Waterproof
Wainscot
Weight
Water Resistant



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Project

LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

ELECTRONIC HEALTH RECORDS LINK BUILDING

PROJECT ADDRESS: 375 LAGUNA HONDA BOULEVARD, SF, CA 94116

Consultant

ELECTRICAL ENGINEER
AAES, INC.

AGENCY APPROVAL

OSHPD PROJECT NUMBER: S181569-38-00

Issue AUGUST 24TH, 2018

OSHPD BACKCHECK NO. 2

No.	Date	Revisions
2	8/24/2018	OSHPD BACKCHECK NO. 2
1	8/10/2018	OSHPD BACKCHECK NO. 1
1	7/7/2018	ISSUED FOR PERMIT

Drawn
Proj. Arch.
Proj. Mgr.
Section Head
PROJECT NO. FCA 437
Drawing Title

ABBREVIATIONS, SYMBOLS, MATERIALS, PROJECT DATA & DRAWING INDEX

Sheet No. **G0.2**

Scale **NO SCALE**
Job No.

DRAWING INDEX

- GENERAL**
- G0.1 COVER SHEET
 - G0.2 ABBREVIATIONS, SYMBOLS, MATERIALS, PROJECT DATA & DRAWING INDEX
 - G0.3 CODE COMPLIANCE PLAN
- ARCHITECTURAL**
- A1.0 ARCHITECTURAL SPECIFICATIONS
 - A1.1 KEY PLAN
 - A4.1 PARTIAL FLOOR PLANS - L2 & L3
 - A4.2 PARTIAL FLOOR PLANS - L4 & L5
 - A4.3 PARTIAL FLOOR PLANS - L6
 - A5.1 INTERIOR ELEVATIONS
 - A9.1 INTERIOR DETAILS
 - A9.2 INTERIOR DETAILS
 - A9.5 UL LISTINGS
- ELECTRICAL**
- E0.1 LEGEND & GENERAL NOTES
 - E0.2 SPECIFICATIONS, DEMOLITION NOTE & ABBREVIATIONS
 - E0.3 LOAD CALCULATION
 - E0.4 PANEL BOARD SCHEDULE
 - E0.5 PANEL BOARD SCHEDULE
 - E1.1 SECTIONS AND DETAILS - POWER & VOICE/DATA
 - E4.1 PARTIAL FLOOR PLANS - L2 & L3 - POWER AND VOICE/DATA
 - E4.2 PARTIAL FLOOR PLANS - L4 & L5 - POWER AND VOICE/DATA
 - E4.3 PARTIAL FLOOR PLANS - L6 - POWER AND VOICE/DATA
 - E0.6 KEY PLAN - PANELBOARD LOCATIONS
 - E0.7 KEY PLAN - PANELBOARD LOCATIONS - LEVEL V2

SYMBOLS

A2-3 ← DRAWING NUMBER
← GROUP NUMBER
← DISCIPLINE PREFIX

(A) (E) COLUMN LINE LETTERS IN ONE DIRECTION
(1) NUMBERS IN THE OTHER DIRECTION

1 DOOR SYMBOL
2 DOOR MARK
2 HARDWARE GROUP

A1 TYP. FURRING/PARTITION TAG
SEE SHEET A9.1

REVISION
CLOUD AROUND REVISION
OPTIONAL

20 SECTION IDENTIFICATION
8-1 SHEET WHERE SECTION IS DRAWN.

4 DETAIL IDENTIFICATION
9-1 SHEET WHERE DETAIL IS DRAWN.

INTERIOR ELEVATION(S)
ELEVATION IDENTIFICATION
(UNFOLD ELEVATIONS CLOCKWISE.
NO ARROWS MEANS ELEVATION
NOT SHOWN.)
4 SHEET WHERE ELEVATION IS
DRAWN.

OFFICE ROOM TAG
104 ROOM NAME
1A2 ROOM NO.
ROOM MATERIAL AND FINISH CODES
1ST NO.-FLOOR/BASE
2ND NO.-WALLS/WAINSCOT
3RD NO.-CEILING

OFFICE CEILING ROOM TAG
104 ROOM NAME
1A2 ROOM NO.
ROOM CLG. HEIGHT

OFFICE CODE COMPLIANCE ROOM I.D.
104 ROOM NAME
X SF ROOM NO.
X SF AREA (SF)
X OCC. OCCUPANT LOAD
OCCUPANCY

INTERIOR GLAZING PARTITION

FURRING

NEW PARTITION

PARTITION WITH SOUND INSULATION

1-HOUR FIRE RATED PARTITION

2-HOUR FIRE RATED PARTITION

1 HOUR FIRE/SMOKE BARRIER

FIRE EXTINGUISHER
F.E.

FIRE EXTINGUISHER CABINET
F.E.C.

OWNER FURNISHED ITEMS (NOT IN CONTRACT)
N.I.C.

LIMIT OF WORK WITH CONSTRUCTION BARRICADE

WINDOW SHADES

CORNER GUARD

EDGE GUARD/END CAP

DIMENSION LINES

CENTERLINE OF COLUMN OR STUD

FACE OF FINISH, F.O.F.

CENTERLINE OF OPENING

CENTERLINE OF OPENING

AREAS WHERE NO WORK IS TO BE DONE

EXISTING WALL OR PARTITION TO REMAIN

EXISTING GYPSUM BOARD TO BE REMOVED

EXISTING CONSTRUCTION TO BE REMOVED

DOOR TO BE REMOVED

EXISTING DOOR TO REMAIN

SPRINKLER HEAD

ACCESS PANEL

DIFFUSER, SUPPLY

REGISTER, EXHAUST OR RETURN

CEILING MOUNTED LIGHTING FIXTURE

PENDANT LIGHTING FIXTURE

SMOKE OR HEAT DETECTOR

OCCUPANCY SENSOR, CEILING MOUNTED

EXIT SIGN, CEILING MOUNTED

WALL SCONCE

PAINT

INTERNATIONAL SYMBOL OF ACCESSIBILITY (I.S.A.)

SIGNAGE MARK DESIGNATED ON FLOOR PLAN A2.2 & DETAILED ON A9.4

STAIR DIRECTIONAL ARROW INDICATES UP

RAMP DIRECTIONAL ARROW INDICATES UP

MATERIALS

ACOUSTIC TILE OR BOARD

CERAMIC TILE SHOW PROFILE ONLY

CONCRETE CAST IN PLACE OR PRECAST

EARTH

GLASS OMIT INDICATION IN THIN MATERIAL

GYPSUM BOARD OMIT DOUBLE LINES AT SMALL SCALE

INSULATION, BATT

INSULATION, RIGID

METAL OMIT INDICATION IN THIN MATERIAL

PLYWOOD

WOOD, FINISH

WOOD, FRAMING THROUGH MEMBER

WOOD, FRAMING INTERRUPTED MEMBER

ABBREVIATIONS

& And	LAM. Laminate
L Angle	LAV. Lavatory
@ At	LKR. Locker
⊙ Centerline	LT. Light
⌀ Diameter or Round	
# Pound or Number	MAS. Masonry
(E) Existing	MAT. Material
(N) New	MAX. Maximum
(R) Relocated	MECH. Mechanical
	MEMB. Membrane
A.B. Anchor Bolt	MET. Metal
ACOUS. Acoustical	MFR. Manufacturer
A.D. Area Drain	MIN. Minimum
ADD. Additional	MIR. Mirror
ADJ. Adjustable	MISC. Miscellaneous
A.F.F. Above Finished Floor	MTD. Mounted
AGGR. Aggregate	MUL. Mullion
AL. Aluminum	
ALT. Alternate	N. North
A.P. Access Panel	N.I.C. Not in Contract
APPROX. Approximate	NO. or # Number
ARCH. Architectural	NOM. Nominal
ASB. Asbestos	N.T.S. Not To Scale
B.B. Bulletin Board	O.A. Overall
BD. Board	OBS. Obscure
BKG. Backing	O.C. On Center
BLDG. Building	O.D. Outside Diameter (Dim.)
BLK. Block	OFF. Office
BLKG. Blocking	O.H. Opposite Hand
BM. Beam	O.L.F. Occupant Load Factor
BOT. Bottom	OPNG. Opening
	OPP. Opposite
CAB. Cabinet	O.F.C.I. Owner Furnished Contractor Installed
CEM. Cement	OSHPD Office of Statewide Health Planning and Development
CER. Ceramic	
C.I. Cast Iron	P. Point
C.G. Corner Guard	PRCST. Pre-cast
C.J. Construction Joint	PL. Plate
CLG. Ceiling	P.LAM. Plastic Laminate
CLKG. Caulking	PLAS. Plaster
CLO. Closet	PLYWD. Plywood
CLR. Clear	PR. Pair
C.O. Cased Opening	PT. Point
COL. Column	P.T.D. Paper Towel Dispenser
CONC. Concrete	P.T.D/R Combination Paper Towel Dispenser & Receptacle
CONN. Connection	PTN. Partition
CONSTR. Construction	P.T.R. Paper Towel Receptacle
CONT. Continuous	
CORR. Corridor	QTY. Quantity
CPT. Carpet	
CTSK. Countersunk	R. Riser
CNTR. Counter	RAD. Radius
C.R.C. Cold Rolled Channel	REF. Reference
CTR. Center	REFR. Refrigerator
	RGR. Register
DET. Detail	REINF. Reinforced
DIA. Diameter	REQ. Required
DIM. Dimension	RESIL. Resilient
DISP. Dispenser	RM. Room
DN. Down	R.O. Rough Opening
D.O. Door Opening	RUB. Rubber
DR. Door	R.H. Robe Hook
DWR. Drawer	
DS. Downspout	S. South
DWG. Drawing	S.A.D. See Architectural Drawing
D.W. Dishwasher	S.A.P. Solid Acrylic Polymer
E. East	S.C.D. Seat Cover Dispenser
E.A. Each	SCHED. Schedule
E.B. Expansion Bolt	S.D. Soap Dispenser
E.J. Expansion Joint	SECT. Section
EL. Elevation	S.E.D. See Electrical Drawing
ELEC. Electrical	SH. Shelf
ELEV. Elevator	SHR. Shower
EMER. Emergency	SHT. Sheet
ENCL. Enclosure	SIM. Similar
ENGR. Engineer	S.M.D. See Mechanical Drawing
E.P.B. Electrical Panel Board	S.M.S. Sheet Metal Screw
EQ. Equal	S.N.D. Sanitary Napkin Dispenser
EQT. Equipment	S.N.R. Sanitary Napkin Receptacle
EXST. Existing	SPEC. Specification
EXPO. Exposed	S.P.D. See Plumbing Drawing
EXP. Expansion	SQ. Square
EXT. Exterior	S.S.D. See Structural Drawing
	ST. Stainless Steel
F.A. Fire Alarm	S.K. Service Sink
F.D. Floor Drain	STA. Station
FDN. Foundation	STD. Standard
F.E. Fire Extinguisher	STL. Steel
F.H.C. Fire Hose Cabinet	STOR. Storage
F.H.W.S. Flat Head Wood Screw	STR. Structural
FIN. Finish	SUSP. Suspended
FXTR. Fixture	SYM. Symmetrical
FL. Floor	
FLASH. Flashing	T. Tread
FLUOR. Fluorescent	T.B. Towel Bar
F.O.C. Face of Concrete	TEL. Telephone
F.O.F. Face of Finish	THK. Thick
F.O.S. Face of Studs	THRES. Threshold
F.PRF. Fireproof	T.P.D. Toilet Paper Dispenser
F.S. Floor Sink	T.V. Television
FT. Foot or Feet	T.W. Top of Wall
FTG. Footing	TYP. Typical
FURR. Furring	
FUT. Future	
GA. Gauge	UNF. Unfinished
GALV. Galvanized	U.O.N. Unless Otherwise Noted
G.B. Grab Bar	UR. Urinal
GL. Glass	
GND. Ground	VERT. Vertical
GR. Grade	VEST. Vestibule
GYP. Gypsum	V.I.F. Verify in Field
H.B. Hose Bibb	W. West
HDWD. Hardwood	W/ With
HDWE. Hardware	WC. Wallcovering
HORIZ. Horizontal	W.C. Water Closet
HR. Hour	WD. Wood
HGT or H. Height	W.F. Wide Flange
H.P. High Point	WIN. Window
	W.O. Where Occurs
I.D. Inside Diameter (Dim.)	W/O Without
INFO. Information	WP. Waterproof
INSUL. Insulation	WSCT. Wainscot
INT. Interior	WT. Weight
INTER. Intermediate	W.R. Water Resistant
JAN. Janitor	
JT. Joint	



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Project
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

ELECTRONIC HEALTH RECORDS SOUTH RESIDENCE

PROJECT ADDRESS: 375 LAGUNA HONDA BOULEVARD, SF, CA 94116

Consultant
AAES, INC. ELECTRICAL ENGINEER

AGENCY APPROVAL

OSHPD PROJECT NUMBER: S181568-38-00

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1	8/24/2018	OSHPD BACKCHECK NO. 2
2	8/10/2018	OSHPD BACKCHECK NO. 1
3	7/7/2018	ISSUED FOR PERMIT

Drawn
Proj. Arch.
Proj. Mgr.
Section Head

PROJECT NO.
FCA 437

Drawing Title

ABBREVIATIONS, SYMBOLS, MATERIALS, PROJECT DATA & DRAWING INDEX

Sheet No. **G0.2**

Scale **NO SCALE**

Job No.

Additional Projects for Experience Statement & Qualifications

ZSFG Building 5

Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 0000009068

(b)

PROJECT TITLE: EBMUD Operations Center		
PROJECT DESCRIPTION / SCOPE OF WORK: Renovation of critical operations center for EBMUD.		
LOCATION: <i>Address, City, State</i> 2020 Wake Ave, Oakland, CA 94607		
START DATE: 5/30/2023	PLANNED COMPLETION DATE: 7/24/2024	ACTUAL COMPLETION DATE:
CONTRACT AMOUNT: \$ 7,118,690	CHANGE ORDER AMOUNT: \$ 487,563	
CONTRACT SATIFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: Asbestos Management Group, Innovate Concrete, Ayoob & Peery, Con J Franke, Marina Mechanical, Ocean Park Mechanical, etc.	
NAME OF OWNER'S REPRESENTATIVE: Dominic La Marche		
TITLE: Project Manager	TELEPHONE: (510) 882-6897	
BUSINESS ADDRESS: 2020 Wake Ave., Oakland, CA 94607		

SF Public Works
Date Received: 07/12/2024

(c)

PROJECT TITLE: Willard Clubhouse		
PROJECT DESCRIPTION / SCOPE OF WORK: Ground up clubhouse and new restrooms for City of Berkeley		
LOCATION: <i>Address, City, State</i> 2730 Hillegass Ave, Berkeley, CA 94705		
START DATE: 3/12/24	PLANNED COMPLETION DATE: 4/11/25	ACTUAL COMPLETION DATE:
CONTRACT AMOUNT: \$ 6,210,061	CHANGE ORDER AMOUNT: \$ 101,000	
CONTRACT SATIFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: Janus Corp, Ocean Park Mechanical, A3 Pipeline, BME Electrical, Hudock Fire Protection, Ahloborn Steel, Solar Technologies	
NAME OF OWNER'S REPRESENTATIVE: Stacey Rutherford		
TITLE: Facilities Project Manager	TELEPHONE: (510) 981-6738	
BUSINESS ADDRESS: 1947 Center Street, 5th Floor, Berkeley, CA 94704		

(Add sheets if necessary.)

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

(b)

PROJECT TITLE: JOC-37 Laguna Honda Hospital East Wing		
PROJECT DESCRIPTION / SCOPE OF WORK: Electrical and finish upgrades to charting rooms.		
LOCATION: <i>Address, City, State</i> 375 Laguna Honda Blvd, San Francisco, CA 94116		
START DATE: 12/4/2018	PLANNED COMPLETION DATE: 3/3/2019	ACTUAL COMPLETION DATE: 7/1/2019
CONTRACT AMOUNT: \$ 399,990.61	CHANGE ORDER AMOUNT: \$ 12,154.67	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: McKee and Company Electrical	
NAME OF OWNER'S REPRESENTATIVE: Elaine Obien		
TITLE: Facilities Project Manager	TELEPHONE: (415)806-0414	
BUSINESS ADDRESS: 101 Grove St., Suite 319, San Francisco, CA 94102		

SF Public Works
Date Received: 07/12/2024

(c)

PROJECT TITLE: JOC-37 Lagana Honda Hospital Link Building		
PROJECT DESCRIPTION / SCOPE OF WORK: Electrical and finish upgrades to charting rooms.		
LOCATION: <i>Address, City, State</i> 375 Laguna Honda Blvd, San Francisco, CA 94116		
START DATE: 12/4/2018	PLANNED COMPLETION DATE: 3/3/2019	ACTUAL COMPLETION DATE: 7/1/2019
CONTRACT AMOUNT: \$ 79,035.62	CHANGE ORDER AMOUNT: \$ 1,513.93	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: McKee and Company Electrical	
NAME OF OWNER'S REPRESENTATIVE: Elaine Obien		
TITLE: Facilities Project Manager	TELEPHONE: (415)806-0414	
BUSINESS ADDRESS: 101 Grove St., Suite 319, San Francisco, CA 94102		

(Add sheets if necessary.)

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 0000009068

(b)

PROJECT TITLE: JOC-37 Laguna Honda Hospital South Wing		
PROJECT DESCRIPTION / SCOPE OF WORK: Electrical and finish upgrades to charting rooms.		
LOCATION: <i>Address, City, State</i> 375 Laguna Honda Blvd, San Francisco, CA 94116		
START DATE: 12/4/2018	PLANNED COMPLETION DATE: 3/3/2019	ACTUAL COMPLETION DATE: 7/1/19
CONTRACT AMOUNT: \$ 308,795.44	CHANGE ORDER AMOUNT: \$ 8,646.87	
CONTRACT SATIFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: McKee and Company Electrical	
NAME OF OWNER'S REPRESENTATIVE: Elaine Obien		
TITLE: Facilities Project Manager	TELEPHONE: (415)806-0414	
BUSINESS ADDRESS: 101 Grove St., Suite 319, San Francisco, CA 94102		

SF Public Works
Date Received: 07/12/2024

(c)

PROJECT TITLE: JOC-37 ZSFGH Fall Protection		
PROJECT DESCRIPTION / SCOPE OF WORK: Installation of fall protection and fire protection modifications		
LOCATION: <i>Address, City, State</i> 1001 Potrero Ave, San Francisco, CA 94110		
START DATE: 2/1/19	PLANNED COMPLETION DATE: 7/1/2019	ACTUAL COMPLETION DATE: 4/16/2020
CONTRACT AMOUNT: \$ 342,052	CHANGE ORDER AMOUNT: \$ 105,315	
CONTRACT SATIFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: Value Fire Protection, Lynn Safety	
NAME OF OWNER'S REPRESENTATIVE: Patricia Leung		
TITLE: Resident Engineer	TELEPHONE: (415) 533-9627	
BUSINESS ADDRESS: 49 South Van Ness Ave, Suite 1000, San Francisco, CA 94103		

(Add sheets if necessary.)

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 0000009068

(b)

SF Public Works
 Date Received: 07/12/2024

PROJECT TITLE: San Francisco 911 Call Center Renovation		
PROJECT DESCRIPTION / SCOPE OF WORK: Renovation of 911 Call Center for SF Department of Emergency Management		
LOCATION: <i>Address, City, State</i> 1011 Turk Street, San Francisco, CA 94102		
START DATE: 11/4/2022	PLANNED COMPLETION DATE: 12/30/2023	ACTUAL COMPLETION DATE: 2/15/2024
CONTRACT AMOUNT: \$ 3,395,000	CHANGE ORDER AMOUNT: \$ 489,561	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: Conflo Demo, James Hewatt Steel, Custom Fire Protection, Bacon Plumbing, Aire Sheet Metal, McKee Electric and Fire Alarm	
NAME OF OWNER'S REPRESENTATIVE: Dennis Oates		
TITLE: Construction Manager	TELEPHONE: 415.686.4328	
BUSINESS ADDRESS: 49 South Van Ness Ave., Suite 1000, San Francisco, CA 94103		

(c)

PROJECT TITLE: San Francisco County Jail #2 Improvements		
PROJECT DESCRIPTION / SCOPE OF WORK: Renovation in occupied correctional facility for SF Sherifs Department		
LOCATION: <i>Address, City, State</i> 425 7th Street, San Francisco, CA 94103		
START DATE: 2/14/20	PLANNED COMPLETION DATE: 6/7/21	ACTUAL COMPLETION DATE: 12/16/22
CONTRACT AMOUNT: \$ \$2,671,000	CHANGE ORDER AMOUNT: \$ 869,709	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: AAA Fire Proection, Redstone Plumbing, KSM Steel, RP Coatings, Custom Fire Protection, 415 Electric, BK Millworks, Bay Cities.	
NAME OF OWNER'S REPRESENTATIVE: John Ramirez		
TITLE: Captain	TELEPHONE: (415) 716-8697	
BUSINESS ADDRESS: 120 14th Street, San Francisco, CA 94103		

(Add sheets if necessary.)

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 000009068

(b)

SF Public Works
 Date Received: 07/12/2024

PROJECT TITLE: San Francisco Main Public Library		
PROJECT DESCRIPTION / SCOPE OF WORK: Elevator replacement and accessible improvement to occupied main public library.		
LOCATION: <i>Address, City, State</i> 100 Larkin Street, San Francisco, CA 94102		
START DATE: 1/2/2020	PLANNED COMPLETION DATE: 2/14/2022	ACTUAL COMPLETION DATE: 11/30/2022
CONTRACT AMOUNT: \$ 3,718,000	CHANGE ORDER AMOUNT: \$ 55,726	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: Kone, JCI, Siemens, RLH Fire Protection, CBF Electric, BT Mancini Flooring	
NAME OF OWNER'S REPRESENTATIVE: Ruby Yu		
TITLE: Resident Engineer	TELEPHONE: (628) 271-2749	
BUSINESS ADDRESS: 49 South Van Ness Ave., Suite 1000, San Francisco, CA 94103		

(c)

PROJECT TITLE: 190 9th Street Library Admin Building		
PROJECT DESCRIPTION / SCOPE OF WORK: Renovation of historic facade and window replacement in occupied building		
LOCATION: <i>Address, City, State</i> 190 9th Street, San Francisco, CA 94102		
START DATE: 1/16/2020	PLANNED COMPLETION DATE: 8/27/2020	ACTUAL COMPLETION DATE: 8/31/2022
CONTRACT AMOUNT: \$ 860,097	CHANGE ORDER AMOUNT: \$ 608,885	
CONTRACT SATISFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: AMG Environmental, Celtic Scaffolding, R&I Glassworks, Rainbow Waterproofing	
NAME OF OWNER'S REPRESENTATIVE: Dennis Oates		
TITLE: Construction Manager	TELEPHONE: 415.686.4328	
BUSINESS ADDRESS: 49 South Van Ness Ave., Suite 1000, San Francisco, CA 94103		

(Add sheets if necessary.)

If additional projects are needed please notify steve@buhlercommercial.com.

ZSFG Building 5
 Family Health Center Relocation Phase 1 5C 5E Demolition

Sourcing Event ID: 0000009068

(b)

PROJECT TITLE: Laguna Honda Hospital – Pharmacy Code Compliance Upgrade		
PROJECT DESCRIPTION / SCOPE OF WORK: Renovation of Pharamacy / Compounding Room		
LOCATION: <i>Address, City, State</i> 375 Laguna Honda Blvd, San Francisco, CA 94116		
START DATE: 3/2024	PLANNED COMPLETION DATE: 9/2024	ACTUAL COMPLETION DATE: TBD
CONTRACT AMOUNT: \$ 1,449,114	CHANGE ORDER AMOUNT: \$ TBD	
CONTRACT SATIFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input checked="" type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED: Sterling Environmental, Potter Fire Protection, McClure Electric, Marina Mechanical, Mancias Steel, LJ Kruse, Diablo Roofing.	
NAME OF OWNER'S REPRESENTATIVE: D. Roger Hay		
TITLE: Senior Architect + Section Manager	TELEPHONE: 415.583.5146	
BUSINESS ADDRESS: 375 Laguna Honda Blvd, San Francisco, CA 94116		

SF Public Works
Date Received: 07/19/2024

(c)

PROJECT TITLE:		
PROJECT DESCRIPTION / SCOPE OF WORK:		
LOCATION: <i>Address, City, State</i>		
START DATE:	PLANNED COMPLETION DATE:	ACTUAL COMPLETION DATE:
CONTRACT AMOUNT: \$	CHANGE ORDER AMOUNT: \$	
CONTRACT SATIFIES: <input type="checkbox"/> Section 002113-1.11.B.1.a <input type="checkbox"/> Section 002113-1.11.B.1.b		
ROLE (Check One): <input type="checkbox"/> General Contractor <input type="checkbox"/> Subcontractor	IF GENERAL CONTRACTOR, LIST NAMES OF MAJOR SUBCONTRACTORS EMPLOYED:	
NAME OF OWNER'S REPRESENTATIVE:		
TITLE:	TELEPHONE:	
BUSINESS ADDRESS:		

(Add sheets if necessary.)



Bruce Robertson, Deputy Director | Financial Management & Administration

bruce.robertson@sfdpw.org | T. 628.271.3128 | 49 South Van Ness Ave. Suite 1600, San Francisco, CA 94103

September 10, 2024

VIA Email Only: klw888@sbcglobal.net

KLW Construction, Inc.
 683 SIXTH AVENUE
 SAN FRANCISCO, CA 94118
 Attention: Howard Wong, President

**Subject: Public Works Sourcing ID No. 000009068
 ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition
 Bid Protest Decision**

Dear Howard Wong:

This letter responds to KLW Construction, Inc’ (“KLW”) June 28, 202 protest of Buhler Commercial (“Buhler”) bid for the subject project; Sourcing ID No. 000009068, ZSFG Building 5 Family Health Center Relocation Phase 1 5C 5E Demolition (“Contract”). As explained below, the City and County of San Francisco (“City”) has determined that KLW protest of Buhler’ bid is sustained.

Background

The City and County of San Francisco (“City”) collected bids for the Contract on June 26, 2024. The City received four (4) timely submitted bids for the project. The Tabulation of Bids and Contract Monitoring Division’s (“CMD”) confirmation identified Buhler as the apparent low bidder per provisions of San Francisco Administrative Code Chapter 14B, followed by KLW Constructions, Inc, City Building, Inc and Rubecon General Contracting, Inc. (see below). Upon its first review of the submitted bids, the City deemed all four bids responsive.

BIDDERS:	LBE Status	Base Bid	Adjusted Bid w/Discount
Buhler Commercial	SF LBE - OBE (Micro)	\$5,699,150.00	\$5,129,235.00
KLW Construction Inc.	SF LBE - MBE (Micro)	\$6,986,810.45	\$6,288,129.41
City Building, Inc.	Non-LBE	\$6,955,313.00	\$6,955,313.00
Rubecon General Contracting, Inc.	SF LBE - MBE (Small)	\$9,326,743.00	\$8,394,068.70

On June 28, 2024, KLW submitted a timely written protest against Buhler's bid, claiming that Buhler's bid is non-responsive. KLW asserted that Buhler failed to list qualified projects meeting the minimum qualifications outlined in Section 00 21 13 and Bidder’s Qualification Form, Section 00 45 13 of the bidder's qualification requirements.

Specifically, KLW stated that Buhler failed to demonstrate the experience qualifications per 1.11 B.1.a and B.1.c of Section 00 21 13 (Instructions to Bidders). for the following reasons:

1. Buhler referenced three Job Order Contracts (“JOC”) which have a maximum contract value and no guarantee of orders totaling the maximum contract amounts.
2. The earned amounts listed to date total \$787,791.67, which is far short of the \$2,000,000 listed in the minimum qualifications under paragraph 1.11 B1.a.
3. The three Laguna Honda Hospital JOC orders are specific to power and data work only and do not include Mechanical, Plumbing, Fire Sprinkler, Fire Alarm and Hazardous Material Abatement work as listed under minimum qualifications paragraph 1.11 B1.c.

Buhler responded to KLW’s protest in a timely manner via letter on July 8, 2024, denying these allegations and asserting that its bid is responsive.

The Record

Without limitation, the City reviewed and considered the following in reaching its decision:

- The Request for Bid (RFB) documents;
- The June 26th bids for the subject project submitted by all contractors;
- KLW’s bid protest letter submitted June 28, 2024;
- Buhler’s response to KLW’s bid protest, submitted on July 8, 2024;
- Buhler’s post-bid supplementary bidding forms 00 45 13 and 00 49 12 submitted on July 12, 2024;
- Buhler’s post-bid supplementary bidding forms 00 45 13, 00 49 14, and 00 49 15 submitted on July 19, 2024;
- The City’s analysis and determination of the bidders’ qualifications

In addition, the department consulted with the project team and the City Attorney’s Office.

Analysis

At bid time, Buhler listed the San Francisco Public Works JOC J37 General Building Services Contract ID #1000005796 as a part of the Bidders Qualifications Section. This listing did not include specific projects or project contract amounts to demonstrate compliance with the minimum qualifications specified in Section 00 21 13. Post-bid opening, Buhler submitted additional Qualification Forms (Section 00 45 13) with the specific projects and contract amounts in order to demonstrate compliance with the minimum qualifications specified in Section 00 21 13 (attached).

The City’s Project Team reviewed the projects submitted by Buhler and found that the EBMUD Operations Center project and the Willard Clubhouse project did meet the minimum qualifications of Section 00 21 13, 1.11 B.1.b of projects having a total construction cost of \$4,000,000 or greater.

The HCAI projects submitted by Buhler, specifically the three task orders under JOC J37: Laguna Honda Hospital East Wing, Laguna Honda Hospital Link Building and Laguna Honda Hospital South Wing, did not meet the minimum qualifications specified in Section 00 21 13, 1.11 B.1.a for minimum construction cost of \$2,000,000 in a HCAI Type 1 or Type 1R building. These task order also did not meet the minimum qualifications specified in Section 00 21 13, 1.11 B.1.c the construction projects must include mechanical, electrical, plumbing, fire sprinkler, fire alarm and hazardous material abatement work. The work only included electrical and finish upgrades to charting rooms.

Conclusion

The City has carefully reviewed all relevant documents, investigated allegations raised in K LW's bid protest and consulted with the City Attorney's Office. As Buhler's bid has been determined to be non-responsible per the City's own responsibility review, this protest is thus moot. This letter neither constitutes Notice of Award nor intention to award **Sourcing ID No. 0000009068**. If there are any questions, please contact Dennis Lam of my staff by email at Dennis.Lam@sfdpw.org.

Regards,

DocuSigned by:

Bruce Robertson

9/12/2024 | 8:34:12 AM PDT

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Bruce Robertson

Deputy Director, Finance & Administration

Cc: Lindsay Hu, Project Manager
Julia Laue, BDC Bureau Manager
Ronald Alameida, Deputy Director
Yadira Taylor, City Attorney
KLW Construction, Inc.



MEMORANDUM

Date: September 5, 2024

To: Robert Loftus, Contract Administration, SF Public Works
Ben Washington, Contract Administration, SF Public Works
Lindsay Hu, Project Manager, SF Public Works

From: Ivan Oldenkamp, Contract Compliance Officer, Contract Monitoring Division

Subject: Sourcing ID: 0000009068 ZSFG Building 5 Family Health Center Relocation
Phase 1 5C 5E Demolition – CMD Review

The Contract Monitoring Division (“CMD”) has reviewed the bids submitted for the above referenced project, applied the appropriate bid discounts, and determined responsiveness to the Chapter 14B pre-award requirements. An LBE subcontracting requirement of 20% was established for this project. Below is a summary of CMD’s review.

Bidder	LBE Status	Base Bid	LBE Bid Discount	Adjusted Bid with Bid Discount
Buhler Commercial	SF LBE - OBE (Micro)	\$5,699,150.00	10%	\$5,129,235.00
KLW Construction Inc.	SF LBE - MBE (Micro)	\$6,986,810.45	10%	\$6,288,129.41
City Building, Inc.	Non-LBE	\$6,955,313.00	0%	\$6,955,313.00
Rubecon General Contracting, Inc.	SF LBE - MBE (Small)	\$9,326,743.00	10%	\$8,394,068.70

Buhler Commercial was found to be non-responsive to Public Works pre-award requirements. KLW Construction Inc., (“KLW”) is the lowest responsive bidder. KLW satisfied the Good Faith Efforts requirement by exceeding the subcontractor participation requirement by at least 35% by counting its own participation as an LBE prime contractor.

KLW met the 20% LBE subcontracting requirement by listing the following LBE firms:

LBE Subcontractor	Scope of Work	Status	Percent LBE	Listed Amount	Amount Credited	Percent of Work	
ABCO Mechanical Contractors	HVAC	SF LBE - OBE (Micro)	100%	\$1,184,000.00	\$998,000.00*	14.28%	
CPM Environmental	Hazmat/Abatement	SF LBE - OBE (Small)	100%	\$792,402.00	\$792,402.00**	11.34%	
Value Fire Protection Inc.	Fire alarm	SF LBE - MBE (Micro)	100%	\$181,000.00	\$181,000.00	2.59%	
City Door and Hardware, Inc.	Doors; hardware and accessories	SF LBE - WBE (Small)	60%	\$45,000.00	\$27,000.00	0.39%	
				TOTAL	\$2,202,402.00	\$1,998,402.00	28.60%

* Per CMD Form 6 submitted for ABCO, ABCO will further subcontract out \$25,000.00 to Insulation Specialties, Inc., \$35,000.00 to McGoldrick Testing and Balancing, Inc., and \$126,000.00 to Siemens Industry, Inc., all non-LBE firms. LBE participation credit for this subcontractor has been reduced accordingly.

** Per CMD Form 6 submitted for CPM, CPM will further subcontract out \$37,618.63 to Citywide Debris Box & Recycling, a certified SF Small-LBE firm.

KLW also listed the following non-LBE subcontractors:

Non-LBE Subcontractor	Scope of Work	Status	Listed Amount
Anderson Commercial Flooring	Flooring	Non-LBE	\$99,840.00
Bellantini Plumbing Inc.	Plumbing	Non-LBE	\$383,850.00
McClure Electric Inc.	Electrical	Non-LBE	\$1,236,656.00
Cal West Acoustics	Acoustical ceiling	Non-LBE	\$33,744.00
			TOTAL
			\$1,754,090.00

Based on the foregoing, CMD has determined that KLW has complied with the Chapter 14B pre-award requirements and is eligible for contract award. Should you have any questions, please contact Ivan Oldenkamp at ivan.oldenkamp@sfgov.org