

ADDENDUM No. 1

March 20, 2014

ADDENDUM TO: Fire Protection Maintenance & Annual Fire Hydrant Flow Testing

BID NUMBER: 13-07

BID DUE DATE: Thursday, March 27, 2014 at 10:00am

TO BIDDER: This addendum is an integral part of the Bid file under consideration by you as a bidder in connection with the subject matter identified above. For the purpose of clarification the following additions, changes, modifications and replacements noted below have been made to the Bid and have been made to the Bid file which bears the above title.

Bid Proposals submitted shall conform to these additions and modifications noted herein and including all issued addendums.

REQUEST/QUESTION/CLARIFICATION

Annual Reports attached for review per request(s)

Note: To qualify your proposal, of which this addendum becomes a part, this form must be completed and returned to this office with the proposal.

Date: _____

Authorized Signature of Company Rep.

Printed Name of Company Rep.

Company: _____

Address: _____

Telephone: _____

Contact's Email: _____

End of Addendum #1



Customer focused. Built on values.

7/18/13

3139687

Annual
raymond james stadium

Owners Section										YES	NA	NO
A. (To be answered by the Owner or the Owner's representative) Was owner available? Owner/Rep. Signature												
1. Have there been any changes in the occupancy classification, machinery or operations since the last inspection?										<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Have there been any changes or repairs to the fire protection systems since the last inspection?										<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. If a fire occurred since the last inspection, have all damaged sprinkler system components been replaced?										<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Has the piping in all dry systems been checked for proper pitch within the past five years?										<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Date last checked												
5. Has the piping in all systems been checked for obstructive materials?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date last checked												
6. Have all fire pumps been tested to their full capacity through the use of hose streams or flow meters within the past 12 months?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are gravity, surface or pressure tanks protected from freezing?										<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Are any of the sprinklers 50 years old or older? (Testing and/or replacement is recommended for such sprinklers.)										<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Are any extra high temperature solder sprinklers regularly exposed to temperatures near 300°F?										<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. (To be answered by the inspector)												
1. Have the sprinkler systems been extended to all visible areas of the building?										<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Does there appear to be proper clearance between the top of all storage and the sprinkler deflector?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. In building areas protected by a wet system, does it appear to be heated, including its blind attics and perimeter areas, where accessible?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Does it appear that visible exterior openings are protected against the entrance of cold air?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONTROL VALVES												
A. Are sprinkler system main control valves readily visible and in the appropriate open or closed position?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. If the valve(s) had seals where they broken in order to operate the valves ?										<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
C. Was the Owner or the Owner's representative notified that the seal(s) where removed if they could not be replaced?										<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Control Valves	No. of Valves	Type	Easily Accessible		Signs		Valve Open		Sealed, Supervised or Locked	Supervision Operational		
			Yes	No	Yes	No	Yes	No		Yes	NO	
fire systems	47	butterfly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Supervised	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
WATER SUPPLIES												
A. Water supply source, City or Private? <input type="text" value="Private"/>										Pressure Fire Pump & Tank	N/A	
										Pressure Fire Pump & City	N/A	
										Pressure Fire Pump & Pond	N/A	
										Other	N/A	
Water flow Test Results Made During This Inspection												
Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Psi After	Test Pipe Located	Size Test Pipe	Static Pressure Before	Flow Pressure	Static Pressure After			
various locations	2	184	175	184								
TANKS, PUMPS, FIRE DEPT. CONNECTIONS										YES	NA	NO
A. Do fire pumps, gravity, surface or pressure tanks appear to be in good external condition?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. It appears that gravity, surface and pressure tanks are at the proper pressure and/or water levels?										<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
C. It appears that fire department connections are in satisfactory condition, couplings free, caps or plugs in place and check valves tight?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Are fire department connections visible and accessible?										<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4201 n dale mabry hwy												
WET SYSTEMS										YES	N/A	NO



Customer focused. Built on values.

7/18/13

3139687

Annual
raymond james stadium

A. No. of Systems	25	Make & Model			
B. Was the date of the gauge(s) checked, since gauges are required to be tested with a calibrated gauge or replaced every five years? If tested with a calibrated gauge and the gauge was not within 3% over the full scale they must be recalibrated or replaced					
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. If applicable, have any dry type heads more than 10 years old had a representative sample tested					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Have all known and readily apparent antifreeze systems been tested?					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Date antifreeze systems were tested					
F. The antifreeze tests indicate protection to temperature: Sys. 1 Sys. 2 Sys.3 Sys. 4 Sys.5					
G. Did alarm valves, water flow alarm indicators and retards test satisfactorily?					
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ALARMS					
			YES	N/A	NO
A. Did the water motor(s) and gong(s) operate during testing?					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Did the electric alarm(s) operate during testing?					
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Did the supervisory alarm service test satisfactorily?					
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SPRINKLERS - PIPING					
A. Do sprinklers generally appear to be in good external condition?					
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Do sprinklers generally appear to be free of corrosion or loading and visible obstructions?					
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Are extra sprinklers available on the premises?					
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Does the exterior condition of the fire sprinkler system appear to be satisfactory?					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
E. Does hand hose on the sprinkler system appear to be in satisfactory condition?					
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
THE INSPECTOR SUGGESTS THE FOLLOWING IMPROVEMENTS.					
HOWEVER, THESE SUGGESTIONS ARE NOT THE RESULT OF AN ENGINEERING SURVEY:					
there is no sprinkler coverage in electric rooms, and telephone rooms 8" valve in water heater room leaks badly when partially closed and needs to be replaced 4" piping in the field storage room is highly corroded and needs to be replaced most of piping in exposed areas around stadium is moderately corroded no sprinkler coverage in suite us124 bathroom					

4201 n dale mabry hwy

ADJUSTMENTS OR CORRECTIONS MADE:



Customer focused. Built on values.

7/18/13

3139687

Annual
raymond james stadium

[Empty rectangular box for notes or observations]

ALL LISTED CHANGES IN THE OCCUPANCY HAZARD OR FIRE PROTECTION EQUIPMENT, AS ADVISED BY THE OWNER IN SECTION:

Signature of Owner or Owner's Representative _____
Printed Name _____ Date: 1/0/00

Does the owner/owner's representative want a copy of this report sent to another location? (i.e. Insurance, Main Office, etc.)

DUPLICATE TO:

STREET: _____ ZIP: _____

CITY & STATE: _____

ATTN: _____

4201 n dale mabry hwy



fire protection contractors and engineers
24 HOUR EMERGENCY SERVICE

Customer focused. Built on values.

Phone: 407-857-1800
Fax: 407-855-9064

Annual
FULL FLOW FIRE PUMP TEST

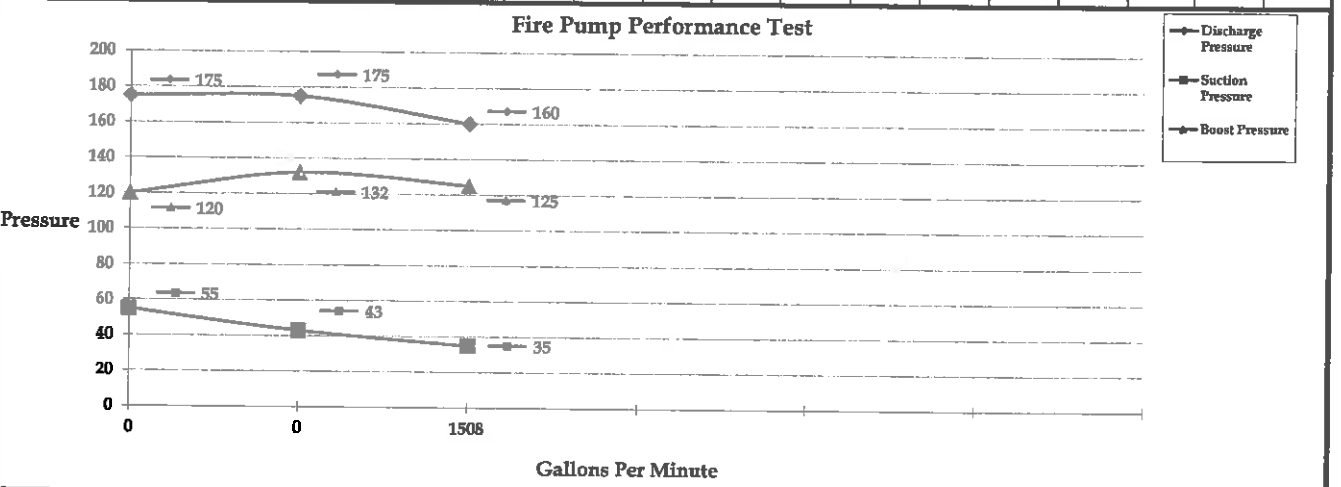
Date of Test: 7/18/2013

Work Order # 3139687

Customer:	<u>raymond james stadium</u>	Inspector:	<u>jeremy smith</u>
Street:	<u>4201 n dale mabry hwy</u>	Also Present:	
City:	<u>tampa fl 33607</u>		
Attn:	<u>0 0</u>		
Email:	<u>0</u>		

Pump Information	Shaft		Manufacturer		Approved		Shop or Serial No.		Model Number			
	<input checked="" type="checkbox"/>	Horizontal	<u>patterson</u>		<input checked="" type="checkbox"/>	Yes	<u>fp-c12613</u>		<u>6x5maah</u>			
		Vertical				No						
	Gallons/Minute	Rated PSI	Net		Rated RPM	City Supply	Size Conn.	Tank Supply	Tank Height			
	<u>1000</u> GPM	<u>140</u> PSI			<u>3525</u> RPM	<input checked="" type="checkbox"/> YES	<u>6</u> Inch	<u>n/a</u> YES	<u>n/a</u> Feet			
Driver Information	Manufacturer		Approved		Shop or Serial No.		Model Number		Horse Power		Rated RPM	
	<u>us motors</u>		<input checked="" type="checkbox"/>	Yes	<u>h632-</u>		<u>h632</u>		<u>125</u>	H.P.	<u>3365</u>	RPM
				No	<u>a11a26or150m</u>							
	Elec. Motor?	Rated Volts	Oper. Volts		Rated Amps	Amps @ 150	Phase	Cycles	Service Factor			
	<input checked="" type="checkbox"/> yes	<u>460</u> A.C.	<u>485</u> A.C.		<u>137</u> Amps	<u>159</u> Amps	<u>3</u> Phase	<u>60</u> Hz	<u>1.15</u>			
Controller Information	Manufacturer		Approved		Start Pressure:		Jockey Pump					
	<u>mc master</u>		<input checked="" type="checkbox"/>	Yes	<u>155</u> psi		<u>stop pressure</u>					
				No			<u>Manual</u>		<input checked="" type="checkbox"/>	<u>Manual</u>	<u>On</u>	<u>168</u> PSI
	Shop or Serial No.		Model Number				<u>x</u> <u>PSI Drop</u>		<input type="checkbox"/>	<u>Auto</u>	<u>Off</u>	<u>184</u> PSI
<u>78756</u>		<u>mct32225-125-96fx</u>				<u>Auto</u>						
						<u>Water flow</u>						

Revolutions Per Minute	Discharge Pressures	Suction Pressures	Net Pressures	Streams						GPM	%	Volts	Amps	
				Size	Pitot 1	Pitot 2	Pitot 3	Pitot 4	Pitot 5					Pitot 6
3572 RPM	175 Psi	55 Psi	120 Psi	-	0	0	0	0	0	0	0	Churn		
3570 RPM	175 Psi	43 Psi	132 Psi	2.5	9	9						1		
3566 RPM	160 Psi	35 Psi	125 Psi	2.5	20	20					1508	1.5		
RPM	Psi	Psi	Psi											
RPM	Psi	Psi	Psi											
RPM	Psi	Psi	Psi											
RPM	Psi	Psi	Psi											



Comments: the mercoid switch seems to be sticking and needs to be replaced before it becomes an nonfunctioning issue

Customer Signature X. _____ Results Satisfactory?
Date: 18-Jul-13

WATER FLOW TEST REPORT



Customer focused. Built on values.

7/18/2013

3139687

Annual
raymond james stadium
d ramp

HYDRANT # & LOCATION _____
TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2
WATER SUPPLIED BY: _____ city
PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	35
GPM:	993

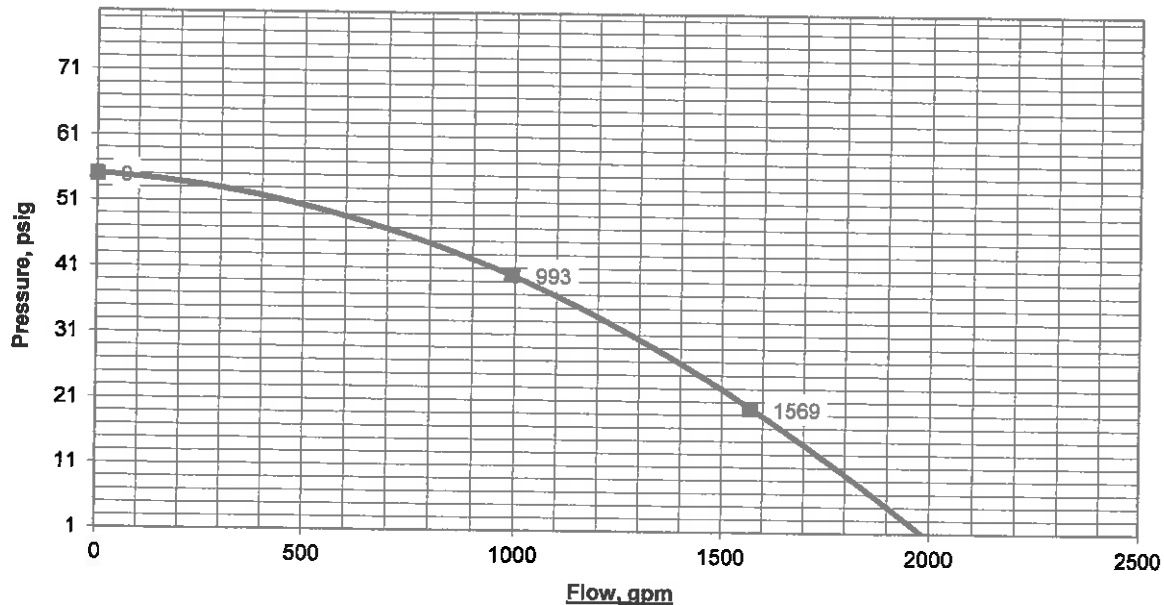
TOTAL FLOW DURING TEST: 993 GPM

STATIC READING: 55 PSI RESIDUAL: 40 PSI

RESULTS: AT 20 PSI RESIDUAL 1569 GPM AT 0 PSI 2002 GPM

ESTIMATED CONSUMPTION: 1985 GAL

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual
raymond james stadium
in front of east club

HYDRANT # & LOCATION _____

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: _____ city _____

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	40
GPM:	1061

TOTAL FLOW DURING TEST: 1061 GPM

STATIC READING: 55 PSI

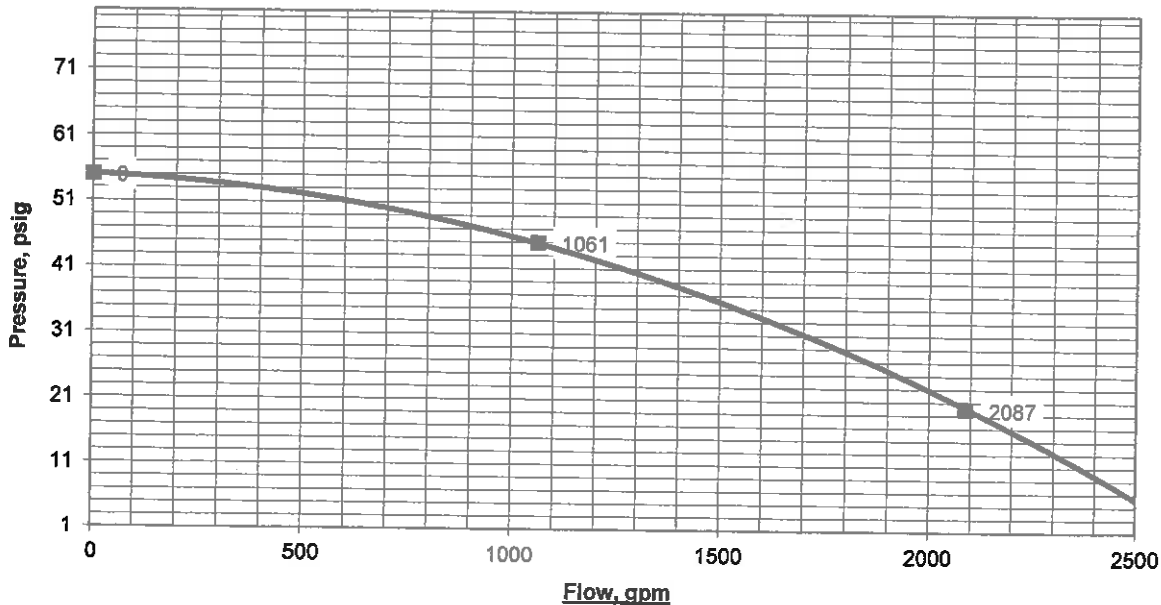
RESIDUAL: 45 PSI

RESULTS: AT 20 PSI RESIDUAL 2087 GPM

AT 0 PSI 2664 GPM

ESTIMATED CONSUMPTION: 2122 GAL.

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual

raymond james stadium

HYDRANT # & LOCATION in front of fire pump test header

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: city

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	40
GPM:	1061

TOTAL FLOW DURING TEST: 1061 GPM

STATIC READING: 60 PSI

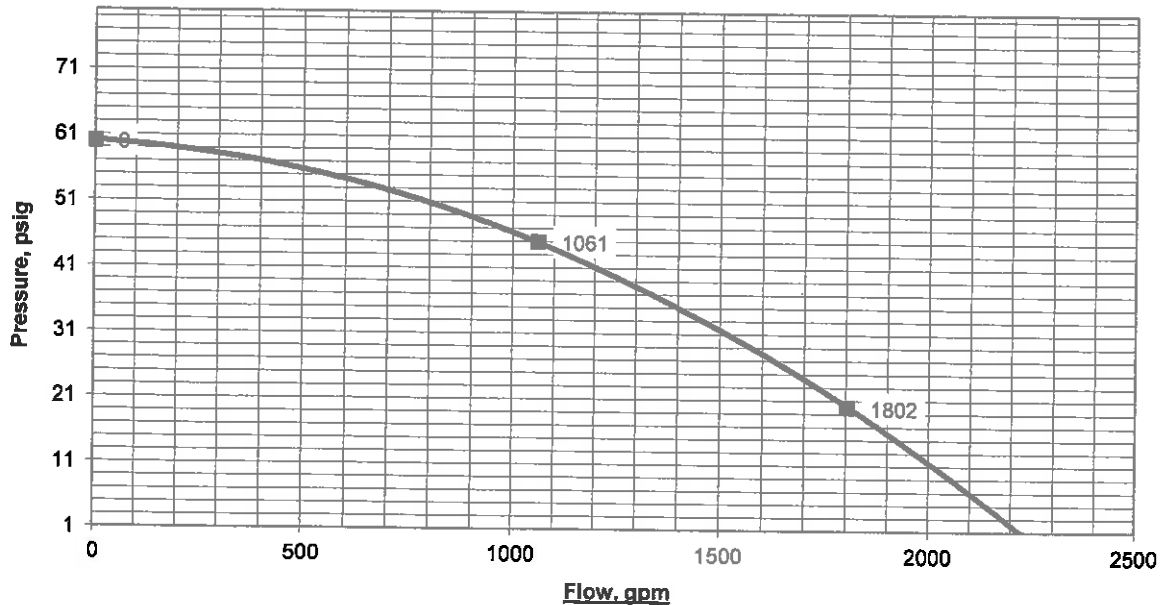
RESIDUAL: 45 PSI

RESULTS: AT 20 PSI RESIDUAL 1802 GPM

AT 0 PSI 2243 GPM

ESTIMATED CONSUMPTION: 2122 GAL.

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual
raymond james stadium
southeast corner

HYDRANT # & LOCATION

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: city

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	40
GPM:	1061

TOTAL FLOW DURING TEST: 1061 GPM

STATIC READING: 55 PSI

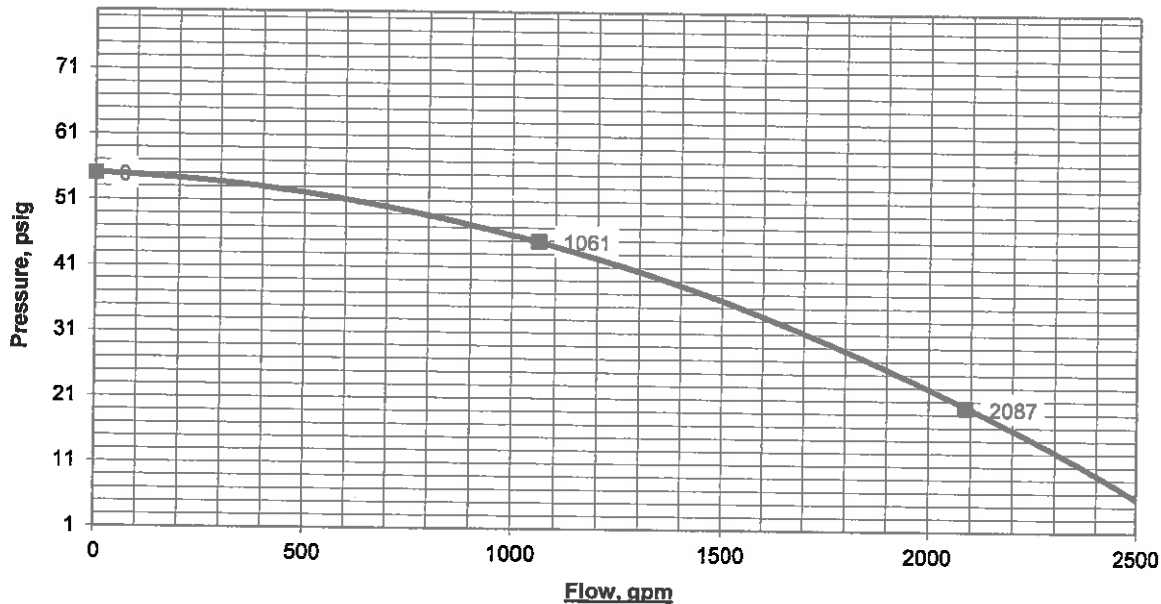
RESIDUAL: 45 PSI

RESULTS: AT 20 PSI RESIDUAL 2087 GPM

AT 0 PSI 2664 GPM

ESTIMATED CONSUMPTION: 2122 GAL.

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual
raymond james stadium
in front of dock b

HYDRANT # & LOCATION _____

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: _____ city _____

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	39
GPM:	1048

TOTAL FLOW DURING TEST: 1048 GPM

STATIC READING: 60 PSI

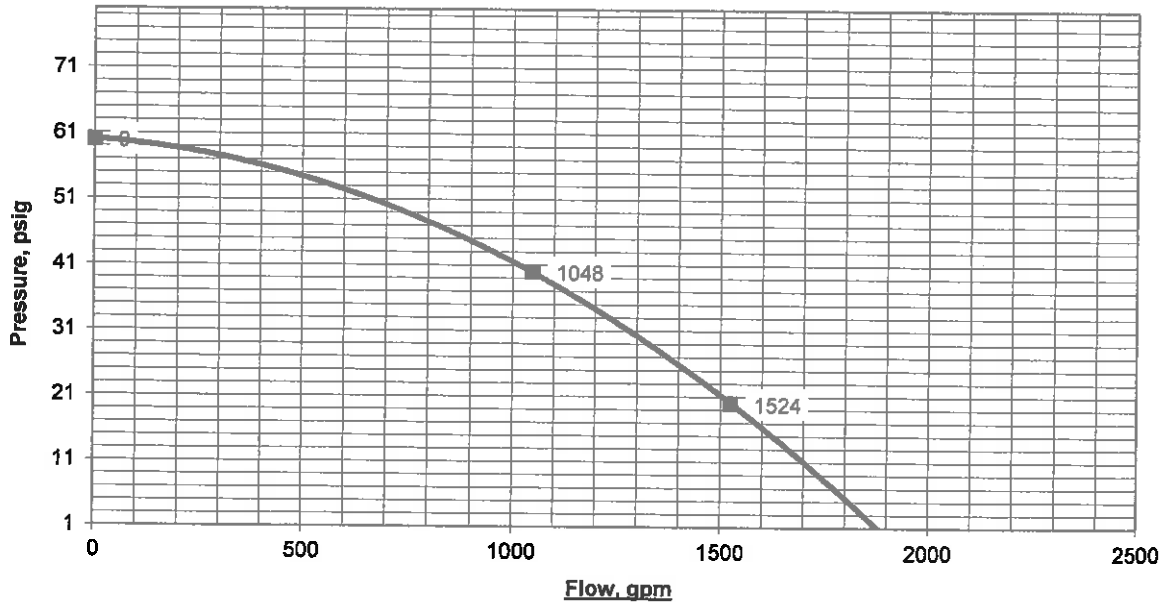
RESIDUAL: 40 PSI

RESULTS: AT 20 PSI RESIDUAL 1524 GPM

AT 0 PSI 1897 GPM

ESTIMATED CONSUMPTION: 2096 GAL.

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual

raymond james stadium

HYDRANT # & LOCATION in field with north scoreboard

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: city

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	39
GPM:	1048

TOTAL FLOW DURING TEST: 1048 GPM

STATIC READING: 60 PSI

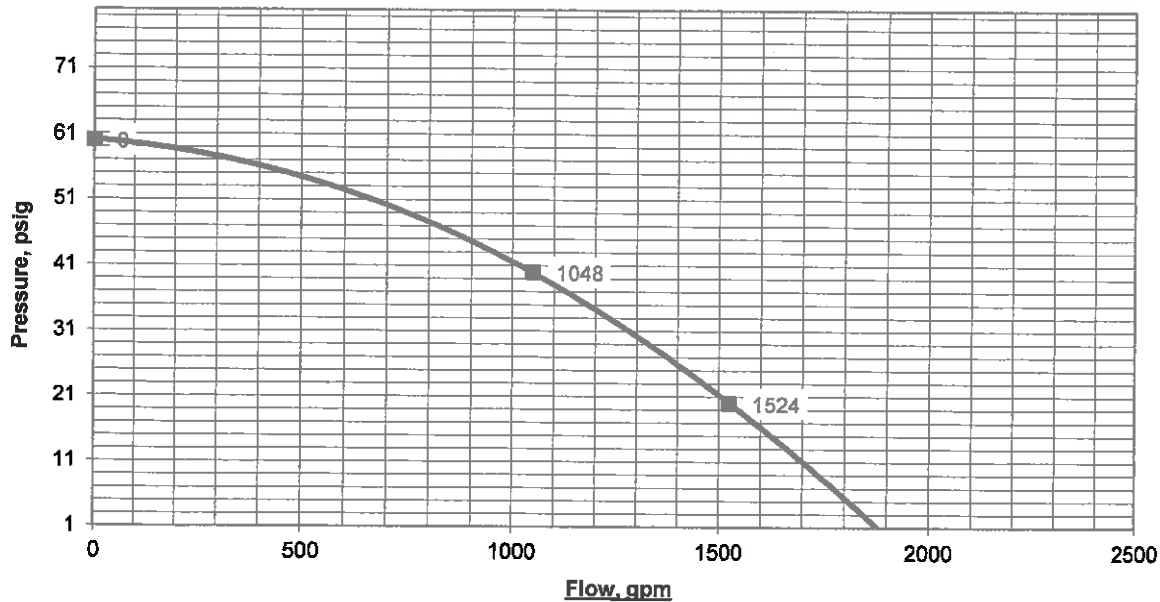
RESIDUAL: 40 PSI

RESULTS: AT 20 PSI RESIDUAL 1524 GPM

AT 0 PSI 1897 GPM

ESTIMATED CONSUMPTION: 2096 GAL.

REMARKS:



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, FL 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual
raymond james stadium
northwest corner

HYDRANT # & LOCATION

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: city

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	35
GPM:	993

TOTAL FLOW DURING TEST: 993 GPM

STATIC READING: 65 PSI

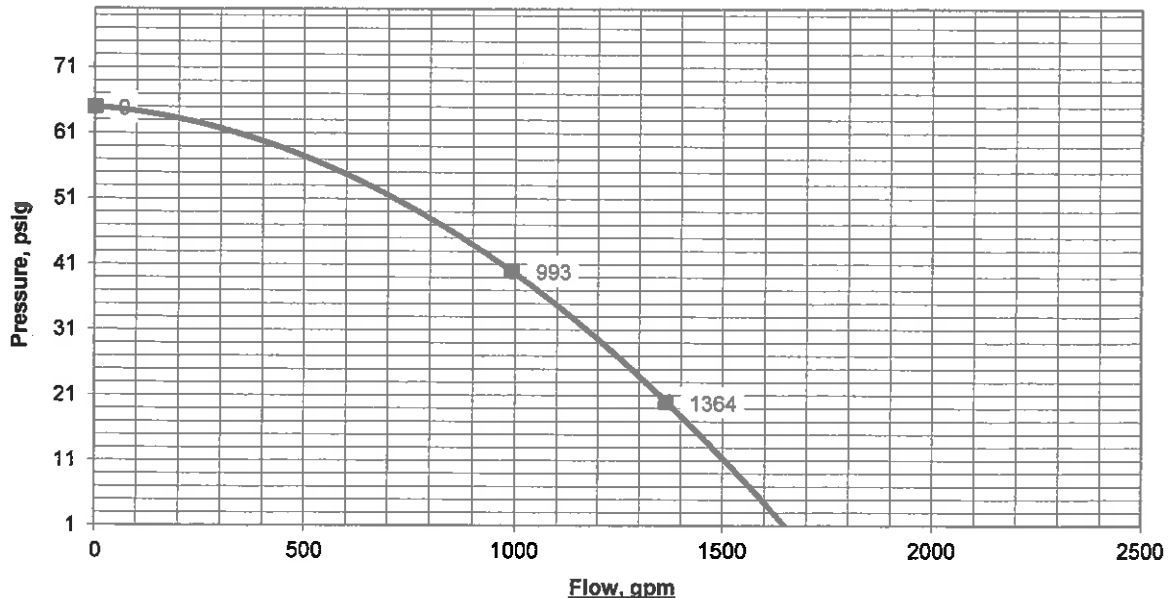
RESIDUAL: 40 PSI

RESULTS: AT 20 PSI RESIDUAL 1364 GPM

AT 0 PSI 1663 GPM

ESTIMATED CONSUMPTION: 1985 GAL.

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual

raymond james stadium

HYDRANT # & LOCATION _____ in front of the west club

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: _____ city

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

	A1
SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	35
GPM:	993

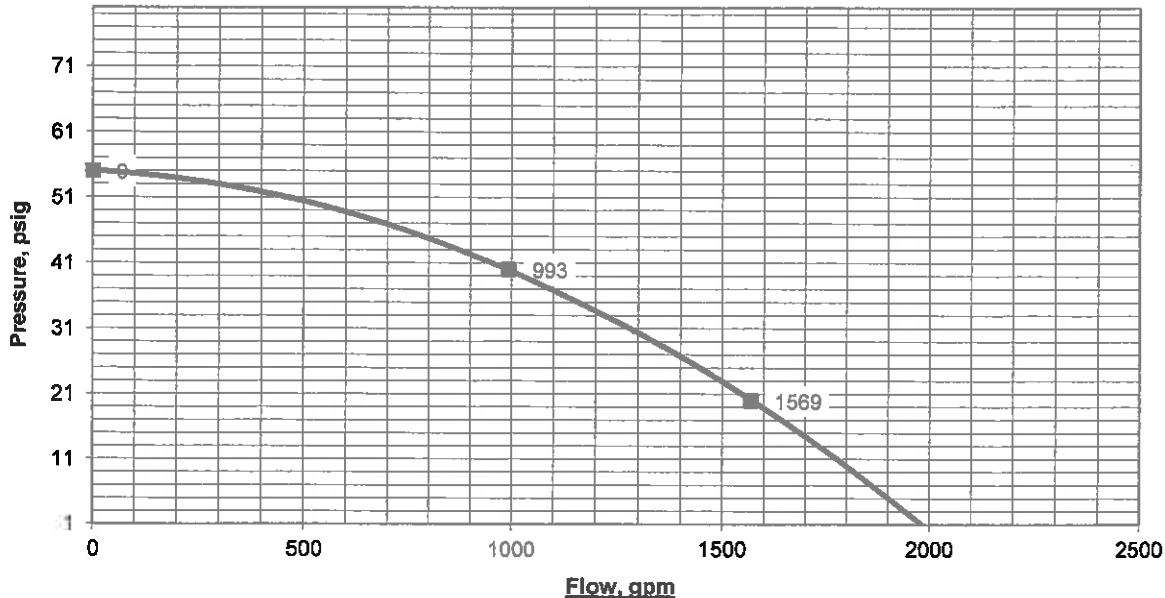
TOTAL FLOW DURING TEST: 993 GPM

STATIC READING: 55 PSI RESIDUAL: 40 PSI

RESULTS: AT 20 PSI RESIDUAL 1569 GPM AT 0 PSI 2002 GPM

ESTIMATED CONSUMPTION: 1985 GAL.

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800

WATER FLOW TEST REPORT



7/18/2013

Customer focused. Built on values.

3139687

Annual

raymond james stadium

south side of west club

HYDRANT # & LOCATION

TEST BY: jeremy smith Day or Week: wed TIME OF DAY: am MIN. OF FLOW 2

WATER SUPPLIED BY: city

PURPOSE OF TEST: Flow Test

DATA

FLOW HYDRANT

A1

SIZE OPENING:	2.5
COEFFICIENT:	0.9
PITOT READING:	38
GPM:	1034

TOTAL FLOW DURING TEST: 1034 GPM

STATIC READING: 55 PSI

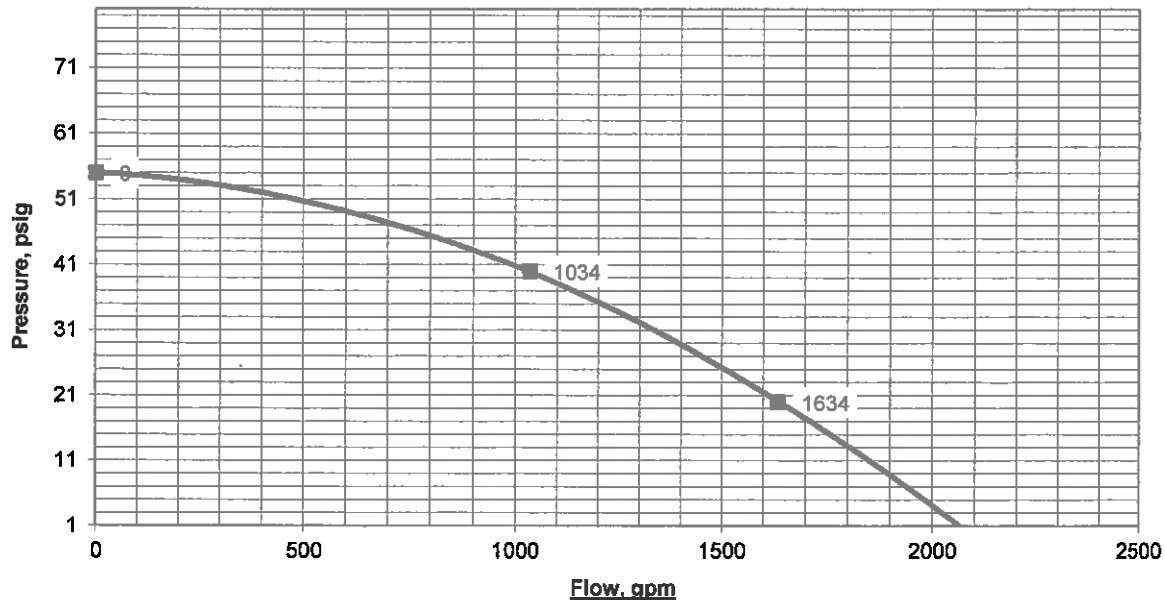
RESIDUAL: 40 PSI

RESULTS: AT 20 PSI RESIDUAL 1634 GPM

AT 0 PSI 2086 GPM

ESTIMATED CONSUMPTION: 2069 GAL.

REMARKS: _____



4201 n dale mabry hwy

Grunau Company, Inc.
11300 Space Blvd.
Orlando, Fl. 32837
(407) 857-1800