

Quote Request

Bathtub Stripping and Refinishing Within HACP
Occupied/Non-Occupied Units

Quotes due July 22, 2015 @ 11:00 a.m.

Fax to Debbie Norkevicius at (412) 456-5007

SCOPE OF WORK

Contractor will follow the below tub refinishing process and procedure:

- Scrape and clean removing all dirt, grease, soap, paint and caulking
- Etch bathtub to allow porcelain to accept new coating
- Fill and smooth damaged worn areas
- Apply three (3) separate coats of primer to achieve 1 (one) mil thick
- Apply four (4) coats of polyurethane enamel with glass content to achieve 2 (two) mil minimum thickness
- Re-caulk entire perimeter of bathtub
- Any/all materials are to be removed by the contractor
- No disruption of residents will take place
- Provide adequate ventilation to the outside during the work process
- Notify Site Manager of any work taking place
- Provide signage or caution tape during the curing time to prevent tenant use
- Manufacturer's guarantees to be applied to each tub refinish
- Work area to be left in a clean and safe condition
- No debris to be placed in HACP trash receptacles
- Vendor is responsible for obtaining all required permits
- Residents will be properly notified of the schedule, access and installation by the Project Manager
- All work will be initiated from Facility Services to the Vendor. Vendor will then make contact and entry arrangements with the respective **Site Management Team**.
- Contractor will not move any furniture or belongings
- Contractor will provide MSDS and adhere to recommendations and proper use of products
- Contractor will have the resources to complete refinishing within 3 days of Facility Services scheduling call
- Once work begins, vendor has 3 days to complete all work

Please contact Debbie Norkevicius at 412.456.5000 Ext. 8505 or
Debbie.Norkevicius@HACP.org with any questions about the above scope.

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Occupied/Non-Occupied Units

Quotes due 7/22/15 @ 11:00 a.m.

Total Cost per tub \$ _____

Total Cost per tub (in words) \$ _____
(in words)

Contract award will be based on lowest total bid amount

(Please print clearly)

Company Name: _____

Address: _____
(of company)

Signature: _____

Print Name: _____
(of person signing)

Phone Number: _____ Fax: _____

Email: _____