



Procurement #: 54695

CITY OF PROVIDENCE, RHODE ISLAND

**Department: Department of Public Property**

**RFP Title: Lilian Feinstein Elementary School Art Room & Office Renovations**

**Opening Date: 19 Oct 2026**

**Addendum #: 1**

**Issuing Date: 6 Oct 2026**

The purpose of this addendum is to provide answer to questions.

Providence City Hall  
25 Dorrance Street  
Providence, RI 02903



## Addendum #1

Addendum Date: October 5, 2026  
Project: Lillian Feinstein Elementary School  
Art Room and Office Renovation

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The work herein shall be considered part of the bid documents for the referenced project and carried out in accordance with the following supplemental instructions issued in accordance with the Contract Documents without change in Contract Sum or Contract Time. Acknowledge receipt of addendum on the bid form as indicated.

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### Clarifications:

#### Addendum Questions

- 1. Abatement work – can it be done during school hours?**  
**Response: No, due to surrounding area being occupied by students. Will have to be scheduled during an extended scheduled school break**
- 2. Provide an abatement plan / info in addendum**  
**Response: Refer to attached Asbestos Removal Specification prepared by emery Environmental Associates dated 10.4.2026. (attached)**
- 3. Detail 4/AR100 indicates that the new 2' x 2' ACT ceiling is mounted directly to the sides of the existing ductwork. Is this acceptable as the duct hangers are not structurally rated?**  
**Response: No. The ACT ceiling is suspended and does not mount directly to the sides of the existing ductwork. Provide Axiom Classic Straight Perimeter Trim between the suspended ceiling and the ductwork. See link to product below.**  
[\*\*3080 AX Classic CAT 426\*\*](#)

#### Room 208

- 4. Note D09 – No note. Radiators? Clarify on addendum**  
**Response: Disregard note D09 in detail 2 of sheet A-101. Existing baseboard radiator to remain.**

5. Existing room contents to be removed by PPSD staff prior to work commencing
6. The abatement for the flooring we are removing the old asbestos flooring in both rooms as the plans indicate, but it doesn't say what we would be installing for a threshold / transition for the new floor into the old hallway floor or will there not be one? Or what will be there instead for a finish?  
**Response:** Provide a Fusion transition strip by Mannington. See link to product below.  
[AXIOM Classic Straight Perimeter Trim](#)
7. The other question is can you indicate what the flooring allowance is in the addendum?  
**Response:** There is no flooring allowance. Both rooms receive new LVT flooring as indicate in Construction Key Note C-01 in the documents.
8. In the bid documents it references a 5% bid bond is required but also states “no financial assurance necessary for this item”? Please advise.  
**Response:** A bid bond is not required as noted on page 5 (item 1d) on City RFP
9. It's referenced that the bid submission should be hand delivered to Providence City Hall but also states bid to be submitted via email to Downes Co. Please advise.  
**Response:** The bid submission should be hand delivered to Providence City Hall as directed on pages 2 and 4 (item 16) on the City RFP
10. Bid documents contain two sets of bid forms. Please advise which one to use.  
**Response:** Please use the bid form on page 6 of the City RFP
11. MBE is referenced in the City of Providence bid set at 20% with an optional waiver. MBE is also referenced as 15% required. Please advise.  
**Response:** Please abide by the 20% requirement as noted on pages 10-11 of the City RFP
12. There is a spec section for Fluid-Applied Flooring, but the plans have no call out, please advise.  
**Response:** No. Disregard Section 09 67 00 Fluid-Applied Flooring, it is not utilized.
13. There is a spec section for Visual Display Units but there do not seem to be any elevation drawings calling these items out. Aside from “Reinstall existing whiteboards” Please advise.

**Response: Visual display units will be removed, salvaged, and reinstalled. The visual display units in Art Room B2 located behind the wall mounted interactive display shall be existing to remain.**

**14. Will there be a furniture schedule or allowance distributed in a future addendum?**

**Response: Contractor's shall carry an allowance of \$35,000 in addition to the base bid for furniture and equipment.**

**15. A note on the architectural plan is to see Fire Protection Plan for sprinkler edits. Will these plans be available? Please advise?**

**Response: Existing automatic fire suppression system (sprinkler heads) shall be modified to accommodate new drop ceiling. The design shall be by the fire suppression subcontractor and submitted to the design team for review.**

**16. Elevations on A-400 are incorrectly labeled as "Second Floor Office" when depicting the Basement Art Room.**

**Response: Correct. Elevations 5, 6, 7, and 8 shall be labeled Art Room B2 in lieu of Second Floor Office.**

**17. On A-400 the Basement Art room show Soap Dispensers & Paper Towel Holders including an accessory schedule. Are we responsible for these accessories and if so, can you distribute a basis of design?**

**Response: Wall mounted paper towel and soap dispenser shall be provided by the owner, installed by the contractor.**

**18. On A-400 it shows "Typical Toilet Room Mounting Heights", is this simply to show the heights of the accessories in the Art Room or is there a restroom included in this bid?**

**Response: "Typical Toilet Room Mounting Heights" on A-400 is simply showing the heights of the accessories in the Art Room. There is no restroom included in the bid.**

**19. In the bid documents it references "Mandatory Prebid" as well as "Non-Mandatory Prebid", is this going to be held to only the contractors who signed into the Prebid, or will it be open to other contractors as well?**

**Response: Bids will be held only to the contractors who attended the Pre-Bid Walk Through**

**20. General Demolition Note #5 references a Hazardous Materials Report provided in the project manual, the specifications do not include the report. Please provide.**

**Response: Refer to response in item #2 above.**

21. The floor plan 2/A-101 contains the demolition note D-09, the demolition key notes do not include note D-09, please advise.

**Response: Refer to response in item #4 above.**

22. Detail 2/A400 indicates “all windows provided by owner contractor to install”. Are the windows to be provided to the contractor fully glazed? If not please provide specifications for the windows.

**Response: Refer to Section 08 51 13 Aluminum Windows in the project manual. The window assembly shall be provided and installed by the contractor.**

23. Is the furniture shown on drawing IF-101 a part of this contract? If yes, please provide specifications.

**Response: The furniture is part of the contract. Refer to response in item #14 above.**

24. The basement reflected ceiling plan 2/AR-101 contains the note, “existing sprinkler pipes Re: FP drawings for basis of new design. The drawings do not include Fire Protection plans.

**Response: Refer to response in item #15 above.**

25. (#1)-the indoor units appear ducted as specified by the SAMSUNG model# but no new ducting is shown.

**Response: The units are not ducted. See attached cut sheet.**

26. And the new units are specified as mounted above a new drop ceiling....need a duct install plan if that is indeed the case.

**Response: The indoor units shall be installed below the new drop ceiling.**

27. (#2)- is a new DDC control system required or will local control with individual thermostats be sufficient?

**Response: Provide local controls with individual thermostats.**

END



*PO Box – E \* Pawtucket, RI \* Office (401)-727-4941 \*  
Email: emeryenvironmental@icloud.com*

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***ASBESTOS REMOVAL SPECIFICATION  
LILLIAN FEINSTEIN ELEMENTARY SCHOOL  
ART ROOM & OFFICE RENOVATION***

**PROJECT SITE:**

LILLIAN FEINSTEIN ELEMENTARY SCHOOL  
159 SACKETT STREET  
PROVIDENCE, RI 02905

**CLIENT:**

STUDIO JAED ARCHITECTS  
42 WEYBOSSET STREET; UNIT #403  
PROVIDENCE, RI 02903

**SPECIFICATION PREPARED BY:**

MR. PATRICK A. EMERY  
EMERY ENVIRONMENTAL ASSOCIATES  
P.O. BOX - E  
PAWTUCKET, RI 02861

A handwritten signature in dark ink, appearing to read "Patrick A. Emery", is written over a light blue rectangular background.

DATE: 10.4.2026

PATRICK A. EMERY  
RIDOH: ASB. PROJECT DESIGNER – APD0505

**EEA PROJECT #: 260807-A**

***Environmental Consulting and Mitigation Contractors  
Lead Paint \* Asbestos \* Mold \* Indoor Air Quality***

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***ASBESTOS ABATEMENT SPECIFICATION /  
RIDOH ASB-16, ASB-16A & ASB-16B ASBESTOS  
ABATEMENT APPLICATION FORMS***

**RHODE ISLAND DEPARTMENT OF HEALTH  
NOTARIZED CERTIFICATION OF ASBESTOS ABATEMENT PLAN**

Facility: LILLIAN FEINSTEIN ELEMENTARY SCHOOL

Address: 159 SACKETT STREET

City/Town: PROVIDENCE ZIP: 02905 Amendment/Phase No.: \_\_\_\_\_

Abatement Plan Written By: PATRICK A. EMERY Certification No.: APD00505

Summary of specific waivers/variances being requested: SEE ATTACHMENT #4

Type of Asbestos Abatement      ☒ Removal      ☐ Enclosure      ☐ Encapsulation      ☐ Demolition  
                                                 ☐ Glovebag      ☐ Asphalt Roofing / Exterior Abatement  
                                                 ☐ Other (Specify) \_\_\_\_\_

Is this plan being submitted in response to a Notice of Violation and/or a Notice of Requirement to Submit an Asbestos Abatement Plan?

☐ YES ☒ NO

If Yes, Indicate Notice/Building Evaluation Notes(s): \_\_\_\_\_

Contractor: TO BE SELECTED License No.: \_\_\_\_\_

Estimated Start Date: 11.1.2026

Pre-Abatement Sampling Information:

Bulk Samples Collected By: PATRICK A. EMERY Certification No.: AI00505

Bulk Samples Analyzed By: EMSL ANALYTICAL, INC. Certification No.: PLM00139

In-Process / Clearance Air Sampling Information:

In-process Air Samples to be Collected By: PATRICK A. EMERY Certification No.: AI00505

In-process Air Samples to be Collected By: VINCENT P. EMERY Certification No.: AI01105

In-process Air Samples to be Collected By: NICHOLAS A. EMERY Certification No.: AI01261

In Process Air Samples Analyzed By: EMERY ENVIRONMENTAL ASSOCIATES Certification No.: PCM00146

Clearance Air Samples Analyzed By: EMSL ANALYTICAL, INC. Certification No.: TEM00139

**CERTIFICATION**

I certify that this asbestos abatement plan is prepared and submitted under the provisions of Section 23-24.5-6 of the RI Asbestos Control Act and Parts A and C of the Rhode Island Rules and Regulations for Asbestos Control; all abatement/management activities performed in conjunction with this plan must be in compliance with the specifications prescribed in this plan (when approved) and the most current revision of all applicable federal and state regulations; and the asbestos abatement/ management activities described in this plan must be performed by a RI licensed asbestos abatement contractor.

Certified by: \_\_\_\_\_ Title: \_\_\_\_\_  
(Signature of Building Owner or Agent)

Certified by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Typed/Printed Name of Certified)

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
(Notary Public) My Commission Expires: \_\_\_\_\_

**AFFIX NOTARY SEAL HERE**

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Division of Occupational & Radiological Health

APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN

1. Building Owner's Name:

CITY OF PROVIDENCE -  
DEPT. OF PUBLIC PROPERTY

2. Application Prepared By:

MR. PATRICK A. EMERY

R.I. Certification : APD-00505 PD

Telephone No.: (401)-727-4941

(Area Code, No., Ext.)

3. Building Owner's Mailing Address and Telephone Number:

Street: CITY HALL PROVIDENCE -  
25 DORRANCE STREET - ROOM #407

City/Town: PROVIDENCE

Zip: 02903

Telephone No: 401-421-7740

(Area Code, No., Ext.)

4. Person to be contacted regarding this application:

Name: MR. PATRICK EMERY

Telephone No.: 401-727-4941

(Area Code, No., Ext.)

5. Location where abatement work will be performed:

Name: (if applicable) LILLIAN FEINSTEIN ELEMENTARY SCHOOL

Street: 159 SACKETT STREET

City/Town: PROVIDENCE ZIP: 02905

6. Is this application being submitted in response to a "Notice of Requirement to Submit an Asbestos Abatement Plan"?

( ) YES ( X ) NO

If yes, what is the due date for submittal of Abatement Plan?

(Mo.) (Day) (Yr.)

Evaluation Number on the Notice:

7. Contractor who will be performing abatement work (if selected):

Name: TO BE SELECTED

R.I. License No.: LAC-

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8. Estimated Starting Date of Abatement Work: 11 1 2026  
(Month) (Day) (Year)

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9. Estimated Completion Date of Abatement Work: 11 1 2027  
(Month) (Day) (Year)

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10. Type of Asbestos Abatement: (Check all that apply)

- ☒ **Removal**                      ☐ Enclosure  
☐ Encapsulation                      ☐ Demolition  
☐ Operations and Maintenance Only  
☐ Other: (Specify) \_\_\_\_\_
- 

11. Type of Building: ☒ **School**  
☐ Privately Owned Building  
☐ Publicly Owned Building  
☐ Residence  
☐ Other: (Specify) \_\_\_\_\_

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12. Building Access: ☒ **Public Access ( $\geq 25\%$  of Building Area)**  
☐ Limited Public Access ( $< 25\%$  of Building Area)  
☐ No Public Access

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13. Bulk Sample Collection and Analysis:

A. Person collecting bulk samples:

Name: PATRICK A. EMERY R.I. Certification No.: AI00505

B. Sampling Methodology:

- ☒ EPA AHERA Sampling Requirements (40 CFR 763.86).  
☐ EPA's Asbestos Containing Material in School Buildings: A Guidance Document (EPA-450/2-78-014) or  
Guidance for Controlling Asbestos Containing Materials - 1985 Edition (EPA-560/5-85-024).  
☐ Other (Specify) \_\_\_\_\_

C. Laboratory performing the analysis of the bulk samples:

Name: EMSL ANALYTICAL, INC. R.I. Certification No.: PLM00139

D. Analytical Methodology:

- ☒ EPA Interim Method for the Determination of Asbestos in Bulk Insulation Samples (PLM method only).  
☐ Other (Specify) \_\_\_\_\_

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14. Pre-Abatement Air Sample Collection and Analysis:

A. Person collecting pre-abatement air samples:

Name: PATRICK A. EMERY Affiliation: EMERY ENVIRONMENTAL ASSOC.

B. Laboratory performing analysis of pre-abatement air samples:

Name: EMERY ENVIRONMENTAL ASSOC. R.I. Certification No.: PCM-0146

C. Methodology used in the collection and analysis of pre-abatement samples:

( ☒ ) NIOSH Method 7400 (Most Current Revision)

( ☐ ) OSHA 29 CFR 1926.58 - Appendix A & B

( ☐ ) Other (Specify) \_\_\_\_\_

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15. A. Indicate how the regulated asbestos containing material (RACM) will be removed from the abatement site. If a hauler or broker will be used to transport the RACM to a disposal site, they must also be identified.

***TO BE PROVIDED BY CONTRACTOR***

B. Provide the name and location of the authorized asbestos waste facility to which the removed material will be transferred for disposal (if known).

***TO BE PROVIDED BY CONTRACTOR***

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16. Person designated as compliance monitor for abatement work. **(NOT REQUIRED)**

Name: \_\_\_\_\_

Affiliation: EMERY ENVIRONMENTAL ASSOCIATES

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17. In-Process & Clearance Air Sampling: ***(SEE ATTACHMENT #1)***

A. Describe on an attachment the type, number and location of air samples that will be collected outside the work area during the abatement project.

B. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fibers per cubic centimeter) is exceeded outside the work area during the abatement project.

C. Describe on an attachment the type, number and location of air samples that will be collected as part of the final clearance testing.

D. Describe on an attachment the plan of action to be followed if the Indoor Non-Occupational Air Exposure Standard for Asbestos (0.01 fibers per cubic centimeter) is exceeded during final clearance testing.

18. A separate and fully completed Form ASB-16A must be submitted for each area to be abated. List below the entry in Item 1 from each attached ASB-16A.

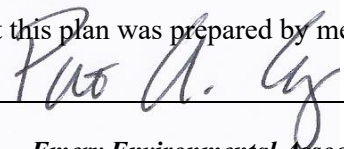
ASBESTOS CONTROL AREA #1 / INTERIOR - BASEMENT – ART ROOM (B2)

ASBESTOS CONTROL AREA #2 / INTERIOR - SECOND FLOOR – OFFICE A

*NOTE: SEE PROJECT DRAWINGS – ATTACHED / APPENDIX - E*

### CONSULTANT CERTIFICATION

19. I certify that this plan was prepared by me and I am responsible for its content.

Signature:  Date: 10 4 2026  
(Month) (Day) (Year)

Affiliation: Emery Environmental Associates

### 20. ASBESTOS ABATEMENT PLAN APPLICATION FEE:

- |                                                                             |        |
|-----------------------------------------------------------------------------|--------|
| <input type="checkbox"/> Operations & Maintenance Only                      | \$ 75  |
| <input type="checkbox"/> Up to One (1) NESHAP Unit                          | \$ 75  |
| <input checked="" type="checkbox"/> Between One (1) & Ten (10) NESHAP Units | \$ 300 |
| <input type="checkbox"/> Between Ten (10) & Fifty (50) NESHAP Units         | \$ 600 |
| <input type="checkbox"/> Over Fifty (50) NESHAP Units                       | \$ 900 |
| <input type="checkbox"/> AMENDMENT FEE                                      | \$ 150 |

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Division of Occupational & Radiological Health

**APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN**

**SUPPLEMENTAL INFORMATION: AREA DESCRIPTION AND PROPOSED REMEDY**

**BUILDING LOCATION:** **LILLIAN FEINSTEIN ELEMENTARY SCHOOL**  
**159 SACKETT STREET; PROVIDENCE, RI 02905**

**INSTRUCTIONS:** All items on this form must be addressed. All references to attachments must be clearly identified. All attachments must be marked with the specific item numbers on this form to which they pertain.

---

(1) Area Location/Identification (Room Name / No., Evaluation Number, etc.):

**ASBESTOS CONTROL AREA #1 / INTERIOR – BASEMENT / ART ROOM (B2)**  
**(SEE ATTACHMENT #2 & ATTACHED STUDIO JAED DRAWING A-100 FOR IDENTIFIED LOCATIONS)**

(2) Attach a description of each type (e.g. pipe, ceiling, etc.) of regulated asbestos containing material (RACM) in this area, including condition, location, quantity and asbestos content. Attach a copy of the laboratory report(s) for all samples. (**NOTE:** All laboratory reports must include the name of the building(s) and the location(s) of the sample(s)).

**SEE ATTACHMENT #2**

(3) Attach a current scale drawing of this area, showing direction of North and East, which has been clearly annotated to show the type, location and quantity of all RACM in this area. This drawing must include a legend, which acts as a guide to the scale, symbols and nomenclature used in the drawing. If a master plan or multiple drawings are provided, indicate the specific location(s) and drawing number(s) which depict this area. If the location of the decontamination chamber is known, it should be so indicated on the appropriate drawing(s).

**SEE ATTACHED STUDIO JAED DRAWING A-100 DRAWING FOR IDENTIFIED LOCATIONS @ APPENDIX – E**

(4) **PROPOSED REMEDIES:**

A) Attach a description of the interim Operations and Maintenance Plan that will be implemented in accordance with C.1.2(b).

**SEE ATTACHMENT #3**

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(4) **PROPOSED REMEDIES:** (Cont.)

B) Will any portion of this area be abated by use of B.8 work procedures?

☒ YES   ☐ NO

If Yes, indicate below which RACM in this area will be abated by use of the following B.8 work procedures:

B.8.2 & B.8.3      (REMOVAL): THE ASBESTOS CONTRACTOR SHALL BE REQUIRED TO ABATE ALL ASBESTOS CONTAINING MATERIALS AS DEFINED WITHIN ATTACHMENT #2 OF THIS SPECIFICATION. ALL ASBESTOS REMOVAL OPERATIONS MUST BE CONDUCTED IN ACCORDANCE WITH THE WORK REQUIREMENTS OF SECTION 1.14.6 OF THE CURRENT RIDOH ASBESTOS CONTROL REGULATIONS, IN ADDITION TO ALL APPLICABLE WORK REQUIREMENTS AS DEFINED WITHIN ATTACHMENTS #1 - #5

B.8.2 & B.8.4      (ENCAPSULATION): \_\_\_\_\_

B.8.2 & B.8.5      (ENCLOSURE): \_\_\_\_\_

B.8.6                (DEMOLITION): \_\_\_\_\_

B.8.7                (GLOVEBAG): \_\_\_\_\_

B.8.8                (ASPHALT ROOFING): \_\_\_\_\_

---

C) Are you requesting any waivers to the above selected B.8 procedures for any of the abatement activities in this area?

☒ YES   ☐ NO

If Yes, attach a detailed description of the waivers requested you are proposing to utilize. All items must be keyed to the specific section(s) of the regulations for which waivers are requested.

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**ATTACHMENT #4**

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D) Are you proposing alternative procedures under B.11 for any of the abatement activities in this area?

☐ YES   ☒ NO

If Yes, attach a detailed description of the alternative procedures requested you are proposing to utilize. Alternate procedures must include a justification for not following specific section(s) of the regulations and be as protective of public health.

---

E) Will any **accessible** RACM remain in this area after abatement?

☒ YES   ☐ NO

If Yes, attach a description of the RACM that will remain and the details of the on-going Operations and Maintenance Plan that will be implemented in accordance with C.1.2(b).

---

***All remaining ACM within this area and the envelope of the structure at the completion of the project shall be maintained by the building owner in accordance with the in-place AHERA Management Plan as developed and managed by the building owner / LEA.***

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**AGENCY USE ONLY**

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Health

Division of Occupational & Radiological Health

**APPLICATION FOR APPROVAL OF AN ASBESTOS ABATEMENT PLAN**

**SUPPLEMENTAL INFORMATION: AREA DESCRIPTION AND PROPOSED REMEDY**

**BUILDING LOCATION:** **LILLIAN FEINSTEIN ELEMENTARY SCHOOL**  
**159 SACKETT STREET; PROVIDENCE, RI 02905**

**INSTRUCTIONS:** All items on this form must be addressed. All references to attachments must be clearly identified. All attachments must be marked with the specific item numbers on this form to which they pertain.

---

(1) Area Location/Identification (Room Name / No., Evaluation Number, etc.):

**ASBESTOS CONTROL AREA #2 / INTERIOR – SECOND FLOOR / OFFICE A**  
**(SEE ATTACHMENT #2 & ATTACHED STUDIO JAED DRAWING A-101 FOR IDENTIFIED LOCATIONS)**

(2) Attach a description of each type (e.g. pipe, ceiling, etc.) of regulated asbestos containing material (RACM) in this area, including condition, location, quantity and asbestos content. Attach a copy of the laboratory report(s) for all samples. (**NOTE:** All laboratory reports must include the name of the building(s) and the location(s) of the sample(s)).

**SEE ATTACHMENT #2**

(3) Attach a current scale drawing of this area, showing direction of North and East, which has been clearly annotated to show the type, location and quantity of all RACM in this area. This drawing must include a legend, which acts as a guide to the scale, symbols and nomenclature used in the drawing. If a master plan or multiple drawings are provided, indicate the specific location(s) and drawing number(s) which depict this area. If the location of the decontamination chamber is known, it should be so indicated on the appropriate drawing(s).

**SEE ATTACHED STUDIO JAED DRAWING A-101 DRAWING FOR IDENTIFIED LOCATIONS @ APPENDIX – E**

(4) **PROPOSED REMEDIES:**

A) Attach a description of the interim Operations and Maintenance Plan that will be implemented in accordance with C.1.2(b).

**SEE ATTACHMENT #3**

---

(4) **PROPOSED REMEDIES:** (Cont.)

B) Will any portion of this area be abated by use of B.8 work procedures?  
(X) YES ( ) NO

If Yes, indicate below which RACM in this area will be abated by use of the following B.8 work procedures:

B.8.2 & B.8.3 (REMOVAL): THE ASBESTOS CONTRACTOR SHALL BE REQUIRED TO ABATE ALL ASBESTOS CONTAINING MATERIALS AS DEFINED WITHIN ATTACHMENT #2 OF THIS SPECIFICATION. ALL ASBESTOS REMOVAL OPERATIONS MUST BE CONDUCTED IN ACCORDANCE WITH THE WORK REQUIREMENTS OF SECTION 1.14.6 OF THE CURRENT RIDOH ASBESTOS CONTROL REGULATIONS, IN ADDITION TO ALL APPLICABLE WORK REQUIREMENTS AS DEFINED WITHIN ATTACHMENTS #1 - #5

B.8.2 & B.8.4 (ENCAPSULATION): \_\_\_\_\_

B.8.2 & B.8.5 (ENCLOSURE): \_\_\_\_\_

B.8.6 (DEMOLITION): \_\_\_\_\_

B.8.7 (GLOVEBAG): \_\_\_\_\_

B.8.8 (ASPHALT ROOFING): \_\_\_\_\_

---

C) Are you requesting any waivers to the above selected B.8 procedures for any of the abatement activities in this area?  
(X) YES ( ) NO

If Yes, attach a detailed description of the waivers requested you are proposing to utilize. All items must be keyed to the specific section(s) of the regulations for which waivers are requested.

---

**ATTACHMENT #4**

---

D) Are you proposing alternative procedures under B.11 for any of the abatement activities in this area?  
( ) YES (X) NO

If Yes, attach a detailed description of the alternative procedures requested you are proposing to utilize. Alternate procedures must include a justification for not following specific section(s) of the regulations and be as protective of public health.

---

E) Will any **accessible** RACM remain in this area after abatement?  
(X) YES ( ) NO

If Yes, attach a description of the RACM that will remain and the details of the on-going Operations and Maintenance Plan that will be implemented in accordance with C.1.2(b).

---

***All remaining ACM within this area and the envelope of the structure at the completion of the project shall be maintained by the building owner in accordance with the in-place AHERA Management Plan as developed and managed by the building owner / LEA.***

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**AGENCY USE ONLY**

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## **ATTACHMENT #1**

### **IN-PROCESS AIR MONITORING / ASBESTOS CONTROL AREAS – #1 + #2:**

During the scheduled abatement operations, at the direction of the building owner. The contracted asbestos consultant will collect air sample(s) outside the asbestos control area, periodically for the duration of the asbestos removal project. The compliance air samples shall be collected at random locations adjacent to the control areas (i.e., control area barriers or where the project representative determines, during the performance of the project.

If there is a deviation in proper procedures on the part of the asbestos abatement contractor during the set-up, the removal of the final clean up, the selected project monitor shall be notified immediately. These deviations include inadequate on-site paperwork, deviations in outlined work procedures, or if compliance air sampling outside the work area indicate fiber concentrations in excess of 0.01 f/cc, the on-site project monitor shall determine the extent of the contamination, and the asbestos abatement contractor shall be responsible for extending containment / control area to include the containment and initiating the clean-up.

### **CLEARANCE FINAL VISUAL REQUIREMENTS / INTERIOR: CONTROL AREAS - #1 + #2:**

A visual clearance inspection within each separate asbestos abatement work area MUST be performed at the completion of EACH asbestos response action work operation (as applicable) . The visual inspection(s) will include an inspection of all vertical and horizontal surface areas within the control area – including enclosed surface areas opened for inspection and removal of enclosed ACM/PACM materials, (as applicable). The on-site project monitor shall determine the cleanliness of the work area(s). Which shall be defined as – (1). the removal of ALL defined asbestos and assumed asbestos materials in their entirety (2). all uncovered surface areas remaining within the containment area shall be free of a porous material (material that cannot be wet cleaned) and (3). All remaining surface areas within the work area shall be free of visible debris and/or dust

After the containment area has passed the on-site project monitors visual clearance inspection (at each asbestos control area) the area(s) shall be considered complete (for the removal work as defined for each Asbestos Control Area) and the asbestos contractor in charge of the work shall be required to collect clearance air samples as defined by this section.

|                                                                                          |
|------------------------------------------------------------------------------------------|
| <b>CLEARANCE FINAL AIR SAMPLING REQUIREMENTS /<br/>INTERIOR: CONTROL AREAS: #1 + #2:</b> |
|------------------------------------------------------------------------------------------|

|                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b><u>CLEARANCE AIR TESTING REQUIREMENTS FOR EACH ASBESTOS RESPONSE ACTION<br/>GREATER THAN &gt; 160 SQUARE FEET and/or &gt; 260 LINEAR FEET:</u></b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|

A visual clearance inspection within the asbestos abatement work area(s) shall be performed prior to the performance of clearance air sampling. The visual inspection will include an inspection of all vertical and horizontal surfaces within the control area, (as applicable).

**Upon the successful completion of the visual inspection, the on-site project monitor shall collect clearance air samples in accordance with the sampling requirements of 40 CFR Part 763, EEA shall use the clearance air sampling guidelines as outlined in EPA guidance document EPA 560/5-89-001. [“Guidelines for Conducting the AHERA TEM Clearance Test to Determined Completion of an Asbestos Abatement Project”].**

NOTE: If clearance air monitoring results determine that the area is above an arithmetic mean of greater than 70s/mm<sup>2</sup> under the initial screening and / or the Z-test screening process]. The asbestos abatement contractor shall be responsible for the re-cleaning (i.e., wet-wiping, HEPA vacuuming...etc.) and re-encapsulating of the work area. A period of no less 24 hours shall elapse prior to the collection of the next set of clearance samples. This process shall be repeated until the air sample fiber concentrations are less than a 70s/mm<sup>2</sup> as an arithmetic mean. **The fees for any required re-testing due to clearance testing failure(s) within any asbestos work area shall be the financial responsibility of the asbestos contractor and must be paid to the building owner at the completion of the project.**

## ATTACHMENT #2

### CHART OF ACM:

***\*NOTE: THE SELECTED ASBESTOS CONTRACTOR SHALL BE RESPONSIBLE FOR THE FIELD VERIFICATION OF ALL ASBESTOS QUANTITIES, AS REPORTED FOR EACH ASBESTOS CONTROL AREA - AS DEFINED BY THIS SPECIFICATION - PRIOR TO SIGNING THE PROJECT CONTRACT AND START OF THE PROJECT. NO CHANGE ORDERS WILL BE APPROVED FOR DISCREPANCIES ASSOCIATED WITH THE REPORTED QUANTITIES.***

#### CONTROL AREA #1

| <b>***LOCATION</b>  | <b>*ACM QUANTITY</b> | <b>TYPE /<br/>DESCRIPTION OF<br/>ACM MATERIAL TO<br/>BE REMOVED.</b>                                       | <b>ASBESTOS<br/>CONTENT</b>                        |
|---------------------|----------------------|------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| Basement – Art Room | +/- 10 Square Feet   | Glue @ Fibrous Boards /<br>Writing Boards to be<br>removed and salvaged for<br>re-installation by others.  | <b><i>Assumed Asbestos</i></b>                     |
| Basement – Art Room | +/- 733 Square Feet  | Vinyl Floor Covering /<br>Floor Covering &<br>Associated Mastic (Studio<br>JAED / Demolition Note<br>D-01) | <b><i>5% Chrysotile /<br/>Assumed Asbestos</i></b> |

***\*\*\*LOCATION: Refer to StudioJAED project drawings A100 attached in Appendix E of this specification for reference to the specific control area currently defined as Control Area #1. All ACM/ Assumed Asbestos materials as identified for removal must be assumed to be located throughout the entire footprint of the referenced Control Area.***

**CONTROL AREA #2**

| <b>***LOCATION</b>              | <b>*ACM QUANTITY</b> | <b>TYPE /<br/>DESCRIPTION OF<br/>ACM MATERIAL TO<br/>BE REMOVED.</b>                                    | <b>ASBESTOS<br/>CONTENT</b>                 |
|---------------------------------|----------------------|---------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Second Floor –<br>Office Area A | +/- 173 Square Feet  | Vinyl Floor Covering / Floor<br>Covering & Associated<br>Mastic (Studio JAED /<br>Demolition Note D-01) | <b>5% Chrysotile /<br/>Assumed Asbestos</b> |
| Second Floor –<br>Office Area A | +/- 10 Square Feet   | Glue @ Removed Writing<br>Boards to be removed and<br>salvaged for re-installation.                     | <b>Assumed Asbestos</b>                     |
| Second Floor –<br>Office Area A | +/- 10 Square Feet   | Caulk @ Window(s)                                                                                       | <b>Assumed Asbestos</b>                     |

**\*\*\*LOCATION:** Refer to StudioJAED project drawings A101 + A400 attached in Appendix E of this specification for reference to the specific control area currently defined as Control Area #2. All ACM/ Assumed Asbestos materials as identified for removal must be assumed to be located throughout the entire footprint of the referenced Control Area.

## ***ATTACHMENT #3***

### **INTERIM AND ON-GOING OPERATIONS AND MAINTENANCE PROGRAM:**

The building owner representatives, maintenance personnel, building staff, outside contracting personnel, and other building occupants have been or will be made aware of the presence, amount, location, and condition, of the asbestos-containing building materials within this area of the building. These people have been or will be educated and advised not to disturb the asbestos-containing materials due to the potential health effects if asbestos fibers become airborne.

### **EMPLOYEE NOTIFICATIONS:**

The building owner as well as outside contractors have been or will be notified as to the presence of asbestos containing building materials within the exterior areas of the **Lillian Feinstein ES; 159 Sackett Street; Providence, RI**. All outside contractor(s) will sign a document stating that he has been made aware of the presence and location of the asbestos-containing materials within this areas. Also, the building owner representative(s) are responsible for presenting information to the building occupants of any asbestos abatement activities being conducted. This will be accomplished by posting memo's and/or posting of caution / warning signs at all the entrances to the building during such activities.

### **ACCIDENTAL DISTURBANCE OF ASBESTOS-CONTAINING MATERIALS:**

The building owner was, [at the time of the inspection] made aware of the presence of asbestos materials within the interior and exterior areas of the **Lillian Feinstein ES; 159 Sackett Street; Providence, RI**. Due to the presence of the asbestos-containing materials. The building owner will institute the following procedures in an event of an accidental asbestos fiber release within the building prior to the start of the asbestos abatement project.

If an asbestos-containing material becomes disturbed within the criteria of a minor fiber release (less than 3 linear feet or 3 square feet of ACBM), a trained " R.I. Competent Person" may perform the clean-up, removal, encapsulation, or enclosure abatement activities utilizing spot removal/repair techniques. During these spot abatement techniques, access to the area shall be restricted to only those trained individuals, signs shall be posted, and HVAC (if applicable) shall be shut down and locked out. If a major fiber release occurs (greater than 3 linear feet or 3 square feet of ACM), the clean-up, removal, encapsulation, or enclosure abatement activities must be completed by a RI Department of Health (RIDOH) certified asbestos abatement contractor. Regardless of the amount of asbestos to be abated, the affected area must be isolated and entry to the area restricted to only those trained/ certified personnel.

### **EMPLOYEE TRAINING:**

Any employee of the company, firm, agency, or other organization as well as any outside contractor employed by the building owner who, as a consequence of their work activities, disturbs asbestos-containing building materials must be properly trained and certified by the R.I. Department of Health as a "R.I. Competent Person" in accordance with the R.I. Rules and Regulations for Asbestos Control.

## ***ATTACHMENT #4***

### ***REQUESTED WAIVER***

#### ***WAIVER OF FLOOR COVERING***

##### ***INTERIOR: ASBESTOS CONTROL AREAS - #1 + #2***

Based on the scheduled removal of asbestos vinyl floor tile and any/all associated assumed ACM glue material (as defined by Attachment #2 of this specification). The building owner requests a waiver of floor covering as required by section 1.14.2 C. of the current RIDOH asbestos control regulation [216-RICR-50-15-1] at areas defined for removal by Attachment #2 of this specification **only**. In lieu of floor covering, the asbestos contractor shall clean any/all wall surface areas to a dust free condition at the completion of work and prior to the collection of clearance air sampling as required per section 1.14.2 P. of the current RIDOH asbestos control regulations. Please refer to Attachment – #1, of this project specification for specific sampling criteria's and standards to be used for project completion. NOTE: This waiver is for floor surface areas with the intention of being abated as part of the current asbestos response action work, any remaining floor surface areas within the limits of each asbestos control area that is NOT being removed as part of this asbestos removal design for this project will be required to be covered as required by section 1.14.2 C. of the current RIDOH asbestos control regulation [216-RICR-50-15-1].

#### ***WAIVER OF LIMITED USE OF WALL COVERING***

##### ***INTERIOR: ASBESTOS CONTROL AREAS - #1 + #2***

Based on the scheduled removal and salvage of fibrous boards + writing boards in association with and any/all applied assumed ACM glue material (as defined by Attachment #2 of this specification). The building owner requests a waiver of wall covering as required by section 1.14.2 D. of the current RIDOH asbestos control regulation [216-RICR-50-15-1] at areas defined for removal by Attachment #2 of this specification **only**. In lieu of wall covering, the asbestos contractor shall clean any/all wall surface areas to a dust free condition at the completion of work and prior to the collection of clearance air sampling as required per section 1.14.2 P. of the current RIDOH asbestos control regulations. NOTE: This waiver is for areas of wall surface areas with the intention of being removed and salvaged as part of the current planned renovation, **any remaining wall surface areas within the limits of each asbestos control area that is NOT being removed as part of this asbestos removal design for this project will be required to be covered as required by section 1.14.2 D. of the current RIDOH asbestos control regulation [216-RICR-50-15-1]. Refer to the attached StudioJAED project drawings that define the exact limits of writing boards planned for removal and salvage.**

## **ATTACHMENT #5**

### **SPECIFIC ADDITIONAL WORK REQUIREMENTS / ASBESTOS CONTROL AREAS - #1 + #2:**

During the asbestos mitigation operations the selected asbestos contractor shall be responsible for the work to be conducted in accordance with all applicable asbestos control regulations: USEPA – AHERA 40 CFR 763, USEPA – NESHAP 40 CFR Part 61, US OSHA 29 CFR 1926.1101 & US OSHA 29 CFR 1910.1001 and the RIDOH Asbestos Control Regulation [216-RICR-50-15-1]. The building owner (City of Providence), project architect (StudioJAED), and/or the selected asbestos consultant (Emery Environmental Associates) will stop the work at any time violations of any asbestos control regulations are observed. In addition to the above referenced asbestos control regulations, the selected asbestos contractor shall be required to comply with the following additional work requirements.

### **ASBESTOS CONTROL AREAS – #1 + #2:**

**WORK OPERATION(S):** The asbestos contractor shall remove all interior ACM / PACM building materials as defined by **Attachment #2** of this project specification in accordance with sections 1.14.2 & 1.14.3 of the current RIDOH Asbestos Control Regulations [216-RICR-50-15-1], in addition to all requested waivers and work procedures as defined by **Attachments – #4 & #5** of this specification. In addition, the selected asbestos contractor shall be responsible for the following additional work requirements:

**PROJECT SUBMITTALS:** Prior to the start of any asbestos work operations, the selected asbestos contractor shall be required to submit copies of the following items for review and approval. **NOTE:** *Additional submittals not requested at this time may be required for submittal and approval in the future.* No asbestos work operations may begin on site until the following items are submitted and approved in writing by the building owner (City of Providence), project architect (StudioJAED), and/or the selected asbestos consultant (Emery Environmental Associates)

1. Copy of RIDOH 10 day written start work notification for this project,
2. Copies of the written notification(s) to the City of Providence, RI police and fire departments,
3. Copy of contractors current insurance certificate,
4. Copy of contractor's current written health and safety program,
5. Copy of contractors current written asbestos respirator program,
6. Copies of MSDS sheet for the polyethylene sheeting, proposed for use,
7. Copies of MSDS sheet for the duct tape, proposed for use,
8. Copies of MSDS sheet for the final spray encapsulant, proposed for use,
9. Copies of MSDS sheet for duct tape, proposed for use,
10. Copies of MSDS sheet for protective suits, proposed for use,
11. Copy of manufactures efficiency report for each "HEPA vacuum system" proposed for use
12. Copies of licensure for the waste landfill, proposed for use,
13. Copies of RIDOH Asbestos licensure, training certification, medical information, fit test, First Aid / CPR card(s), for each worker proposed for use on the project site,
14. Copies of RIDOH certification for laboratory used to analyze the contractors daily OSHA personal air samples.

**MOVABLE OBJECTS:** It is the responsibility of the asbestos contractor to wet clean, HEPA vacuum and remove all moveable non-asbestos objects from the work area prior to the start of any asbestos mitigation operations.

**CONTAINMENT BARRIERS:** The asbestos contractor shall be responsible for isolation of the asbestos control / work area and prevent the movement of any/all dust or debris beyond the limits of the asbestos control / work area(s), as defined by Attachment #2 of this specification and the attached print(s). Containment barriers shall be installed in compliance with this specification and sections: 1.14.2 A & B. of the RIDOH asbestos control regulation [216-RICR-50-15-1].

**MOVABLE OBJECTS / ASBESTOS WORK AREA PRE-CLEANING:** It is the responsibility of the asbestos contractor to wet clean / HEPA vacuum ALL surface areas within the limits of the containment areas as defined by each attached ASB16A form of this specification and remove all moveable non-asbestos objects from the work area prior to the start of installation of containment barriers, as required per sections: 1.14.2 A & B. of the RIDOH asbestos control regulation [216-RICR-50-15-1]. Any/all material / debris within the area that is porous and cannot be properly cleaned and removed from the area shall be considered asbestos contaminated and disposed of as an ACBM. These items are defined within Attachment #2 of this specification.

**COVERING OF POUROUS NON-ASBESTOS BUILDING MATERIALS:** The asbestos contractor shall be responsible for the covering of all materials and objects within each work area that is not scheduled for asbestos abatement and cannot be wet cleaned at the completion of the planned asbestos mitigation work, with two layers of six-mil polyethylene sheeting. All items scheduled to be covered within each work area must be first pre-cleaned using wet-methods and HEPA vacuumed to a dust free condition prior to covering. All items not covered and not decontaminated at the completion of the work shall be considered asbestos contaminated and must be cleaned or disposed of as an asbestos containing building material.

**SMOKE DETECTOR / FIRE DETECTOR PROTECTION DURING WORK OPERATIONS:** The selected asbestos contractor shall be responsible for the protection and covering of all fire system alarms, fire system detector(s) and smoke detectors within the area of renovation / during the performance of the project (as applicable by the requirements of this project). Protection must be conducted using methods approved by current RI fire codes.

**LOCKOUT / TAG OUT:** The asbestos contractor shall be responsible for the lock-out / tag-out of any and all gas or electric service and/or equipment operating within the asbestos control area(s). (This shall include electric service within wall and ceiling surface areas, generators, boiler system equipment, hot water heaters, etc.) In addition, the asbestos contractor shall be responsible for the isolation and lock-out / tag-out of all electrical service(s) within the asbestos control area(s).

**NEGATIVE PRESSURE CONTAINMENT REQUIREMENTS:** The Asbestos Abatement contractor shall set-up and maintain negative pressure ventilation units with HEPA filtration, in sufficient number, dependent upon the abatement areas, to provide one (1) work-place air change every fifteen minutes. These units shall operate continuously (24 hours per day) from the time of barrier construction through the time of successful final visual inspection by the building owners selected consultant.

Local exhaust filtered air will be evacuated to the outside of the building at all times away from public access areas and building ventilation intake vents. HEPA filters will be leak proof and the ventilation unit will maintain a minimum pressure differential of -0.02 inches of water column relative to the adjacent areas of the building. Documentation of negative pressure shall be monitored by a manometer with printed reading. A printed reading of the containment pressure reading / "log" documented on a daily basis. The reading shall be dated and referenced to the project location and control area. The manometer readings shall be printed signed by the project supervisor and forwarded to the owner. The building owner (City of Providence), project architect (StudioJAED) and/or the selected asbestos consultant (Emery Environmental Associates) on a daily basis. If the printed readings indicate adequate negative pressure has not been maintained. The asbestos contractor shall increase the number of units until proper negative pressure can be established. **NOTE:** If the opening (exterior door, window, skylight, vent, etc.) used to exhaust air from the containment area or interior area of the structure - to the ambient air at the exterior of the structure requires the installation / erection of ridged barriers (i.e. plywood) or any other security measures to protect the structure from vandals /trespassers - as determined applicable by the general contractor or the owner, it shall be the responsibility of the asbestos contractor to provide these security controls at no additional cost to the general contractor, building owners representative or the building owner.

**REMOVAL OF VINYL FLOORING MATERIALS (VINYL FLOOR TILE, VINYL LINOLEUM) & ASSOCIATED GLUE / MASTIC:** The contracted asbestos contractor shall be responsible for the complete removal of **all** existing floor covering materials [including but not limited to: carpeting, vinyl floor tile (regardless of layers), vinyl linoleum (regardless of layers), floor leveler (regardless of thickness or layers) and associated mastics / glues as installed within the asbestos control area(s) of the structure (down to the concrete floor substrate)]. **As defined by Attachment #2** of this specification. Floor covering removal with associated mastic / leveler must be done using work practices as defined by section 1.14.2 & 1.14.3 of the current RIDOH Asbestos Control Regulations [216-RICR-50-15-1]. Removal shall include existing flooring materials that have been covered with a layers of paint, covered with a wall partition(s), installed beneath cabinetry, installed beneath base heaters, and/or installed beneath book cases. The contracted asbestos contractor must anticipate aforementioned site conditions. No change order will be approved for site conditions as described. Work is identified as Demolition Key Note D-01 on StudioJAED drawings A100 & A101.

**REMOVAL OF FIBERBOARD + WHITE BOARDS / CAULK BOARDS / TACK BOARDS AND**

**ASSOCIATED GLUES:** The selected asbestos contractor shall be responsible for the complete removal of fiberboards, marker “white” boards, caulk boards (“Green” and/or “Black”), tack boards and all associated glues, **as defined by Attachment #2** of this specification. This work requirement is applicable for the Gym Building. **Work is defined on StudioJAED prints as demolition Key Note D-07.** Removal shall include any/all marker, caulk or tack boards as applied to a wall surface area or a free standing board (as constructed in select classrooms). Board removal must be done using work practices as defined by section 1.14.2 and 1.14.3 of the current RIDOH Asbestos Control Regulations [216-RICR-50-15-1], work practices as defined by the corresponding ASB-16A forms and Attachments #1 - #5 of this specification (as applicable). At the completion of removal of the board from the wall, the selected contractor shall be required to remove any/all glue as applied to the existing plaster wall surface area. All **GLUE** materials removed shall be disposed of as ACBM . NOTE: Removal of boards shall be done at the direction of the current design of the project architect and shall include the salvage of the boards for reinstallation by others.

**LEAD PAINT / OSHA:** All workers coming into contact with the painted walls, ceilings, window frame(s) and door frames(s) shall be required to comply with all worker protection requirements of the current OSHA lead regulation 29 CFR 1926.62.

**LEAD PAINT / RIDOH:** All painted surface areas within Asbestos Control Areas #1 + #2, is currently assumed to contain regulated levels of lead in association with the current RIDOH (216-RICR-50-15-12). Work practices that will impact painted surface areas shall conform to the following requirements:

The Rhode Island Department of Health and the EPA - RRP Rule define schools as follows:

“Child care facility” means any building and/or area whose primary purpose is or will be to educate or care for children younger than six (6) years of age, Unless determined by the owner in writing that the use of the spaces as planned for renovation shall not be used by children under the age of six and less than 6 sq. ft. of lead-based paint will be disturbed during the renovation process, otherwise the use of a Lead Safe Renovation Firm would be required.

The following regulations may apply to this project:

- Rhode Island Department of Health Lead Safe Work Practices (216-RICR-50-15-12),
- EPA Renovation, Repair & Painting Rule,

Applicable final lead inspection testing will be conducted at the completion of work by the owner.

Clearance criteria to achieve a lead safe certificate will be required by the asbestos abatement / general contractor for this project.

**FINAL CLEANING:** The selected contractor shall be responsible for the complete cleaning of all surface areas within the asbestos control area using wet methods and HEPA vacuuming prior to the completion of the project.

**POST-ABATEMENT FINAL CLEANING:** Upon completion of the project the selected asbestos contractor shall be responsible for the removal of all asbestos contaminated polyethylene sheeting and any associated water proof tape used as part of the containment system. In addition, the contractor shall be responsible for the following:

- *Cleaning of all tape residue from light fixtures, wall / ceiling and floor surface areas,*
- *Removal of any/all tack staples used during the project,*
- *Cleaning of any/all residues left from mastic removal products on floor or wall surface area(s),*
- *Cleaning of any/all paint chips that has been dislodged during the containment removal operations,*

**CONTRACTOR RESPONSIBILITY REGARDING SUPPLY OF ELECTRICAL POWER TO THE REGULATED WORK AREA(S).** The selected asbestos contractor shall be responsible for the supply of electricity / electric power as required to complete any/all asbestos mitigation operations the defined asbestos control areas. The owner shall provide the asbestos contractor with a power supply source and the selected asbestos contractor shall be responsible for routing power from the supplied source to the asbestos work area using the contractor's own electric cords. **In addition, the asbestos contractor shall be responsible for the configuration and supply of at least ten (10) additional and separate electric cords to the asbestos control area for the purpose of project oversight (in-process and clearance air testing, lighting, etc.) during and at the completion of any/all asbestos mitigation work operations. These cords shall be installed to locations as directed by the on-site asbestos project monitor. All cords routed to each asbestos control area and used for the work associated with the asbestos abatement or project air testing must be directly connected to a GFCI and shall be always maintained to be in dry, clean and dust free condition.**

***END OF SPECIFICATION***

***APPENDIX – B:***

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***ANALYTICAL SAMPLE RESULTS***



# EMSL Analytical, Inc.

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EMSL Order: 132607290

Customer ID: EMER53

Customer PO:

Project ID:

**Attention:** Patrick Emery  
Emery Environmental Associates  
PO BOX E  
Pawtucket, RI 02861

**Phone:** (401) 727-4941

**Fax:** (401) 724-0926

**Received Date:** 09/30/2026 3:45 PM

**Analysis Date:** 10/02/2026

**Collected Date:** 09/29/2026

**Project:** 260807-A - Prov. School - Lillian Feinstein ES; 159 Sackett Street; Providence, RI

## **Test Report: Asbestos Analysis of Bulk Materials via AHERA Method 40CFR 763 Subpart E Appendix E supplemented with EPA 600/R-93/116 using Polarized Light Microscopy**

| Sample                       | Description                                              | Appearance                               | Non-Asbestos  |                          | Asbestos                     |
|------------------------------|----------------------------------------------------------|------------------------------------------|---------------|--------------------------|------------------------------|
|                              |                                                          |                                          | % Fibrous     | % Non-Fibrous            | % Type                       |
| 260807-1.1<br>132607290-0001 | Basement - Art Room -<br>Acoustical Wall Panel<br>- Gray | Gray/White<br>Fibrous<br>Homogeneous     | 85% Cellulose | 15% Non-fibrous (Other)  | None Detected                |
| 260807-1.2<br>132607290-0002 | Basement - Art Room -<br>Acoustical Wall Panel<br>- Gray | Gray/White<br>Fibrous<br>Homogeneous     | 85% Cellulose | 15% Non-fibrous (Other)  | None Detected                |
| 260807-2.1<br>132607290-0003 | Basement - Art Room -<br>9x9" Vinyl Floor Tile           | Brown/Gray<br>Non-Fibrous<br>Homogeneous |               | 95% Non-fibrous (Other)  | 5% Chrysotile                |
| 260807-2.2<br>132607290-0004 | Basement - Art Room -<br>9x9" Vinyl Floor Tile           |                                          |               |                          | Positive Stop (Not Analyzed) |
| 260807-2.3<br>132607290-0005 | Basement - Art Room -<br>9x9" Vinyl Floor Tile           |                                          |               |                          | Positive Stop (Not Analyzed) |
| 260807-2.4<br>132607290-0006 | 2nd Floor - Office -<br>9x9" Vinyl Floor Tile            |                                          |               |                          | Positive Stop (Not Analyzed) |
| 260807-2.5<br>132607290-0007 | 2nd Floor - Office -<br>9x9" Vinyl Floor Tile            |                                          |               |                          | Positive Stop (Not Analyzed) |
| 260807-3.1<br>132607290-0008 | Basement - Art Room -<br>Glue at HA2 (Black)             | Black<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-3.2<br>132607290-0009 | Basement - Art Room -<br>Glue at HA2 (Black)             | Black<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-3.3<br>132607290-0010 | Basement - Art Room -<br>Glue at HA2 (Black)             | Black<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-3.4<br>132607290-0011 | 2nd Floor - Office -<br>Glue at HA2 (Black)              | Black<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-3.5<br>132607290-0012 | 2nd Floor - Office -<br>Glue at HA2 (Black)              | Black<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-4.1<br>132607290-0013 | Basement - Art Room -<br>Skim Plaster - White            | White<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-4.2<br>132607290-0014 | Basement - Art Room -<br>Skim Plaster - White            | White<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-4.3<br>132607290-0015 | Basement - Art Room -<br>Skim Plaster - White            | White<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |
| 260807-4.4<br>132607290-0016 | 2nd Floor - Office -<br>Skim Plaster - White             | White<br>Non-Fibrous<br>Homogeneous      |               | 100% Non-fibrous (Other) | None Detected                |

Initial report from: 10/02/2026 08:08:56



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EMSL Order: 132607290

Customer ID: EMER53

Customer PO:

Project ID:

## Test Report: Asbestos Analysis of Bulk Materials via AHERA Method 40CFR 763 Subpart E Appendix E supplemented with EPA 600/R-93/116 using Polarized Light Microscopy

| Sample                       | Description                                         | Appearance                          | Non-Asbestos  |                          | Asbestos      |
|------------------------------|-----------------------------------------------------|-------------------------------------|---------------|--------------------------|---------------|
|                              |                                                     |                                     | % Fibrous     | % Non-Fibrous            | % Type        |
| 260807-4.5<br>132607290-0017 | 2nd Floor - Office -<br>Skim Plaster - White        | White<br>Non-Fibrous<br>Homogeneous |               | 100% Non-fibrous (Other) | None Detected |
| 260807-5.1<br>132607290-0018 | Basement - Art Room -<br>Base Plaster - Gray        | Gray<br>Non-Fibrous<br>Homogeneous  |               | 100% Non-fibrous (Other) | None Detected |
| 260807-5.2<br>132607290-0019 | Basement - Art Room -<br>Base Plaster - Gray        | Gray<br>Non-Fibrous<br>Homogeneous  |               | 100% Non-fibrous (Other) | None Detected |
| 260807-5.3<br>132607290-0020 | Basement - Art Room -<br>Base Plaster - Gray        | Gray<br>Non-Fibrous<br>Homogeneous  |               | 100% Non-fibrous (Other) | None Detected |
| 260807-5.4<br>132607290-0021 | 2nd Floor - Office -<br>Base Plaster - Gray         | Gray<br>Non-Fibrous<br>Homogeneous  |               | 100% Non-fibrous (Other) | None Detected |
| 260807-5.5<br>132607290-0022 | 2nd Floor - Office -<br>Base Plaster - Gray         | Gray<br>Non-Fibrous<br>Homogeneous  |               | 100% Non-fibrous (Other) | None Detected |
| 260807-6.1<br>132607290-0023 | 2nd Floor - Office -<br>Black Floor Paper at<br>VCT | Black<br>Fibrous<br>Homogeneous     | 80% Cellulose | 20% Non-fibrous (Other)  | None Detected |
| 260807-6.2<br>132607290-0024 | 2nd Floor - Office -<br>Black Floor Paper at<br>VCT | Black<br>Fibrous<br>Homogeneous     | 80% Cellulose | 20% Non-fibrous (Other)  | None Detected |

Analyst(s)

Kevin Pine (20)

Steve Grise, Laboratory Manager  
or Other Approved Signatory

EMSL maintains liability limited to cost of analysis. Interpretation and use of test results are the responsibility of the client. This report relates only to the samples reported above, and may not be reproduced, except in full, without written approval by EMSL. EMSL bears no responsibility for sample collection activities or analytical method limitations. The report reflects the samples as received. Results are generated from the field sampling data (sampling volumes and areas, locations, etc.) provided by the client on the Chain of Custody. Samples are within quality control criteria and met method specifications unless otherwise noted. The above analyses were performed in general compliance with Appendix E to Subpart E of 40 CFR (previously EPA 600/M4-82-020 "Interim Method") but augmented with procedures outlined in the 1993 ("final") version of the method. This report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST or any agency of the federal government. Non-friable organically bound materials present a problem matrix and therefore EMSL recommends gravimetric reduction prior to analysis. Unless requested by the client, building materials manufactured with multiple layers (i.e. linoleum, wallboard, etc.) are reported as a single sample. Estimation of uncertainty is available on request.

Samples analyzed by EMSL Analytical, Inc. Woburn, MA NVLAP Lab Code 101147-0, CT PH-0315, MA AA000188, RI PLM00139, VT Asb-Co-An-000080, ME LB-0039

Initial report from: 10/02/2026 08:08:56

EMSL ANALYTICAL, INC.  
LABORATORY • PRODUCTS • TRAINING

# Asbestos Bulk Building Material Chain of Custody

EMSL Order Number (Lab Use Only):

132607290

| Company: <b>Emery Environmental Assoc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                           | EMSL-Bill to: <input checked="" type="checkbox"/> Same <input type="checkbox"/> Different<br>If Bill to is Different note instructions in Comments**                                                                                                                                                                                                                                                                               |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Street: <b>PO Box - E</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                           | Third Party Billing requires written authorization from third party                                                                                                                                                                                                                                                                                                                                                                |                        |
| City: <b>Pawtucket</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | State/Province: <b>RI</b> | Zip/Postal Code: <b>02861</b>                                                                                                                                                                                                                                                                                                                                                                                                      | Country: <b>USA</b>    |
| Report To (Name): <b>Patrick Emery</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           | Telephone #: <b>401-641-0074</b>                                                                                                                                                                                                                                                                                                                                                                                                   |                        |
| Email Address: <b>emeryenvironmental@icloud.com</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           | Fax #:                                                                                                                                                                                                                                                                                                                                                                                                                             | Purchase Order:        |
| Project Name/Number: <b>SEE BELOW</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           | Please Provide Results: <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email                                                                                                                                                                                                                                                                                                                                     |                        |
| U.S. State Samples Taken: <b>RHODE ISLAND</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           | CT Samples: <input type="checkbox"/> Commercial/Taxable <input type="checkbox"/> Residential/Tax Exempt                                                                                                                                                                                                                                                                                                                            |                        |
| Turnaround Time (TAT) Options* - Please Check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |
| <input type="checkbox"/> 3 Hour <input type="checkbox"/> 6 Hour <input checked="" type="checkbox"/> 24 Hour <input type="checkbox"/> 48 Hour <input type="checkbox"/> 72 Hour <input type="checkbox"/> 96 Hour <input type="checkbox"/> 1 Week <input type="checkbox"/> 2 Week                                                                                                                                                                                                                                                                                                                             |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |
| *For TEM Air 3 hr through 6 hr, please call ahead to schedule. *There is a premium charge for 3 Hour TEM AHERA or EPA Level II TAT. You will be asked to sign an authorization form for this service. Analysis completed in accordance with EMSL's Terms and Conditions located in the Analytical Price Guide.                                                                                                                                                                                                                                                                                             |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |
| <b>PLM - Bulk (reporting limit)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           | <b>TEM - Bulk</b>                                                                                                                                                                                                                                                                                                                                                                                                                  |                        |
| <input checked="" type="checkbox"/> PLM EPA 600/R-93/116 (<1%)<br><input type="checkbox"/> PLM EPA NOB (<1%)<br>Point Count <input type="checkbox"/> 400 (<0.25%) <input type="checkbox"/> 1000 (<0.1%)<br>Point Count w/Gravimetric <input type="checkbox"/> 400 (<0.25%) <input type="checkbox"/> 1000 (<0.1%)<br><input type="checkbox"/> NIOSH 9002 (<1%)<br><input type="checkbox"/> NY ELAP Method 198.1 (friable in NY)<br><input type="checkbox"/> NY ELAP Method 198.6 NOB (non-friable-NY)<br><input type="checkbox"/> OSHA ID-191 Modified<br><input type="checkbox"/> Standard Addition Method |                           | <input type="checkbox"/> TEM EPA NOB - EPA 600/R-93/116 Section 2.5.5.1<br><input type="checkbox"/> NY ELAP Method 198.4 (TEM)<br><input type="checkbox"/> Chatfield Protocol (semi-quantitative)<br><input type="checkbox"/> TEM % by Mass - EPA 600/R-93/116 Section 2.5.5.2<br><input type="checkbox"/> TEM Qualitative via Filtration Prep Technique<br><input type="checkbox"/> TEM Qualitative via Drop Mount Prep Technique |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           | <b>Other</b>                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                           |                        |
| <input checked="" type="checkbox"/> Check For Positive Stop - Clearly Identify Homogenous Group                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           | Date Sampled: <b>9/29/26</b>                                                                                                                                                                                                                                                                                                                                                                                                       |                        |
| Samplers Name: <b>Patrick Emery</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           | Samplers Signature: <b>Pat A. Gg</b>                                                                                                                                                                                                                                                                                                                                                                                               |                        |
| Sample #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | HA #                      | Sample Location                                                                                                                                                                                                                                                                                                                                                                                                                    | Material Description   |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 1-1                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                | ACUSTICAL WOOD PANEL - |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 1-2                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                | GREY                   |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2-1                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                | 9"X9" VINYL FLOOR TILE |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2-2                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                |                        |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2-3                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                |                        |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2-4                       | 2ND FLOOR - OFFICE                                                                                                                                                                                                                                                                                                                                                                                                                 |                        |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2-5                       | 2ND FLOOR - OFFICE                                                                                                                                                                                                                                                                                                                                                                                                                 |                        |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3-1                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                | BLUE @ HAZ "BLACK"     |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3-2                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                |                        |
| 260807                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3-3                       | BASEMENT - ART ROOM                                                                                                                                                                                                                                                                                                                                                                                                                |                        |
| Client Sample # (s): <b>260807 HA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           | Total # of Samples: <b>23</b>                                                                                                                                                                                                                                                                                                                                                                                                      |                        |
| Relinquished (Client): <b>Pat Gg</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           | Date: <b>9/30/26</b>                                                                                                                                                                                                                                                                                                                                                                                                               | Time: <b>15:40</b>     |
| Received (Lab):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                           | Date:                                                                                                                                                                                                                                                                                                                                                                                                                              | Time:                  |
| Comments/Special Instructions: <b>260807-A</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |
| <b>PROV. SCHOOL - LILLIAN FEINSTEIN ES: 159 SACKETT ST.; PROV. RI</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |



**EMSL ANALYTICAL, INC.**  
LABORATORY • PRODUCTS • TRAINING

## Asbestos Bulk Building Material Chain of Custody

**EMSL Order Number** (*Lab Use Only*): \_\_\_\_\_

13 26 07 290

*Additional Pages of the Chain of Custody are only necessary if needed for additional sample information*

[illegible]

Page 2 of 2 pages

REC'D 0111  
EMSL-BOSTON SEP 30 2026

***APPENDIX – C:***

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***ASBESTOS PROJECT CONSULTANT LICENSURE***



**State of Rhode Island**  
**DEPARTMENT OF HEALTH**  
**HEALTHY ENVIRONMENT TEAM – ASBESTOS PROGRAM**  
**CERTIFICATION**

Pursuant to the Asbestos Abatement Act, Chapter 24.5 of Title 23 of the General Laws entitled "Health and Safety" as amended, and the Rules and Regulations for Asbestos Control, this Certificate is hereby issued as designated below. This Certificate is subject to all applicable rules, regulations, orders and notices of the Department of Health now or hereafter in effect and to any conditions specified below.

**Certificate Holder: PATRICK A EMERY**  
**Address: EMERY ENVIRONMENTAL ASSOCIATES**  
**PO BOX E**  
**PAWTUCKET RI 02861**

**Certification Number: AI00505**  
**Type of Certification: Asbestos Inspector**  
**Expiration Date: 04/30/2027**

Except as specifically provided otherwise in this Certificate, Certificate holders shall conduct their program in accordance with statements, procedures and representations contained in the documents, including any enclosures, listed below. The Rhode Island Rules and Regulations for Asbestos Control shall govern unless the statements, representations and procedures in the Certificate Holder's application and correspondence are more restrictive than the regulations.



***State of Rhode Island***  
**DEPARTMENT OF HEALTH**  
**HEALTHY ENVIRONMENT TEAM – ASBESTOS PROGRAM**  
**CERTIFICATION**

Pursuant to the Asbestos Abatement Act, Chapter 24.5 of Title 23 of the General Laws entitled "Health and Safety" as amended, and the Rules and Regulations for Asbestos Control, this Certificate is hereby issued as designated below. This Certificate is subject to all applicable rules, regulations, orders and notices of the Department of Health now or hereafter in effect and to any conditions specified below.

**Certificate Holder: PATRICK A EMERY**  
**Address: EMERY ENVIRONMENTAL ASSOCIATES**  
**PO BOX E**  
**PAWTUCKET RI 02861**

**Certification Number: AMP00505**  
**Type of Certification: Asbestos Management Planner**  
**Expiration Date: 04/30/2027**

Except as specifically provided otherwise in this Certificate, Certificate holders shall conduct their program in accordance with statements, procedures and representations contained in the documents, including any enclosures, listed below. The Rhode Island Rules and Regulations for Asbestos Control shall govern unless the statements, representations and procedures in the Certificate Holder's application and correspondence are more restrictive than the regulations.



***State of Rhode Island***  
***DEPARTMENT OF HEALTH***  
***HEALTHY ENVIRONMENT TEAM – ASBESTOS PROGRAM***  
***CERTIFICATION***

Pursuant to the Asbestos Abatement Act, Chapter 24.5 of Title 23 of the General Laws entitled "Health and Safety" as amended, and the Rules and Regulations for Asbestos Control, this Certificate is hereby issued as designated below. This Certificate is subject to all applicable rules, regulations, orders and notices of the Department of Health now or hereafter in effect and to any conditions specified below.

**Certificate Holder: PATRICK A EMERY**  
**Address: EMERY ENVIRONMENTAL ASSOCIATES**  
**PO BOX E**  
**PAWTUCKET RI 02861**

**Certification Number: APD00505**  
**Type of Certification: Asbestos Project Designer**  
**Expiration Date: 04/30/2027**

Except as specifically provided otherwise in this Certificate, Certificate holders shall conduct their program in accordance with statements, procedures and representations contained in the documents, including any enclosures, listed below. The Rhode Island Rules and Regulations for Asbestos Control shall govern unless the statements, representations and procedures in the Certificate Holder's application and correspondence are more restrictive than the regulations.

***APPENDIX – D:***

---

***ASBESTOS TESTING LABORATORY LICENSURE***



*State of Rhode Island*  
**DEPARTMENT OF HEALTH**  
**CENTER FOR HEALTHY HOMES & ENVIRONMENT – ASBESTOS PROGRAM**

***ASBESTOS ANALYTICAL SERVICES CERTIFICATION***

Pursuant to the Asbestos Abatement Act, Chapter 24.5 of Title 23 of the Rhode Island General Laws, and Regulation 216-RICR-50-15-1 – Asbestos Control, this license is hereby issued as designated below. This license is subject to all applicable rules, regulations, orders and notices of the Department of Health now or hereafter in effect and to any conditions delineated below.

Certificate Holder: EMSL ANALYTICAL INC  
Address: 5 CONSTITUTION WAY UNIT A  
WOBURN MA 01801

Certification Number: TEM00139  
Expiration Date: 04/30/2027  
Type of Certification: Analytical Service - TEM

Except as specifically provided otherwise in this Certificate, Certificate Holders shall conduct their program in accordance with statements, procedures and representations contained in their application, including any attachments. Regulation 216-RICR-50-15-1 - Asbestos Control shall govern unless the statements representations and procedures in the Certificate Holder's application and documentation are more restrictive than the Regulation.

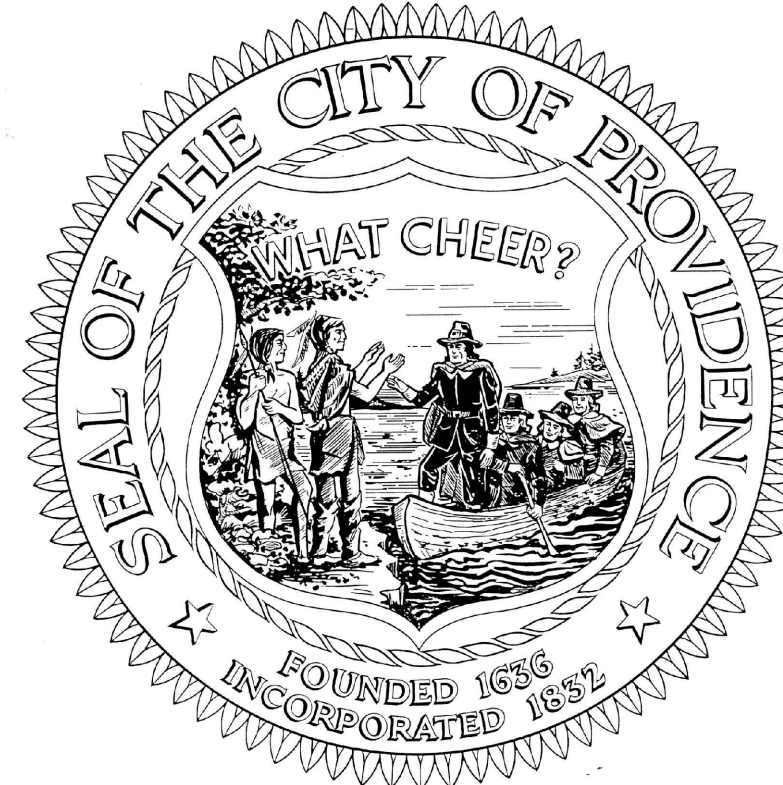
***APPENDIX – E:***

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***ASBESTOS PROJECT DRAWING(S)***



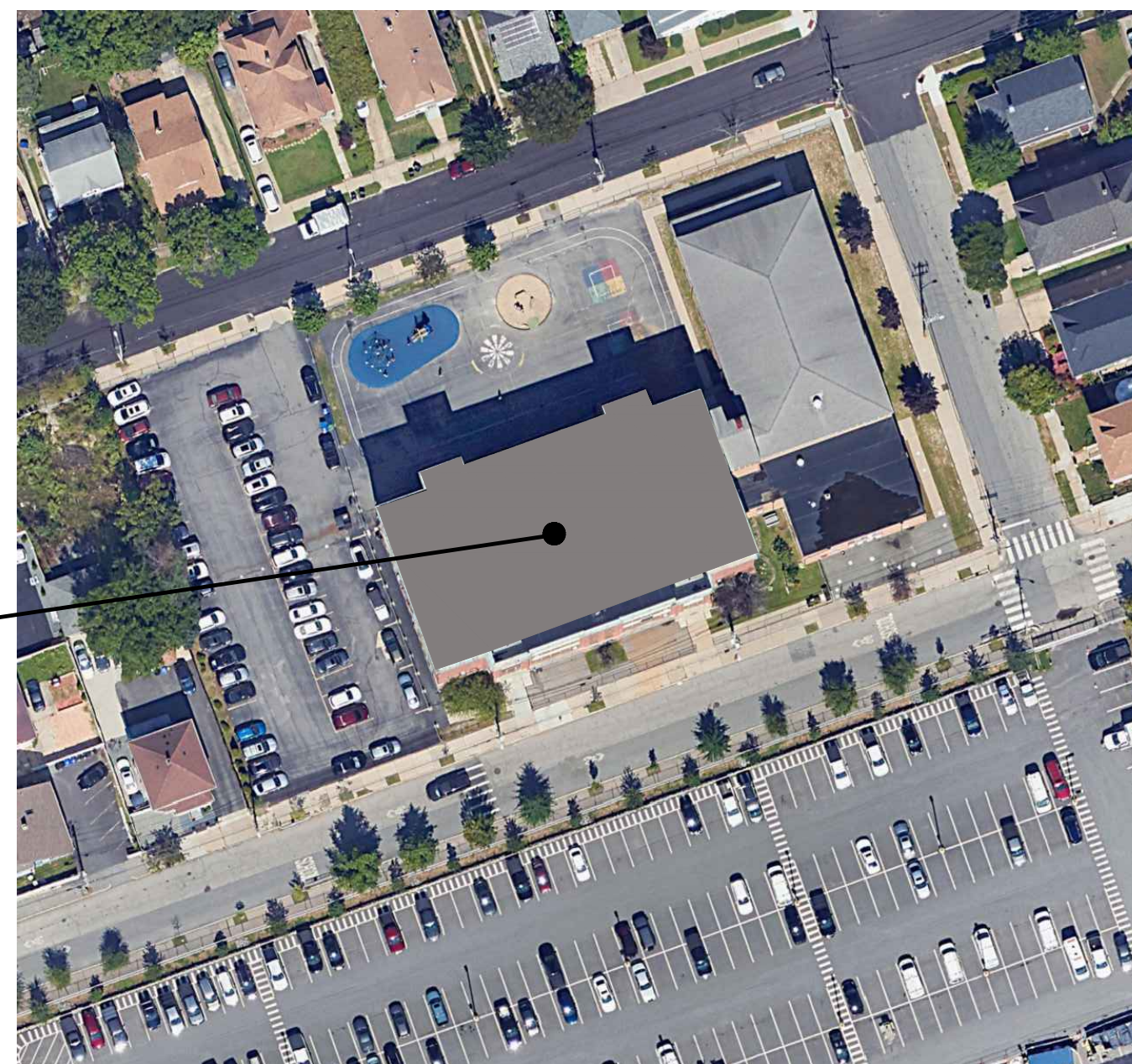
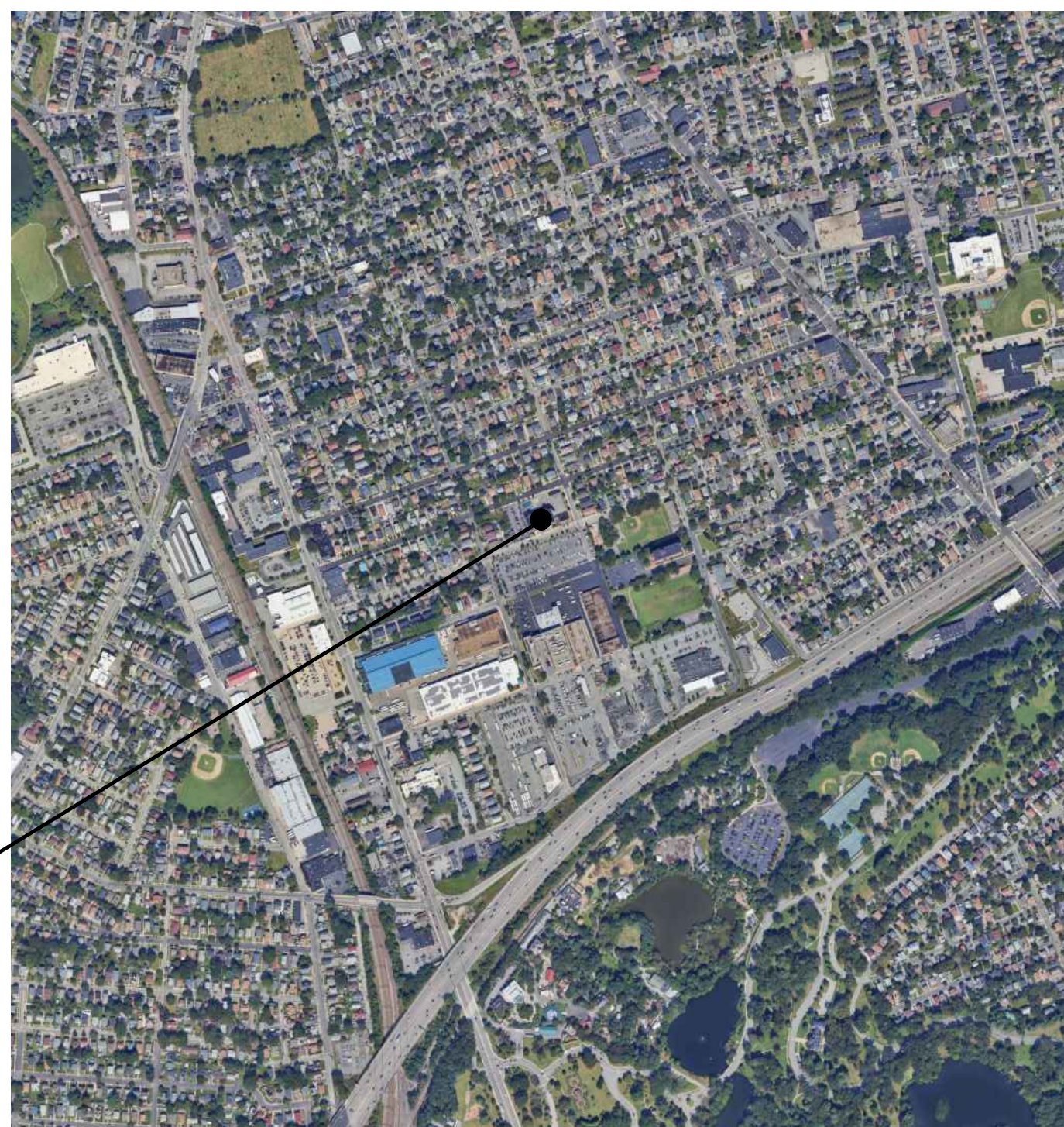
Providence  
Schools



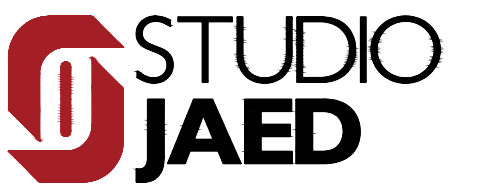
## An aerial photograph of a city, likely Seattle, showing a dense urban grid, green spaces, and a large body of water (Puget Sound) on the right. A black dot is placed on a road in the central part of the image, with a thin black line extending from it towards the top right corner.

CITY OF PROVIDENCE  
LILLIAN FEINSTEIN E.S  
159 SACKETT STREET  
PROVIDENCE, RI 02905

## SITE MAP



|                               |                                    |
|-------------------------------|------------------------------------|
| F000                          | FIRE PROTECTION COVER SHEET        |
| <b>INFORMATION TECHNOLOGY</b> |                                    |
| T000                          | INFORMATION TECHNOLOGY COVER SHEET |



2500 WRANGLE HILL ROAD, STE 110  
BEAR, DELAWARE 19701  
P: (302) 832-1652

306 E. CAMDEN-WYOMING AVENUE  
CAMDEN, DELAWARE 19934  
P: (302) 832-1652

42 WEYBOSSETT STREET, STE 403  
PROVIDENCE, RHODE ISLAND 02903  
P: (401) 648-0884

SIGNATURE: \_\_\_\_\_  
DATE OF SIGNATURE: \_\_\_\_\_  
DATE OF REGISTRATION EXPIRATION: \_\_\_\_\_

THE ARCHITECT WHO SEALED, SIGNED, AND  
DATED THIS DOCUMENT HAS NOT BEEN  
EMPLOYED TO FURNISH CONSTRUCTION  
ADMINISTRATION AS DEFINED IN 24 DEL.C. §303(C)

PROVIDENCE PUBLIC  
SCHOOL DEPARTMENT  
WILLIAM FEINSTEIN ELEMENTARY SCHOOL

ART ROOM & OFFICE RENNOVATION

159 SACKETT STREET  
PROVIDENCE, RI 02905

ADDRESS: 159 SACKETT STREET  
OCCUPANCY CLASSIFICATION: E - EDUCATION

[illegible]

|       |       |             |
|-------|-------|-------------|
| DRAWN | CHK'D | PROJECT NO. |
| AG    | TAD   | 26070       |

G-000

2025 JAED CORPORATION

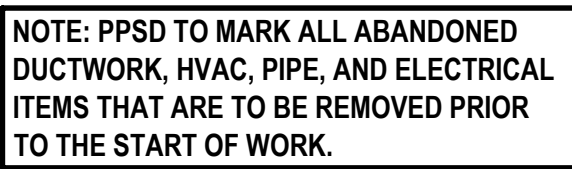
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8/4/2026 2:53 PM

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|         |                          |               |                          |           |                       |          |                      |
|---------|--------------------------|---------------|--------------------------|-----------|-----------------------|----------|----------------------|
| A       | AND                      | E             | EAST                     | LN        | LINEAR                | S        | SOUTH                |
| AN      | ANGLE                    | EA            | EAST                     | L.O.C.    | LIMITS OF CONTRACT    | S.ACT.   | SUSPENDED ACOUSTICAL |
| AT      | AT                       | EA            | EACH                     | L.O.C.    | LOCATION              | S.C.T.   | CEILING TILE         |
| CL      | CENTERLINE               | E.F.          | EXHAUST FAN              | L.P.      | LOW POINT             | S.C.D.   | SCAFFOLD             |
| D       | DIAMETER OR ROUND        | ELEC.         | ELECTRICAL               | LT.       | LIGHT                 | S.C.H.   | SEAT COVER DISP.     |
| D       | PENNEY                   | ELEV.         | ELEVATOR                 | MAS.      | MASONRY               | SCHED.   | SCHEDULE             |
| J       | PERPENDICULAR            | ELVR.         | ELEVATOR                 | M.B.      | MACHINE BOLT          | S.D.     | SOFT DISPENSER       |
| BLK     | PLATE                    | EMER.         | EMERGENCY                | MAX       | MAXIMUM               | SECT.    | SECTION              |
| #       | POUND OR NUMBER          | ENCL.         | ENCLOSURE                | M.C.      | MECHANICAL CONTRACTOR | SGFT     | STRUCTURALLY GLAZED  |
|         |                          | EQUA.         | EQUIPMENT                | MECH.     | MECHANICAL            | SH       | SHELF                |
| A.B.    | ANCHOR BOLT              | E.W.          | EACH WAY                 | MEMB.     | MEMBRANE              | SHR.     | SHOWER               |
| A.C.    | ASPHALTIC CONCRETE       | EXIST.        | EXISTING                 | MFG.      | MANUFACTURED          | SHT.     | SHEET                |
| ACQUS   | AIR CONDITION            | EXPO.         | EXPOSED                  | MFR.      | MANUFACTURER          | SHG.     | SHEATHING            |
| ACT     | ACOUSTICAL CEILING TILE  | EXP.          | EXPANSION                | MH.       | MANHOLE               | SM.      | SIMILAR              |
| ACCESS. | ACCESSORIES              | EXT.          | EXTERIOR                 | MIN.      | MINIMUM               | S.N.D.   | SANITARY NAPKIN      |
| ADJ.    | ADJACENT                 | ETR           | EXISTING TO REMAIN       | MIR.      | MIRROR                |          | DISPENSER            |
| AGGR.   | ABOVE FINISHED FLOOR     |               |                          | MISC.     | MISCELLANEOUS         | S.N.R.   | SANITARY NAPKIN      |
| ALT.    | ALTERNATE                | (F)           | FUTURE                   | M.O.      | MASONRY OPENING       | S&P      | RECEPTACLE           |
| ALUM.   | ALUMINUM                 | F.B.O         | FURNISHED BY OTHERS      | MOD.      | MODULAR               | SPEC.    | SPECIFICATION        |
| AM.     | AMINO F.D.               | F.F.          | FLOOR DRAIN              | M.R.      | MOISTURE RESISTANT    | SPC.     | SQUARE               |
| APPROX. | APPROXIMATE              | FDN.          | FOUNDATION               | MOUNT.    | MOUNTED               | STANLESS | STAINLESS STEEL      |
| ARCH.   | ARCHITECTURAL            | F.F.          | FIRE EXTINGUISHER        | MTL       | METAL                 | S.S.K.   | SERVICE SINK         |
| ARW.    | AMERICAN WELDING SOCIETY | F.C.          | FIRE EXISTING CAB.       | MULL.     | MULLION               | STA.     | STATION              |
|         |                          | F.F.          | FIBERGLASS               |           |                       | STB.     | STANDARD             |
|         |                          | F.H.          | FIRE HYDRANT             |           |                       | STL      | STEEL                |
| B.B     | BOTTOM OF BEAM           | F.H.C.        | FIRE HOSE CAB.           | N         | NORTH                 | STOR.    | STORAGE              |
| BD      | BOARD                    | FINSH         | FINISH                   | N.A       | NOT APPLICABLE        | STR.     | STRUCTURAL           |
| BITUM.  | BITUMINOUS               | FLR           | FLOOR LINE               | N.C.      | NOT IN CONTRACT       | SUSP.    | SUSPENDED            |
| B.J.    | BOTTOM OF JOIST          | FLR           | FLOOR                    | N.O. OR # | NUMBER                | SYL.     | SYMMETRICAL          |
| BLDG.   | BUILDING                 | FLASH.        | FLASHING                 | NOM.      | NOMINAL               | S.W.     | SEWALK               |
| BLK.    | BLOCK                    | FLUOR.        | FLUORESCENT              | N.R.C.    | NORCE REDUCTION       |          |                      |
| BLK.    | BLOCKING                 | F.O.C.        | FACE OF CONCRETE         |           |                       |          |                      |
| BM.     | BEAM                     | F.O.M.        | FACE OF MASONRY          | N.S.      | NEAR SIDE             | T.B      | TOP OF BEAM          |
| BTM.    | BOTTOM                   | F.O.S.        | FACE OF STUDS            | N.T.S.    | NOT TO SCALE          | T.B      | TOWER BAR            |
|         |                          | F.P.R.        | FIREPLACE                |           |                       | T & B    | TOP AND BOTTOM       |
| CAB.    | CABINET                  | FRFR.         | FIREPROOF                | O         | OVER                  | T.C      | TOP OF CURB          |
| CATV    | CABLE TELEVISION         | FRM.G.        | FRAMING                  | O.A.      | OVERALL               | TEL.     | TELEPHONE            |
| CK-B    | CHALK BOARD              | FT.           | FOOT OR FEET             | O.B.      | OBSCURE               | TEMP.    | TEMPERED             |
| C.B.    | CATCH BASIN              | FTG.          | FOOTING                  | O.C.      | ON CENTER             | TER.     | TERRAZZO             |
| CEM.    | CEMENT                   | FURR.         | FURRING                  | O.D.      | OUTSIDE DIAMETER      | T.H.K    | TONGUE & GROOVE      |
| CHER.   | CERAMIC                  | F.W.S.        | FINISHED WALL SURFACE    | OFF.      | OFFICE                | T.J.     | TOOL JOINT           |
| CHAMF   | CHAMFER                  | FRP           | FIBERGLASS REINFORCED    | OVERHEAD  | OVERHEAD              | T.K      | TACK BOARD           |
| C.I.    | CAST IRON                | PLASTIC PANEL | PLASTIC PANEL            | OPNG.     | OPENING               | T.K-S    | TACK STRIP           |
| C.J.    | CONTROL JOINT            | GA.           | GAUGE                    | OPP.      | OPPOSITE              | T.L      | TOP OF LEDGER        |
| C.L.    | CENTER LINE              | GAUV.         | GALVANIZED               | OPP. IND. | OPPOSITE HAND         | T.O.F    | TOP OF FOOTING       |
| CLG.    | CEILING                  | G.B.          | GRAB BAR                 | O.T.S.    | OPEN TO STRUCTURE     | T.O.S.   | TOP OF STEEL         |
| CLGK.   | CAULKING                 | G.D.          | GARBAGE DISPOSAL         |           |                       | T.P      | TOP OF PAVEMENT      |
| CLO.    | CLOSET                   | GL.           | GLASS                    | PART.     | PARTITION             | T.P.D.   | TOILET PAPER DISP.   |
| CLR.    | CLEAR                    | GLB.          | GLU-LAM BEAM             | P.C.      | PORTLAND CEMENT       | T.S      | TREAD                |
| C.MU    | CONCRETE MASONRY UNIT    | GND.          | GROUND                   | PED.      | PEDESTAL              | TRD.     | TOP OF SHEATHING     |
| CNTR.   | COUNTER                  | GR.           | GRADE                    | PERP.     | PERPENDICULAR         | TSL      | TOP OF SLAB          |
| C.O     | CLEAN OUT                | GYP.          | GYP.                     | P.H.      | PANIC HARDWARE        | TST      | TOP OF STEEL         |
| COL.    | COLUMN                   | OTPSUM        | OTPSUM                   | P.L.      | PROPERTY LINE         | T.V.     | TELEVISION           |
| CONC.   | CONCRETE                 |               |                          | PL.       | PLATE                 | TW       | TOP OF WALL          |
| CONN.   | CONNECTION               | H.            | HIGH                     | PLAM.     | PLASTIC LAMINATE      | TYP      | TYPICAL              |
| CONSTR. | CONSTRUCTION             | H.B.          | HOLE BIBB                | PLAS.     | PLASTER               |          |                      |
| CONT.   | CONTINUOUS               | HDCP          | HANDICAPPED              | PLUMB.    | PLUMBING              | U.G.     | UNDERGROUND          |
| CONR.   | CORRUGATED               | H.C.          | HOLLOW CORE              | P.P.      | POWER POLE            | U.N.     | UNFINISHED           |
| CORD.   | COORDINATE               | H.D.          | HOLD DOWN                | P.P.      | PAIR                  | U.N.O.   | UNITS NOTED          |
| CPT.    | CARPET                   | H.DG          | HOT DIPPED GALVANIZED    | PROP.     | PROPOSED              |          | OTHERWISE            |
| C.T.    | CERAMIC TILE             | HDG           | HEADER                   | PRECST.   | PRECAST               | UR.      | URNAL                |
| CPU     | CENTRAL PROCESSING UNIT  | HDWD          | HARDWOOD                 | PRT. BRD. | PARTICLE BOARD        |          |                      |
| C.R.    | CLOSET                   | HDWR.         | HARDWARE                 | P         | PAINT                 |          |                      |
| CRT     | CATHODE RAY TUBE         | H.I.          | HIGH INTENSITY DISCHARGE | P.T.D.    | PRESSURE TREATED      | VCT      | VINY. COMPOSITION    |
| CNT.    | CENTER                   | H.H.          | HOLLOW METAL             | P.T.D.R   | PAPER TOWEL DISP.     |          | TILE                 |
| CTSK.   | COUNTERSINK              | HORIZ.        | HORIZONTAL               |           | COMBINATION PAPER     |          |                      |

|                                                                                       |                                                                                 |                                                                                       |                           |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------|
|  | INDICATED WINDOW, STOREFRONT, OR HM FRAME TYPE - SEE A-400 FOR MORE INFORMATION |  | WALL TYPE TAG             |
|  | KEY NOTE TAG. SEE KEY NOTE INSTRUCTIONS / NARRATIVE FOR MORE INFORMATION        |  | WINDOW IDENTIFICATION TAG |
|  | ENLARGED DETAIL (3)<br>SHEET WHERE DRAWN (A-500)                                |  | ELEVATION LEVEL MARKER    |
|  | EXISTING WALL TO REMAIN                                                         |  | ROOM NAME<br>ROOM NUMBER  |
|  | NEW WALL CONSTRUCTION<br>(SEE WALL TYPE FOR CONSTRUCTION MATERIAL(S))           |  | CHANGE IN ELEVATION       |
|  | WALL DEMOLITION                                                                 |  | DEMOLISHED POWER OUTLET   |
|  | REVISION                                                                        |  | EXISTING LIGHT SWITCH     |
|  | ELEVATION IDENTIFICATION (1)<br>WALL SECTION (A-501)                            |  | EXISTING POWER OUTLET     |
|  | SHEET WHERE DRAWN (1)<br>SHEET WHERE DRAWN (A-401)                              |  | NEW POWER OUTLET          |
|  | DENOTES PLAN DETAIL<br>(DETAIL #1/SHEET A-102)                                  |                                                                                       |                           |





1. REMOVE AND DISPOSE OF ALL ABANDONED DUCTWORK, HVAC, PIPE AND ELECTRICAL ITEMS IN WALLS, CEILINGS, ETC. NOT NOTED TO BE RELOCATED, AND OR REUSED OR TO REMAIN.
2. ALL FURNITURE AND MISCELLANEOUS ITEMS TO BE REMOVED BY OWNER PRIOR TO THE START OF WORK.
2. REMOVE AND DISPOSE OF ALL WINDOW SHADES.

|                                                                                         |                                                                          |
|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">C-02</div> → | KEY NOTE TAG. SEE KEY NOTE INSTRUCTIONS / NARRATIVE FOR MORE INFORMATION |
| <div style="border: 1px dashed black; padding: 2px; display: inline-block;"> </div>     | INDICATES EXISTING TO BE REMOVED + DEMOLISHED                            |
| <div style="border: 2px solid black; padding: 2px; display: inline-block;"> </div>      | INDICATES NEW PARTITION                                                  |

|      |                                                                                                                                                                                                                                                         |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| D-01 | ABATE, REMOVE AND DISPOSE OF FLOORING, FLOORING ADHESIVES, ADHESIVE RESIDUE, DOWN TO CONCRETE SLAB. FLASH PATCH FLOOR TO PREPARE FOR NEW FLOORING INSTALLATION. COORDINATE REQUIREMENTS W/ FLOORING MANUFACTURER REQUIREMENTS, INSTRUCTIONS, AND SPECS. |
| D-02 | REMOVE AND DISPOSE OF PLUMBING FIXTURES AND PIPING TEMPORARILY CAP PIPING FOR INSTALLATION OF NEW FIXTURE.                                                                                                                                              |
| D-03 | REMOVE AND DISPOSE OF ACOUSTIC WALL PANEL.                                                                                                                                                                                                              |
| D-04 | SCRAPE, REMOVE AND DISPOSE OF PEELING AND LOOSE WALL TO SOUND MATERIAL. PATCH AND REPAIR ALL FOR NEW FINISH.                                                                                                                                            |
| D-05 | REMOVE AND DISPOSE OF ALL EXISTING WINDOW SHADES AND HARDWARE.                                                                                                                                                                                          |
| D-06 | REMOVE AND PROTECT EXISTING KILN THROUGH CONSTRUCTION FOR LATER REINSTALLATION.                                                                                                                                                                         |
| D-07 | REMOVE, RELOCATE, AND PROTECT EXISTING WHITEBOARD FOR LATER REINSTALLATION. TO MAKE ROOM FOR NEW ART SINKS.                                                                                                                                             |

|      |                                                                                                                                                                                      |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C-01 | PROVIDE AND INSTALL NEW LVT FLOORING WHERE INDICATED; PREPARE SUBSTRATE PER MANUFACTURERS REQUIREMENTS, INCLUDING LEVELING AND MOISTURE MITIGATION AS REQUIRED. SEE FINISH SCHEDULE. |
| C-02 | PATCH, REPAIR, AND PREP ALL EXISTING WALL SURFACES TO RECEIVE FINISH; PROVIDE NEW PAINT FINISH WHERE INDICATED. SEE FINISH SCHEDULE.                                                 |
| C-03 | SAND, PRIME, AND PAINT ALL EXISTING WOOD TRIM AND WAINSCOTING. SEE FINISH SCHEDULE.                                                                                                  |
| C-04 | PROVIDE AND INSTALL NEW WINDOW SHADES AT ALL WINDOWS WHERE INDICATED. SEE SPEC                                                                                                       |
| C-05 | PROVIDE A NEW TWO-BAY ART SINK, INCLUDING FAUCETS, SUPPLY, AND DRAIN CONNECTIONS; COORDINATE WITH PLUMBING AND CASEWORK AS REQUIRED.                                                 |
| C-06 | PROVIDE A NEW ADA ACCESSIBLE ART SINK, INCLUDING FAUCETS, SUPPLY, AND DRAIN CONNECTIONS; COORDINATE WITH PLUMBING AND CASEWORK AS REQUIRED.                                          |
| C-07 | REINSTALL EXISTING KILN UNDER EXISTING WINDOWS AND VENT OUT WINDOW ABOVE.                                                                                                            |
| C-08 | PROVIDE AND INSTALL NEW WALL MOUNTED A/C UNIT. SEE MECH. DWGS.                                                                                                                       |

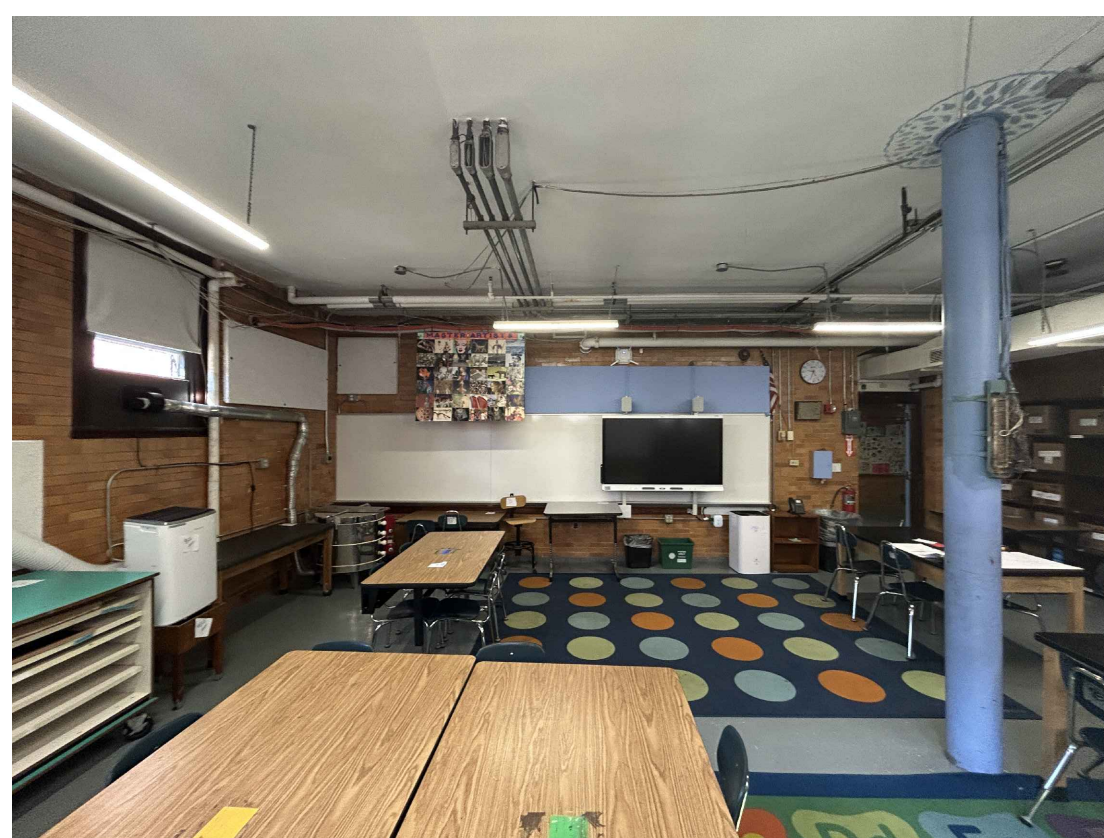
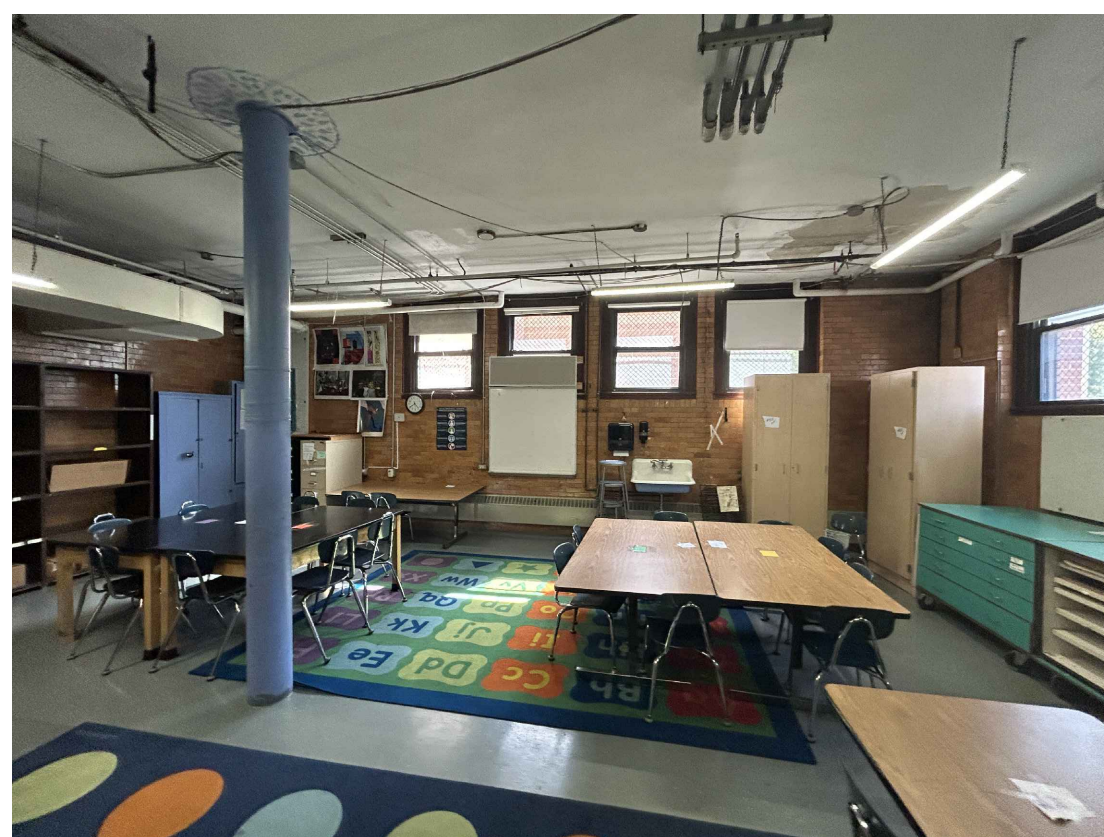
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Email: [info@StudioJAED.com](mailto:info@StudioJAED.com)

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CAMDEN, DELAWARE 19534  
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THE ARCHITECT WHO SEALED, SIGNED, AND  
DATED THIS DOCUMENT HAS NOT BEEN  
EMPLOYED TO FURNISH CONSTRUCTION  
ADMINISTRATION AS DEFINED IN 24 DEL.C. §303(C)

ARCHITECT / ENGINEER SEAL



A-100 SCALE: 3/8" = 1'-0"

## 253 SF

B2

A-100 SCALE: 3/8" = 1'-0"

SCALE: NOT TO SCALE



ISSUE

SHEET NO. \_\_\_\_\_

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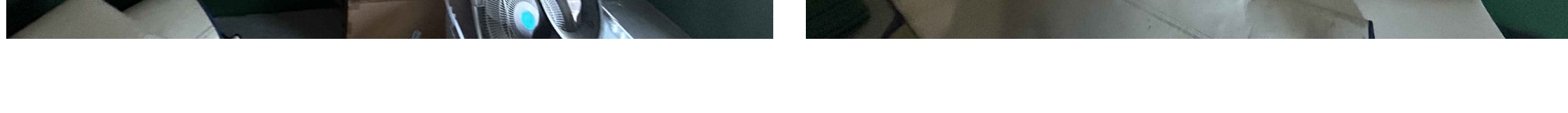


REMOVE ALL ABANDONED DUCTWORK, HVAC, PIPE AND ELECTRICAL ITEMS IN WALLS,  
NOTED TO BE RELOCATED, AND OR REUSED OR TO REMAIN.  
REMOVE ALL MISCELLANEOUS ITEMS TO BE REMOVED BY OWNER PRIOR TO THE START OF WORK  
REMOVE ALL WINDOW SHADES.

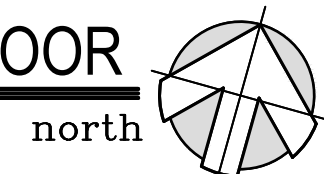
|                                                                                     |                                                                          |
|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
|  | KEY NOTE TAG. SEE KEY NOTE INSTRUCTIONS / NARRATIVE FOR MORE INFORMATION |
|  | INDICATES EXISTING TO BE REMOVED + DEMOLISHED                            |
|  | INDICATES NEW PARTITION                                                  |

|      |                                                                                                                                                                                                                                                         |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| D-01 | ABATE, REMOVE AND DISPOSE OF FLOORING, FLOORING ADHESIVES, ADHESIVE RESIDUE, DOWN TO CONCRETE SLAB. FLASH PATCH FLOOR TO PREPARE FOR NEW FLOORING INSTALLATION. COORDINATE REQUIREMENTS W/ FLOORING MANUFACTURER REQUIREMENTS, INSTRUCTIONS, AND SPECS. |
| D-02 | REMOVE AND DISPOSE OF PLUMBING FIXTURES AND PIPING TEMPORARILY CAP PIPING FOR INSTALLATION OF NEW FIXTURE.                                                                                                                                              |
| D-03 | REMOVE AND DISPOSE OF ACOUSTIC WALL PANEL.                                                                                                                                                                                                              |
| D-04 | SCRAPE, REMOVE AND DISPOSE OF PEELING AND LOOSE WALL TO SOUND MATERIAL. PATCH AND REPAIR ALL FOR NEW FINISH.                                                                                                                                            |
| D-05 | REMOVE AND DISPOSE OF ALL EXISTING WINDOW SHADES AND HARDWARE.                                                                                                                                                                                          |
| D-06 | REMOVE AND PROTECT EXISTING KILN THROUGH CONSTRUCTION FOR LATER REINSTALLATION.                                                                                                                                                                         |
| D-07 | REMOVE, RELOCATE, AND PROTECT EXISTING WHITEBOARD FOR LATER REINSTALLATION. TO MAKE ROOM FOR NEW ART SINKS.                                                                                                                                             |

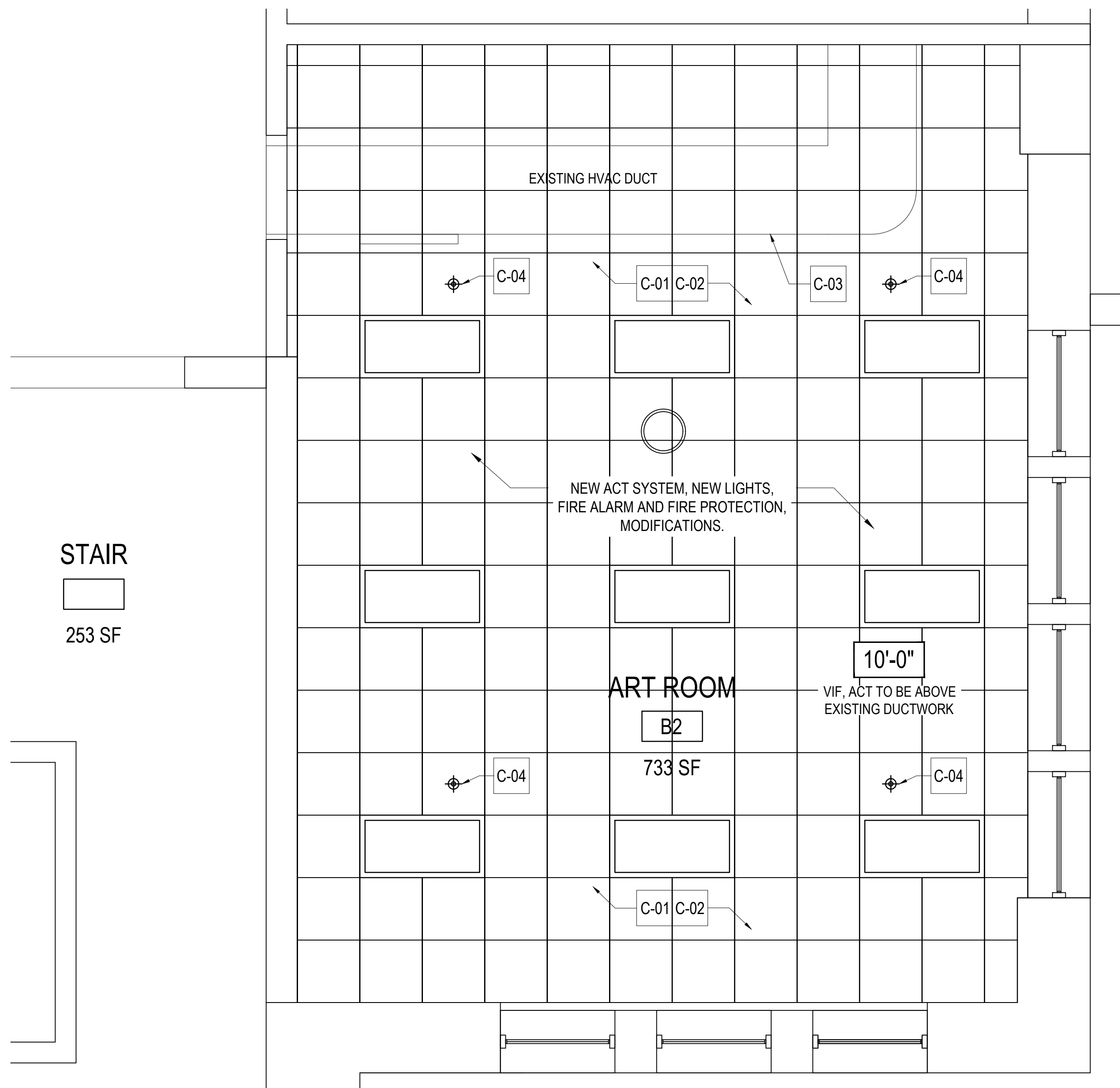
|      |                                                                                                                                                                                      |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C-01 | PROVIDE AND INSTALL NEW LVT FLOORING WHERE INDICATED; PREPARE SUBSTRATE PER MANUFACTURERS REQUIREMENTS, INCLUDING LEVELING AND MOISTURE MITIGATION AS REQUIRED. SEE FINISH SCHEDULE. |
| C-02 | PATCH, REPAIR, AND PREP ALL EXISTING WALL SURFACES TO RECEIVE FINISH; PROVIDE NEW PAINT FINISH WHERE INDICATED. SEE FINISH SCHEDULE.                                                 |
| C-03 | SAND, PRIME, AND PAINT ALL EXISTING WOOD TRIM AND WAINSCOTING. SEE FINISH SCHEDULE.                                                                                                  |
| C-04 | PROVIDE AND INSTALL NEW WINDOW SHADES AT ALL WINDOWS WHERE INDICATED. SEE SPEC                                                                                                       |
| C-05 | PROVIDE A NEW TWO-BAY ART SINK, INCLUDING FAUCETS, SUPPLY, AND DRAIN CONNECTIONS; COORDINATE WITH PLUMBING AND CASEWORK AS REQUIRED.                                                 |
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| C-07 | REINSTALL EXISTING KILN UNDER EXISTING WINDOWS AND VENT OUT WINDOW ABOVE.                                                                                                            |
| C-08 | PROVIDE AND INSTALL NEW WALL MOUNTED A/C UNIT. SEE MECH. DWGS.                                                                                                                       |



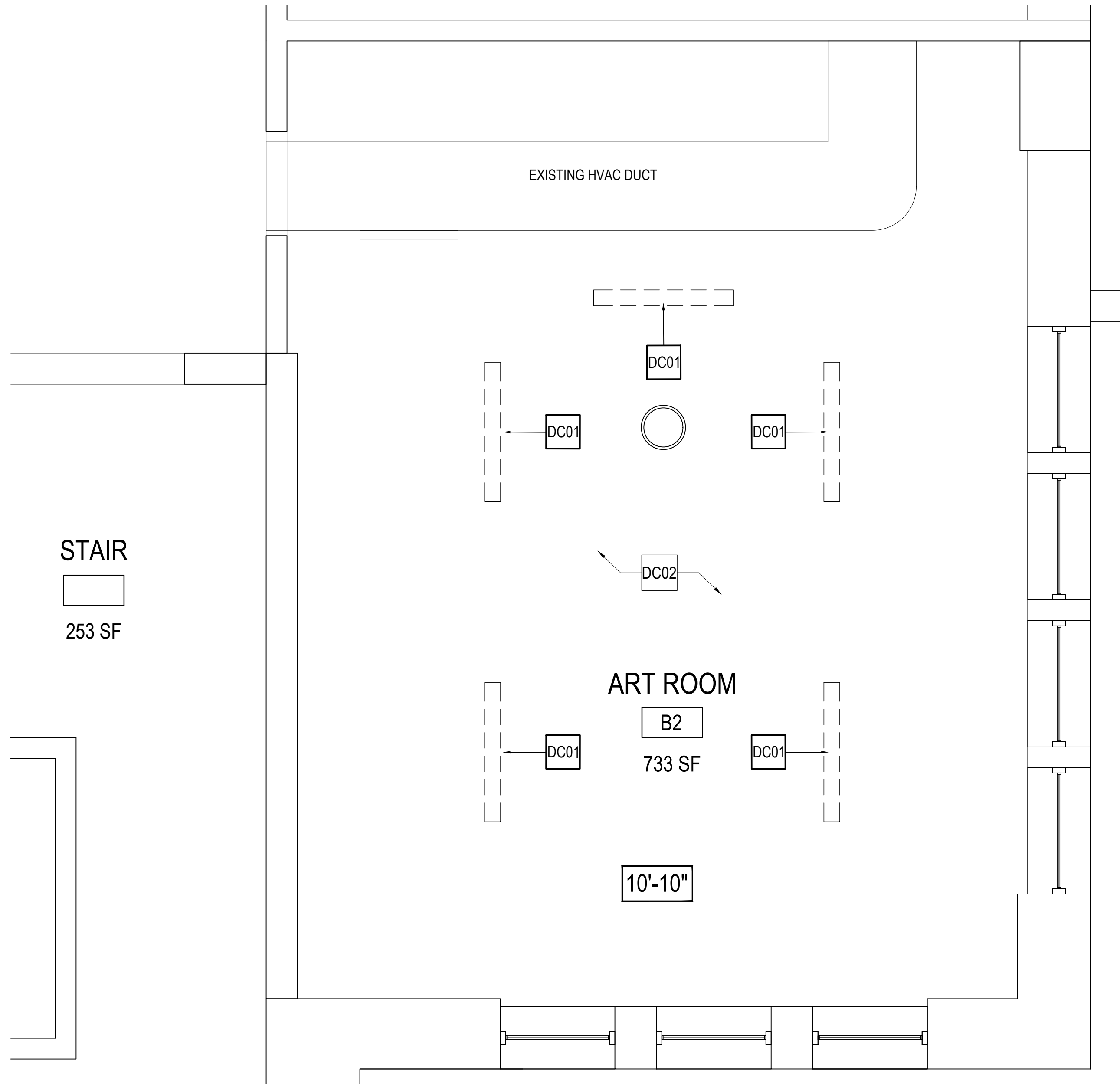
SCALE: NOT TO SCALE



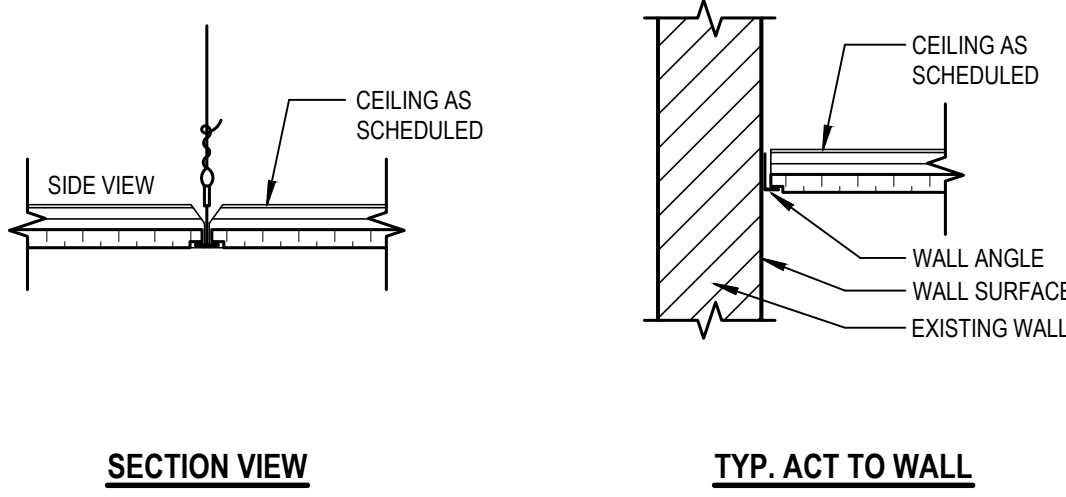
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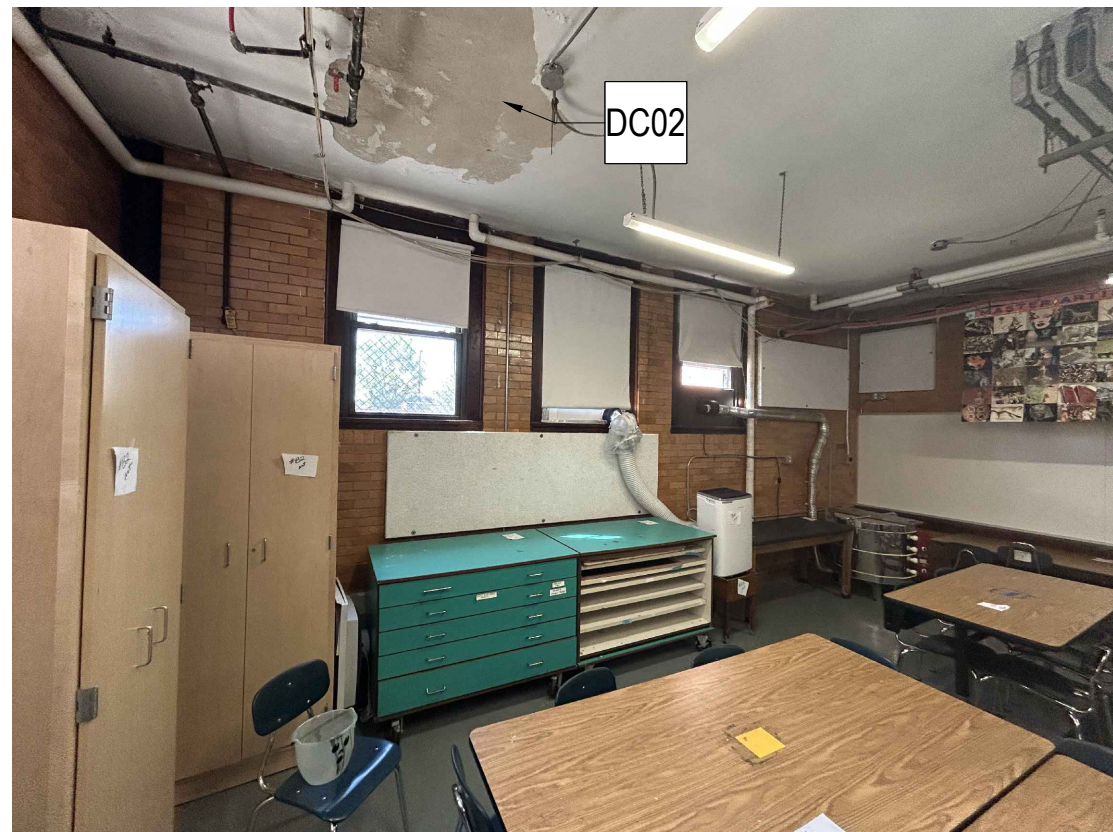
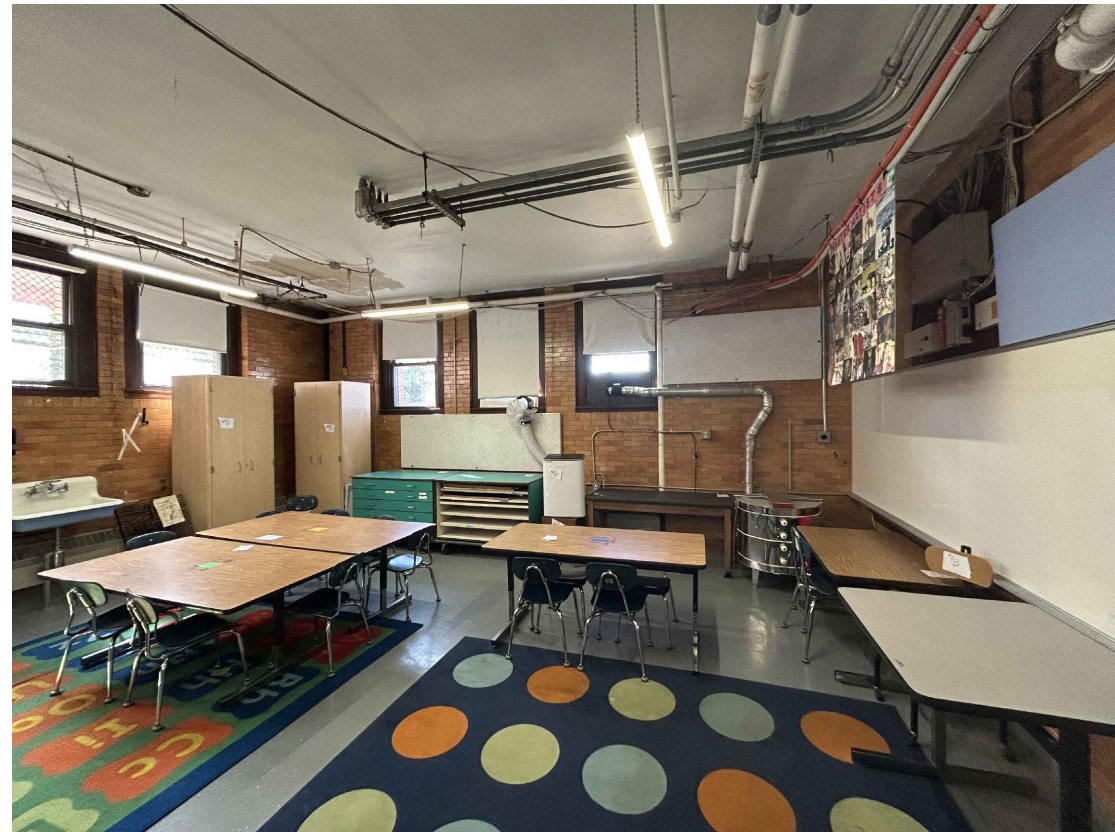
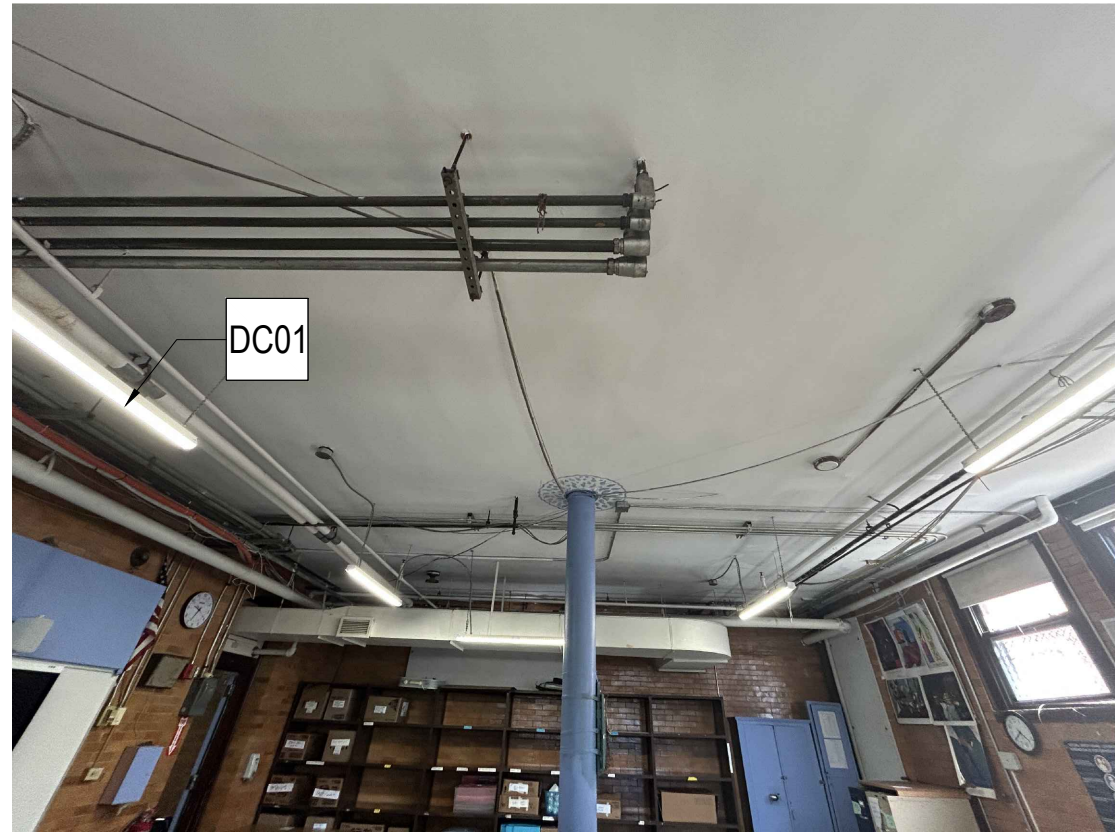
1 PARTIAL BASEMENT REFLECTED CEILING PLAN - NEW WORK  
AR100 SCALE: 3/8" = 1'-0"



2 PARTIAL BASEMENT REFLECTED CEILING PLAN - DEMOLITION  
AR100 SCALE: 3/8" = 1'-0"



3 SUSPENDED CEILING DETAILS  
AR100 SCALE: 3" = 1'-0"



## CEILING SYMBOL LEGEND

|              |                                                                          |          |                                                 |
|--------------|--------------------------------------------------------------------------|----------|-------------------------------------------------|
| C-02         | KEY NOTE TAG. SEE KEY NOTE INSTRUCTIONS / NARRATIVE FOR MORE INFORMATION | -        | CEILING HEIGHT<br>AS NOTED. VERIFY ETR IN FIELD |
| [Dashed Box] | LIGHT<br>DEMOLISHED LINEAR SURFACE<br>MOUNTED LIGHT FIXTURE              | [Square] | NEW 2x2 LIGHT FIXTURE                           |
| [Rect Box]   | NEW 2x4 LIGHT FIXTURE                                                    | [Square] | NEW 2x2 LIGHT FIXTURE                           |
| [Circle]     | EXISTING SPRINKLER HEAD                                                  | [Circle] | NEW SPRINKLER HEAD                              |
| [Circle]     | EXISTING SMOKE DETECTOR                                                  | [Circle] | NEW SMOKE DETECTOR                              |

## GENERAL CEILING NOTES

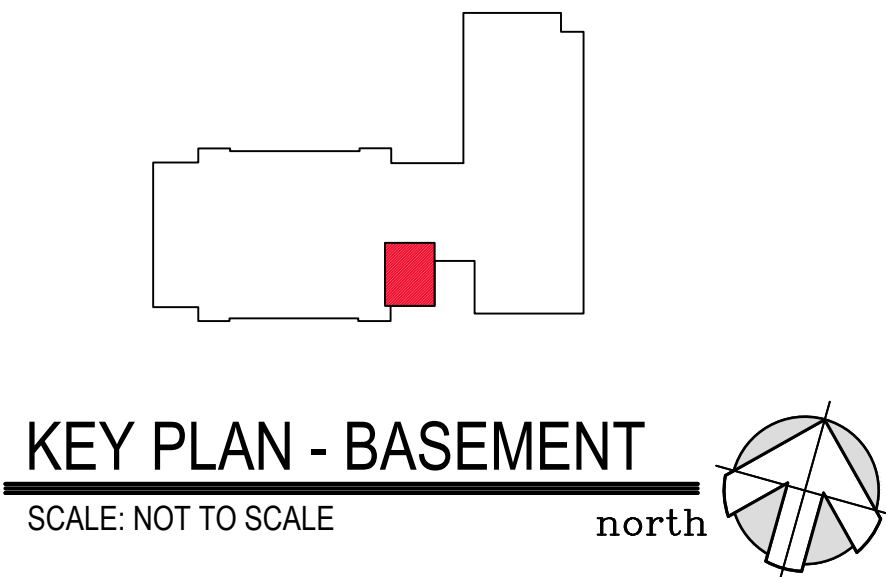
- SEE GENERAL NOTES ON A-001 FOR ADDITIONAL INFORMATION.
- LIGHTING AND OTHER CEILING-MOUNTED FIXTURES ARE SHOWN FOR COORDINATION PURPOSES ONLY. COORDINATE ALL CEILING WORK PRIOR TO INSTALLATION OF CEILING. SEE MECHANICAL, ELECTRICAL AND PLUMBING DRAWINGS FOR ADDITIONAL INFORMATION.
- ALL CEILING-MOUNTED ITEMS (LIGHTS, GRILLES, DIFFUSERS, DETECTORS, SPRINKLER HEAD, SHALL BE CENTERED WITHIN THE CEILING TILES AND GRIDS UNLESS NOTED OTHERWISE.
- PAINT ALL EXPOSED SURFACES, INCLUDING ALL GYPSUM BOARD CEILINGS AND SOFFITS.
- ALL CEILING TILES TO BE CENTERED IN ROOMS, UNLESS NOTED OTHERWISE.
- CEILING HEIGHTS REFERENCE ROOM FINISHED FLOOR ELEVATION.
- DURING CEILING DEMOLITION PROTECT ALL EXISTING MEP AND FIRE PROTECTION ITEMS TO REMAIN. TEMPORARILY SUPPORT DURING WORK, REHANG AND/OR RELOCATE PER MEP AND FIRE PROTECTION DWGS.

## DEMOLITION CEILING NOTES

- |      |                                                                                                                                                |
|------|------------------------------------------------------------------------------------------------------------------------------------------------|
| DC01 | REMOVE AND DISPOSE OF LIGHT FIXTURES. RE: ELECTRICAL DWGS.                                                                                     |
| DC02 | SCRAPE, REMOVE AND DISPOSE OF LOOSE PLASTER TO SOUND MATERIAL.                                                                                 |
| DC03 | PATCH, REPAIR, AND PREP ALL EXISTING CEILING SOFFIT SURFACES TO RECEIVE FINISH; PROVIDE NEW PAINT FINISH WHERE INDICATED. SEE FINISH SCHEDULE. |

## CONSTRUCTION CEILING NOTES

- |      |                                                                                                                                                    |
|------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| C-01 | INSTALL NEW ACOUSTICAL CEILING TILE SYSTEM INCLUDING SUSPENDED GRID, TILES, AND ALL NECESSARY HANGERS AND ACCESSORIES; SEE RCP FOR CEILING HEIGHT. |
| C-02 | MODIFY EXISTING SPRINKLER HEAD LOCATIONS TO ALIGN WITH NEW ACT CEILING GRID; MAINRAIN CODE-COMPLIANT COVERAGE.                                     |
| C-03 | PRIME AND PAINT EXISTING DUCT WORK. SEE FINISH SCHEDULE.                                                                                           |
| C-04 | RELOCATE EXISTING SPRINKLER HEADS INTO NEW ACT CEILING SYSTEM.                                                                                     |
| C-05 | PRIME AND PAINT EXISTING CEILING SOFFIT. SEE FINISH SCHEDULE.                                                                                      |



KEY PLAN - BASEMENT  
SCALE: NOT TO SCALE

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DATE OF SIGNATURE: \_\_\_\_\_  
DATE OF REGISTRATION EXPIRATION: \_\_\_\_\_

THE ARCHITECT WHO SEALED, SIGNED, AND DATED THIS DOCUMENT HAS NOT BEEN EMPLOYED TO FURNISH CONSTRUCTION ADMINISTRATION AS DEFINED IN 24 DEL.C. §303(C)

ARCHITECT / ENGINEER SEAL

PROVIDENCE PUBLIC  
SCHOOL DEPARTMENT  
LILLIAN FEINSTEIN ELEMENTARY SCHOOL  
ART ROOM & OFFICE RENOVATION  
159 SACKETT STREET  
PROVIDENCE, RI 02905

PROJECT

| REVISIONS |             |      |
|-----------|-------------|------|
| MARK      | DESCRIPTION | DATE |
|           |             |      |
|           |             |      |
|           |             |      |
|           |             |      |
|           |             |      |
|           |             |      |
|           |             |      |
|           |             |      |
|           |             |      |

SHEET TITLE

PARTIAL BASEMENT  
REFLECTED CEILING  
DEMO AND WORK PLANS

ISSUE

FOR  
CONSTRUCTION

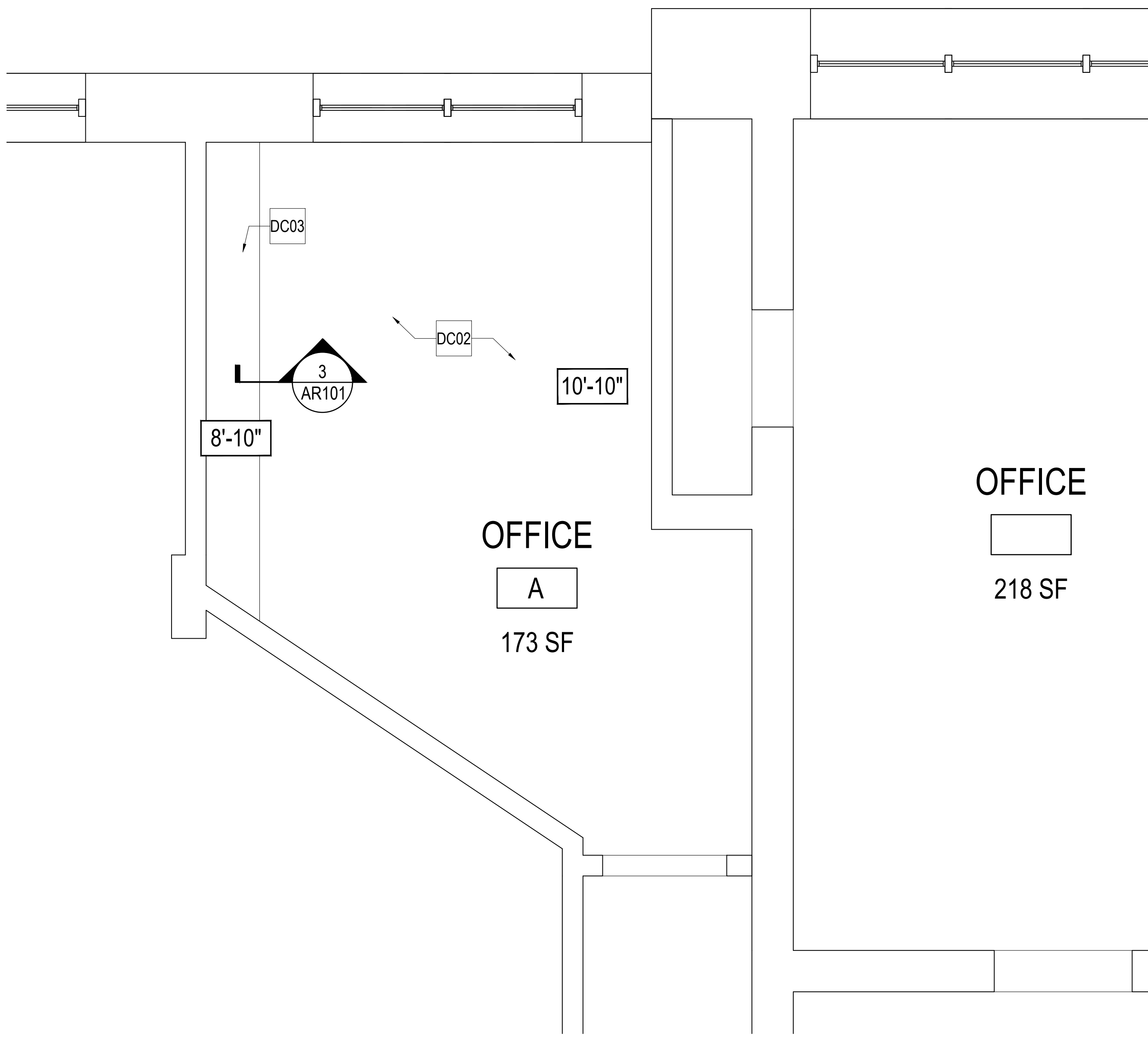
7-15-2026

|             |             |                      |
|-------------|-------------|----------------------|
| DRAWN<br>AG | CHKD<br>TAD | PROJECT NO.<br>26070 |
|-------------|-------------|----------------------|

SHEET NO.

**AR100**

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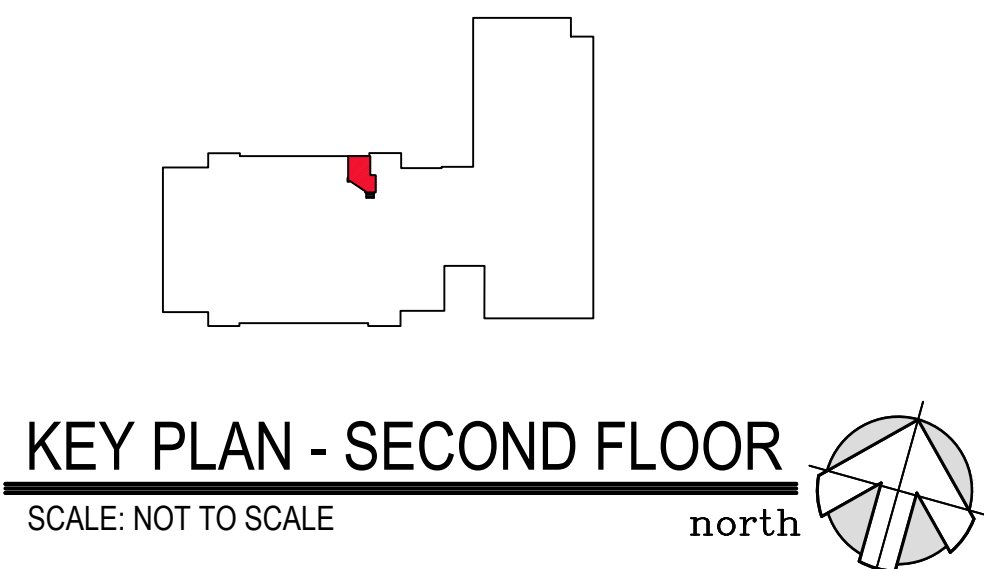
2 PARTIAL BASEMENT REFLECTED CEILING PLAN - DEMOLITION  
AR101 SCALE: 1/2" = 1'-0"



## CONSTRUCTION CEILING NOTES

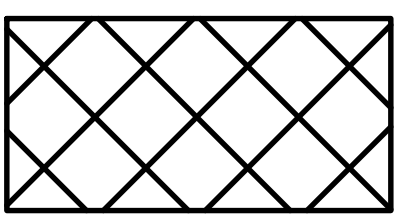
|      |                                                                                                                                                   |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| DC01 | REMOVE AND DISPOSE OF LIGHT FIXTURES. RE: ELECTRICAL DWGS.                                                                                        |
| DC02 | SCRAPE, REMOVE AND DISPOSE OF LOOSE PLASTER TO SOUND MATERIAL.                                                                                    |
| DC03 | PATCH, REPAIR, AND PREP ALL EXISTING CEILING SOFFIT SURFACES TO RECEIVE FINISH;<br>PROVIDE NEW PAINT FINISH WHERE INDICATED. SEE FINISH SCHEDULE. |

|      |                                                                                                                                                    |
|------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| C-01 | INSTALL NEW ACOUSTICAL CEILING TILE SYSTEM INCLUDING SUSPENDED GRID, TILES, AND ALL NECESSARY HANGERS AND ACCESSORIES; SEE RCP FOR CEILING HEIGHT. |
| C-02 | MODIFY EXISTING SPRINKLER HEAD LOCATIONS TO ALIGN WITH NEW ACT CEILING GRID; MAINRAIN CODE-COMPLIANT COVERAGE.                                     |
| C-03 | PRIME AND PAINT EXISTING DUCT WORK. SEE FINISH SCHEDULE.                                                                                           |
| C-04 | RELOCATE EXISTING SPRINKLER HEADS INTO NEW ACT CEILING SYSTEM.                                                                                     |
| C-05 | PRIME AND PAINT EXISTING CEILING SOFFIT. SEE FINISH SCHEDULE.                                                                                      |





8/4/2026 3:20 PM



LVT-1

## FINISH LEGEND

~~OFFICE~~

~~A~~~~173 SF~~

OFFICE

11

218 SF

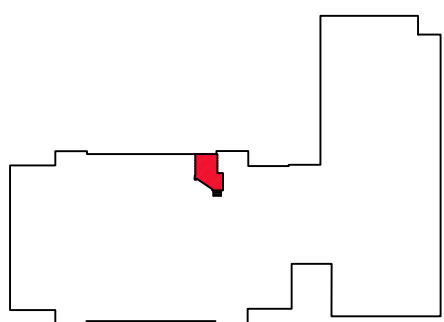
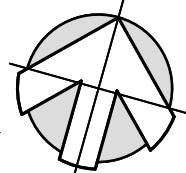
1

A-201

## PARTIAL SECOND FLOOR FINISH PLAN

SCALE: 1/2" = 1'-0"

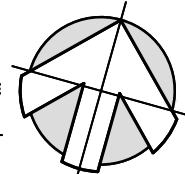
north



## KEY PLAN - SECOND FLOOR

SCALE: NOT TO SCALE

north



Website: [www.StudioJAED.com](http://www.StudioJAED.com)  
Email: [info@StudioJAED.com](mailto:info@StudioJAED.com)

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CAMDEN, DELAWARE 19934  
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- 42 WEYBOSSETT STREET, STE 403  
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DATE OF SIGNATURE: \_\_\_\_\_  
DATE OF REGISTRATION EXPIRATION: \_\_\_\_\_

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ADMINISTRATION AS DEFINED IN 24 DEL.C. §303(C)

**ARCHITECT / ENGINEER SEAL**

PROVIDENCE PUBLIC  
 SCHOOL DEPARTMENT  
 LILLIAN FEINSTEIN ELEMENTARY SCHOOL

## ART ROOM & OFFICE RENNOVATION

159 SACKETT STREET  
PROVIDENCE, RI, 02905

PROJECT

## REVISIONS

[illegible]

SHEET TITLE

### PARTIAL SECOND FLOOR FINISH PLAN

ISSUE

FOR  
CONSTRUCTION

7-15-2020

|       |      |             |
|-------|------|-------------|
| DRAWN | CHKD | PROJECT NO. |
| -     | TAD  | 26070       |

SHEET NO.

# A-201

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1. ALL NEW SUPPLY AIR DIFFUSERS AND RETURN AIR TRANSFERS SHALL BE EQUIPPED W/ MGR. SUPPLIED VOLUME DAMPERS.

2. FIRE DAMPERS SHALL BE PLACED IN ALL DUCT OR REGISTER AIR PENETRATIONS OF ALL FIRE RATED PARTITIONS. SEE ARCHITECTURAL DRAWINGS FOR FIRE RATED PARTITIONS. PROVIDE LABELED ACCESS DOORS AS NEEDED. FIRE DAMPERS AND INSTALLATION ARE TO BE IN ACCORDANCE WITH CURRENT EDITION OF THE INTERNATIONAL MECHANICAL CODE.

3. DUCT SMOKE DETECTORS ARE TO BE SUPPLIED AND INSTALLED WHERE SHOWN IN ACCORDANCE WITH NFPA 72. ACCESS SHALL BE PROVIDED TO SMOKE DETECTORS FOR INSPECTION AND MAINTENANCE. ELECTRICAL CONTRACTOR SHALL MAKE APPROPRIATE AND REQUIRED ELECTRICAL CONNECTIONS TO THE DUCT SMOKE DETECTORS AS SPECIFIED AND REQUIRED FOR PROPER OPERATION. DUCT SMOKE DETECTORS SHALL DE-ENERGIZE THE AIR HANDLING UNIT, OR EXHAUST FAN, THAT THEY ARE ASSOCIATED WITH AND ACTIVATE A VISIBLE AND AUDIBLE SUPERVISORY SIGNAL IN THE BUILDING'S FIRE PROTECTIVE SIGNALING SYSTEM AT A CONSTANTLY ATTENDED LOCATION. ANY SYSTEM THAT IS DE-ENERGIZED BY THE ALARM SHALL NOT RESTART EXCEPT BY MANUAL RESET ON THE UNIT R THROUGH THE BAC SYSTEM. SMOKE DETECTORS SHALL COMPLY WITH THE CURRENT EDITION MECHANICAL CODE IN ENTIRETY.

4. PIPES, BUS DUCTS, CABLES, WIRES, AIR DUCTS AND SIMILAR BUILDING SERVICE EQUIPMENT THAT PASS THROUGH SMOKE PARTITIONS SHALL BE PROTECTED AS STATED IN NFPA 101 CHAPTER 8.6. THE SPACE BETWEEN THE PENETRATING PIPE OR DUCT AND THE SMOKE BARRIER SHALL:

A. BE FILLED WITH A MATERIAL CAPABLE OF MAINTAINING THE SMOKE-RESISTANCE OF THE SMOKE BARRIER OR

B. BE PROTECTED BY AN APPROVED DEVICE DESIGNED FOR THE SPECIFIC PURPOSE.

5. INSULATION AND COVERINGS FOR PIPES AND DUCTS SHALL NOT PASS THROUGH FIRE BARRIERS UNLESS ONE OF THESE REQUIREMENTS IS MET. CONTRACTOR IS RESPONSIBLE FOR CHOOSING WHICH ALTERNATIVE TO USE UNLESS OTHERWISE SPECIFIED IN THE DRAWINGS OR SPECIFICATIONS.

6. INSULATE ALL NEW DUCTWORK AND EQUIPMENT, AS SPECIFIED UNLESS OTHERWISE NOTED. ALL NON-FLEXIBLE DUCTWORK SHALL BE METAL. DUCTBOARD IS PROHIBITED.

7. PROVIDE AND INSTALL ALL GAUGES AND METERS AS SHOWN AND SPECIFIED.

8. MFG'S OF ALL COILS SHALL ENSURE THAT THE COILS ARE CLEAN AND FREE OF ANY RESIDUE FROM THE MANUFACTURING AND SHIPPING PROCESS. IF COILS ARE FOUND TO BE DIRTY OR WATER WHEN HOT WATER IS PROVIDED TO THEM, THE CONTRACTOR WILL BE RESPONSIBLE FOR CLEANING OF THE COILS, AS WELL AS, SMOKEING THE BUILDING FROM SMOKE, COIL EMANATIONS, OR VAPORS.

9. ALL DUCTS SHALL BE CONNECTED TO AIR OUTLETS, AIR INLETS, AND AIR HANDLING DEVICES TO PROVIDE A COMPLETE DUCTWORK SYSTEM. FOR CONNECTION TO TAIL OUTLETS UP TO 15 FEET OF FLEX DUCT SHALL BE USED WHERE CONCEALED FROM OCCUPANT VIEW. CONTRACTOR IS RESPONSIBLE FOR PROVIDING ALL TRANSITIONS TO ENSURE PROPER AND ADEQUATE CONNECTIONS OF ALL DUCTWORK TO ALL AIR INLETS, OUTLETS, AIR HANDLING DEVICES AND AIR TERMINAL DEVICES. DUCTWORK IS TO BE COORDINATED WITH TRANSFER AIR OPENINGS AND ROOF TRUSS SYSTEM, OR STRUCTURAL STEEL.

10. THE RETURN AIRFLOWS INDICATED ON THE PLANS CORRESPOND TO THE OCCUPIED MODE WITH MINIMUM OUTSIDE AIR BEING SUPPLIED. THE BALANCE REPORT IS TO INDICATE THESE AIRFLOWS IN THIS MODE OF OPERATION.

11. GRAVITY VENTILATORS, ROOF EXHAUSTERS AND ASSOCIATED DUCTWORK CONNECTIONS ARE TO BE COORDINATED WITH BUILDING STRUCTURAL COMPONENTS.

12. HVAC EQUIPMENT SHALL BE FURNISHED WITH A MOTOR STARTER SUITABLE FOR THE OFF-ON CONTROL OF THE MOTOR BY A REMOTE THERMOSTAT OR BAS CONTACT. THESE STARTERS SHALL COMPLY WITH NATIONAL ELECTRIC CODE.

13. ALL AIR HANDLING UNITS ARE TO BE INSTALLED TO PROVIDE ADEQUATE, UNOBSTRUCTED, ACCESS AND CLEARANCE FOR AIR FILTER REPLACEMENT.

14. ALL MOTORS FURNISHED AND INSTALLED BY THE MECHANICAL CONTRACTOR (OR A MECHANICAL SUBCONTRACTOR) SHALL BE PROTECTED AGAINST OVERLOAD IN ACCORDANCE WITH N.E.C. ARTICLE 430, SECTION C.

15. WHERE DEMOLISHING AND REMOVING UV'S, REMOVE ASSOCIATED LOUVER. CONTRACTOR MUST PATCH AND PAINT TO MATCH EXISTING SURROUNDINGS.

16. VENTS AND PLUMBING VENTS SHALL BE LOCATED A MINIMUM OF 10' FROM ANY INTAKE AIR OPENING.

17. MECHANICAL EQUIPMENT AND DEVICES SHALL OPERATE WITHOUT OBJECTIONABLE NOISE AND VIBRATION BEING TRANSMITTED TO OCCUPIED PORTIONS OF THE BUILDING OR ANY PART OF THE BUILDING STRUCTURE BY APPARATUS, PIPING, DUCTWORK, CONDUCITS, OR OTHER PARTS OF THE MECHANICAL SYSTEM. SECURE AND BRACE ALL PIPING AND DUCTWORK. PROVIDE FLEXIBLE CONNECTIONS, VIBRATION ISOLATORS, OR OTHER DEVICES WHERE INDICATED OR REQUIRED TO PREVENT THE TRANSMISSION OF NOISE AND VIBRATION TO THE BUILDING. NC LEVEL IS 35.

18. ALL NEW CEILING MOUNTED AIR INLETS AND AIR OUTLETS ARE TO BE COORDINATED WITH LIGHTING. A NEAT, SYMMETRICAL INSTALLATION IS TO BE MAINTAINED, WITH CEILING MOUNTED AIR INLETS/OUTLETS IN PROXIMITY TO LOCATIONS SHOWN ON THE PLANS. IN THE CASE THAT THERE IS A CONFLICT, THE LOCATION OF THE LIGHTING WILL TAKE PRIORITY AND THE INLETS/OUTLET SHALL BE RELOCATED AS CLOSE AS POSSIBLE. DUCTWORK SHOP DRAWINGS ARE TO SHOW PLACEMENT OF AIR INLETS/OUTLETS WITH LIGHTING OVERHEAD ON THE SAME PLAN. CONTRACTORS ARE TO USE REFLECTED CEILING PLAN AS BASIS FOR COORDINATION.

19. THE CONTRACTOR SHALL PROVIDE ALL WALL AND ROOF PENETRATIONS REQUIRED FOR DUCT ROUTING. THE CONTRACTOR SHALL PATCH AND PAINT ALL PENETRATIONS LEFT BY DEMOLITION WORK AND BY CLEARANCE OPENINGS THAT REMAIN AFTER NEW DUCT INSTALLATIONS.

20. NOTIFY THE OWNER IN THE EVENT ANY EXISTING HAZARDOUS MATERIALS, SUCH AS ASBESTOS, PCB'S, LEAD, ETC., ARE ENCOUNTERED ON THE PROJECT. THE CONTRACTOR SHALL NOTIFY THE OWNER IMMEDIATELY BY IDENTIFICATION, TESTING, REMOVAL, HANDLING AND PROTECTION AGAINST EXPOSURE OR ENVIRONMENTAL POLLUTION, TO COMPLY WITH APPLICABLE REGULATIONS, LAWS AND ORDINANCES.

21. ALL THERMOSTATS SHOWN ON HVAC PLANS ARE TO BE MOUNTED 4" OF MAXIMUM AFF (TOP OF UNIT), UNLESS NOTED OTHERWISE. CONTRACTOR IS RESPONSIBLE FOR MOUNTING & WIRING ALL THERMOSTATS. PLENUM RATED CABLES MUST BE USED.

22. VARIABLE FREQUENCY DRIVES (VFD) SHALL BE CONSIDERED SYNCHRONOUS WITH ADJUSTABLE FREQUENCY DRIVES (AFD).

23. THE CONTRACTOR SHALL PROVIDE RADIIUSED ELBOWS OR SQUARE THROAT ELBOWS WITH VANES FOR ALL DUCTWORK CHANGES IN DIRECTION. PER SMACNA HVAC DUCT CONSTRUCTION STANDARDS METAL AND FLEXIBLE. SQUARE THROAT ELBOWS WITHOUT VANES AND MITERED ELBOWS ARE NOT PERMITTED.

24. ALL BLOWER COILS UNITS ARE TO HAVE 24" MINIMAL CLEARANCE ON ACCESS SIDE COORDINATE UNIT SUSPENSION WITH STRUCTURE.

25. ALL GAWG TOILET ROOM DOORS ARE TO BE UNDERCUT TO PROVIDE 0.75" CLEARANCE BETWEEN BOTTOM OF DOOR AND FINISHED FLOOR.

26. HANG ALL CEILING MOUNTED UNITS HIGH TO ALLOW FOR CONDENSATE TRAPPING AND GRAVITY VENTS.

27. ALL QUANTITIES TO BE VERIFIED BY CONTRACTOR.

28. PRIOR TO SUBMITTING BID, THE CONTRACTOR SHALL VISIT THE SITE AND BE THOROUGHLY FAMILIAR WITH THE EXISTING CONDITIONS AND PROPOSED CONSTRUCTION. CONTRACTOR SHALL INCLUDE IN THEIR BID ALL MATERIALS, LABOR AND ALL INCIDENTALS FOR A COMPLETE INSTALLATION WHETHER SPECIFICALLY INDICATED OR NOT. ALL ERRORS, DISCREPANCIES AND MISSED ITEMS SHALL BE BROUGHT TO THE ATTENTION OF THE ENGINEER DURING THE BIDDING PROCESS BY THE CONTRACTOR. THESE ITEMS SHALL BE INCLUDED IN THE BID PRICE. NO EXTRA COST WILL BE ALLOWED FOR ANY DISCREPANCY WHICH COULD HAVE BEEN NOTICED AT THE SITE BY THE CONTRACTOR.

29. INSTALL ALL EQUIPMENT AND MATERIALS PER MANUFACTURER'S WRITTEN INSTRUCTION.

30. THE CONTRACTOR SHALL BE RESPONSIBLE FOR ALL ADDITIONAL COSTS INCURRED AS A RESULT OF SUBSTITUTIONS OR DEVIATIONS FROM THE BASIS OF DESIGN SHOWN ON THESE DRAWINGS.

31. CONTROLS ARE TO BE EXTENDED TO ALL EXISTING, REUSED MECHANICAL EQUIPMENT, INCLUDING EXISTING UNIT VENTILATORS AND EXHAUST FANS. THESE ARE TO BE TIED INTO AND CONTROLLED BY THE NEW BAS SYSTEM.

32. CONTRACTOR IS RESPONSIBLE FOR PROVIDING TRANSITIONS AND FLEXIBLE CONNECTIONS BETWEEN ALL UNITS AND SUPPLY, RETURN, OR OUTSIDE AIR DUCTS.

33. CONTRACTOR SHALL PROVIDE NEW DANFOSS OR APPROVED EQUAL VALVES FOR ALL HEAT ONLY COILS.

34. CONTRACTOR SHALL VERIFY THAT ALL EXISTING EQUIPMENT TO BE REUSED IS IN WORKING ORDER.

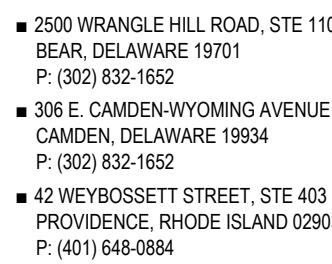
35. INSTALL REMOTE EMERGENCY SHUTDOWN SWITCH FOR BOILERS ADJACENT TO EACH BOILER ROOM DOOR.

|  |                                        |
|--|----------------------------------------|
|  | EXISTING DUCTWORK OR EQUIPMENT         |
|  | ROUND RETURN OR EXHAUST AIR DOWN       |
|  | ROUND SUPPLY AIR DOWN                  |
|  | ROUND RETURN OR EXHAUST AIR UP         |
|  | ROUND SUPPLY AIR UP                    |
|  | RECTANGULAR RETURN OR EXHAUST AIR DOWN |
|  | RECTANGULAR SUPPLY AIR DOWN            |
|  | RECTANGULAR RETURN OR EXHAUST AIR UP   |
|  | RECTANGULAR SUPPLY AIR UP              |
|  | NEW FLEX DUCTWORK                      |
|  | CEILING MOUNTED SUPPLY AIR DIFFUSER    |
|  | SIDE-WALL MOUNTED SUPPLY AIR DIFFUSER  |
|  | CEILING MOUNTED RETURN AIR REGISTER    |
|  | SIDE-WALL MOUNTED RETURN AIR REGISTER  |
|  | VOLUME DAMPER                          |
|  | MOTOR OPERATED DAMPER                  |
|  | FIRE DAMPER                            |
|  | SMOKE DAMPER                           |
|  | COUNTER BALANCED BACKDRAFT DAMPER      |
|  | THERMOSTAT                             |
|  | DUCT SMOKE DETECTOR                    |
|  | EXTENT OF WORK                         |
|  | OPEN END DUCT                          |
|  | GRAVITY VENTILATOR                     |
|  | AIR HANDLING UNIT                      |
|  | FAN COIL AIR HANDLING UNIT             |
|  | BLOWER COIL AIR HANDLING UNIT          |
|  | SIDE-WALL FAN                          |
|  | UNIT VENTILATOR                        |
|  | UNIT HEATER                            |
|  | CABINET HEATER                         |
|  | DEHUMIDIFIER                           |
|  | CONVECTOR UNIT                         |
|  | FIN TUBE RADIANT HEATING               |
|  | VARIABLE AIR VOLUME BOX                |
|  | WATER COOLED CHILLER                   |
|  | CAST IRON BOILER                       |

1. INSTALL ALL GAUGES AND METERS AS SHOWN ON DRAWINGS AND AS SPECIFIED.
2. INSULATE ALL PIPING AS SPECIFIED.
3. UNLESS OTHERWISE SHOWN OR SPECIFIED, ALL CONDENSATE DRAINS FROM ALL HVAC UNITS SHALL BE TRAPPED AND PIPED THROUGH THE BUILDING AND DRAINED THROUGH THE EXTERIOR WALL OF THE BUILDING AT A HEIGHT NOT TO EXCEED 18" ABOVE GRADE. PIPE SIZES SHALL MATCH SIZE OF DRAIN CONNECTION AT A MINIMUM. UNID DRAINS SHALL NOT BE GANGED TOGETHER UNLESS APPROVED BY ARCHITECT/ENGINEER. UNLESS OTHERWISE SHOWN OR STATED, CONDENSATE PIPING SHALL NOT BE EXPOSED.
4. ALL FLOOR PENETRATIONS SHALL BE SLEEVED AND SEALED AS SPECIFIED.
5. THE CONTRACTOR IS RESPONSIBLE FOR ALL NEW PIPING PENETRATIONS IN WALLS AND FLOORS. THE PIPING PLANS DO NOT SPECIFICALLY NOTE WHERE PIPING PENETRATES WALLS AND FLOORS. IT IS THE CONTRACTOR'S RESPONSIBILITY PRIOR TO BIDDING TO STUDY THE PLANS AND IF NECESSARY EVALUATE THE SITE, TO ACCOUNT FOR ALL PIPING PENETRATIONS OF THE EXISTING STRUCTURE.
6. THE CONTRACTOR SHALL PROVIDE NEW SUPPORTS OF COMPATIBLE MATERIAL FOR ALL NEW PIPING.
7. PROVIDE NEW DUAL TEMPERATURE WATER SUPPLY AND RETURN PIPING SYSTEM, TO THE EXTENT SPECIFIED AND SHOWN ON CONTRACT DRAWINGS.
8. PROVIDE CHILLED WATER SUPPLY AND RETURN SYSTEM. DOMESTIC WATER DISTRIBUTION SYSTEM, DOMESTIC HOT WATER SUPPLY AND RETURN SYSTEM TO THE EXTENT SHOWN ON PLAN DRAWINGS AND IN DETAILS.
9. ALL CONTROL VALVES TO BE INSTALLED OVER DRAIN PANS IN HVAC UNITS.
10. ALL PIPING SHALL BE SIZED AS CALLED OUT ON DRAWINGS, AND MAY NOT BE DOWN SIZED BETWEEN CONTROL VALVE AND COIL.
11. ALL GAS PIPING IS TO BE INSTALLED PER NFPA 54, AND ALL LOCAL AND NATIONAL CODES.
12. BEFORE ANY SYSTEM OF GAS PIPING IS FINALLY PUT IN SERVICE, IT SHALL BE TESTED TO ENSURE THAT IT IS GAS TIGHT. TO TEST FOR TIGHTNESS, THE PIPING SHALL BE FILLED WITH AIR OR AN INERT GAS, BUT NOT WITH ANY OTHER GAS OR LIQUID. TESTING, INSPECTION AND PURGING OF GAS PIPING SYSTEMS SHALL COMPLY WITH NFPA 54.
13. GAS PIPING ROUTED AT GROUND LEVEL IS TO SIT IN PIPING SADDLES, AND NOT TO BE IN CONTACT WITH CONCRETE OR GROUND.
14. PROVIDE REDUCERS, FITTINGS, AND CONNECTORS TO EQUIPMENT FOR A COMPLETE GAS PIPING INSTALLATION. FITTINGS, JOINTS AND CONNECTIONS SHALL BE OF AN APPROVED TYPE FOR GAS PIPING SYSTEMS.
15. ALL NEW EXPOSED PIPING IN ENCLOSURE AREAS SHALL BE ENCLOSED IN CUSTOM FIN TUBE ENCLOSURES OF 14 GA. STEEL. ENCLOSURE SHALL BE BY VULCAN, SHAW-PERKINS, OR TRANE COMPANY. UNITS SHALL BE PAINTED. COLOR SHALL BE SELECTED BY ARCHITECT.
16. PROVIDE AIR VENTS AT ALL HIGH POINTS IN SYSTEM. PROVIDE DRAIN VALVES AT ALL LOW POINTS IN SYSTEM.
17. PROVIDE ISOLATION VALVES AT ALL BRANCH PIPING TAKEOFFS.
18. COORDINATE INSTALLATION OF ALL NEW PIPING WITH EXISTING FIRE PROTECTION PIPING, CONDUIT, EXHAUST/RELIEF DUCT WORK, AND STRUCTURE.
19. PROVIDE SPLASH BLOCKS FOR ALL CONDENSATE DRAINS.
20. FOR CONDENSATE DRAIN PIPING RUNS LONGER THAN 50 FEET, PROVIDE A REMOVABLE PLUG AT A CHANGE OF DIRECTION EVERY 50 FT.

|                                                                                                                                                                                                                                                                            |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
|                                                                                                                                                                                         | HYDRONIC PIPING                                     |
|                                                                                                                                                                                         | EXISTING HYDRONIC PIPING                            |
|                                                                                                                                                                                         | CONDENSATE PIPING                                   |
|                                                                                                                                                                                         | SHUTOFF VALVE                                       |
|                                                                                                                                                                                         | BALANCING VALVE                                     |
|                                                                                                                                                                                         | CHECK VALVE                                         |
|                                                                                                                                                                                         | ATC 2-WAY CONTROL VALVE                             |
|                                                                                                                                                                                         | STRAINER                                            |
|                                                                                                                                                                                         | FLOW METER FITTING                                  |
|                                                                                                                                                                                         | BAC TEMP SENSOR TO BE CONNECTED TO BAC SYSTEM       |
|  | AUTOLOW 3/4" FLOW LIMITING DEVICE OR APPROVED EQUAL |
|                                                                                                                                                                                         | CONDENSATE PUMP SYSTEM                              |
|                                                                                                                                                                                         | AIR SEPARATOR                                       |
|                                                                                                                                                                                         | COMPENSATION TANK                                   |
|                                                                                                                                                                                         | BASE MOUNTED PUMP                                   |
|                                                                                                                                                                                         | IN-LINE PUMP                                        |
|                                                                                                                                                                                         | HOT WATER/ SUPPLY AND RETURN                        |
|                                                                                                                                                                                         | DUAL TEMP/ SUPPLY AND RETURN                        |
|                                                                                                                                                                                         | CONDENSATE DRAIN PIPING                             |
|                                                                                                                                                                                         | CHILLED WATER SUPPLY AND RETURN                     |

|     |                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                          |                                                                                                                                                                                                                                                    |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3.  | ALL DEMOLISHED MECHANICAL UNITS ARE TO BE REMOVED AND TAKEN OFF SITE AND BECOME PROPERTY OF THE CONTRACTOR UNLESS NOTED OTHERWISE.                                                                                                                                                                                                                                                      |      | AIR HANDLING UNIT                                                                                                                                                                                                                                  |
| 2.  | ALL DEMOLISHED DUCTWORK, DIFFUSERS, REGISTERS, GRILLES, INSULATION, AND HANGERS ARE TO BE REMOVED AND TAKEN OFF SITE AND BECOME PROPERTY OF THE CONTRACTOR UNLESS NOTED OTHERWISE.                                                                                                                                                                                                      |     | UNIT VENTILATOR                                                                                                                                                                                                                                    |
| 3.  | ALL DEMOLISHED HEATING SUPPLY AND RETURN PIPING, VALVES, FITTINGS, INSULATION AND HANGERS ARE TO BE REMOVED AND TAKEN OFF SITE AND BECOME PROPERTY OF THE CONTRACTOR UNLESS NOTED OTHERWISE. PIPING THAT IS TO BE ABANDONED IN PLACE SHALL BE CUT AND CAPPED BELOW FLOOR OR WITHIN TRENCH, AND THE OPENING SEALED WITH CONCRETE.                                                        |     | LOUVER                                                                                                                                                                                                                                             |
| 4.  | PROVIDE TEMPORARY COVERS AND CAPS FOR TEMPORARILY EXPOSED EXISTING PIPING, EQUIPMENT AND WALL OPENINGS. TEMPORARY COVERS AND CAPS SHALL BE SUFFICIENT TO ENSURE DIRT, WEATHER AND CONSTRUCTION DEBRIS WILL NOT ENTER ANY SYSTEM OR WALL, ROOF OR FLOOR OPENING.                                                                                                                         |     | SIDE-WALL FAN                                                                                                                                                                                                                                      |
| 5.  | REMOVAL AND DISPOSAL OF GAS PIPING AND GAS FIRED APPLIANCES SHALL BE IN CONFORMANCE WITH NFPA 54.                                                                                                                                                                                                                                                                                       |     | UNIT HEATER                                                                                                                                                                                                                                        |
| 6.  | EXISTING GAS PIPING SHALL FIRST BE DISCONNECTED FROM ALL SOURCES OF GAS AND THEN THOROUGHLY PURGED WITH AIR, WATER, OR INERT GAS BEFORE CUTTING OR WELDING IS DONE.                                                                                                                                                                                                                     |     | CONVECTOR                                                                                                                                                                                                                                          |
| 7.  | WHEN GAS PIPING IS OPENED, THE SECTION TO BE WORKED ON SHALL BE TURNED OFF FROM THE GAS SUPPLY AT THE NEAREST CONVENIENT POINT, AND THE LINE PRESSURE VENTED TO THE OUTDOORS, OR TO VENTILATED AREAS OF SUFFICIENT SIZE TO PREVENT ACCUMULATION OF FLAMMABLE MIXTURES. IF THIS SECTION EXCEEDS 50 FEET OF 2 1/2" PIPING, THE REMAINING GAS PIPING SHALL BE DISPLACED WITH AN INERT GAS. |     | FIN TUBE                                                                                                                                                                                                                                           |
| 8.  | SEE ELECTRICAL PLANS FOR INFORMATION ON WIRING TERMINATION OF DEMO'D EQUIPMENT.                                                                                                                                                                                                                                                                                                         |     | PUMP                                                                                                                                                                                                                                               |
| 9.  | REFER TO ARCHITECTURAL DRAWINGS FOR CEILING DEMOLITION PLAN.                                                                                                                                                                                                                                                                                                                            |     | CABINET UNIT HEATER                                                                                                                                                                                                                                |
| 10. | PATCHING AND PAINTING AT UNIT VENTILATOR, FIN TUBE, UNIT HEATER, AND THERMOSTAT LOCATIONS BY GENERAL TRADES. SEE ARCHITECTURAL DRAWINGS FOR FINISH SCHEDULE.                                                                                                                                                                                                                            | CH  | CHILLER                                                                                                                                                                                                                                            |
| 11. | THE CONTRACTOR SHALL PROVIDE PROTECTION FOR ALL ROOFTOP AND WALL OPENINGS CREATED BY DEMOLITION SUITABLE FOR WITHSTANDING WEATHER CONDITIONS.                                                                                                                                                                                                                                           |     | BOILER                                                                                                                                                                                                                                             |
| 12. | THE CONTRACTOR SHALL PROVIDE FLOOR PROTECTION IN THE GYMNASIUM. ANY DAMAGE TO THE GYMNASIUM FLOOR SHALL BE THE CONTRACTOR'S RESPONSIBILITY, AND REPAIR COSTS SHALL BE BACK CHARGED TO THE CONTRACTOR.                                                                                                                                                                                   |     | GRAVITY VENT                                                                                                                                                                                                                                       |
| 13. | ALL ASBESTOS CONTAINING MATERIALS WILL BE REMOVED BY OTHERS PRIOR TO DEMOLITION.                                                                                                                                                                                                                                                                                                        |     | DUCTWORK                                                                                                                                                                                                                                           |
| 14. | THE INFORMATION SHOWN ON THESE DRAWINGS WAS COMPILED FROM EXISTING DRAWINGS AND SITE VISITS. HOWEVER, THE INFORMATION MAY STILL VARY FROM THE ACTUAL INSTALLATION. CONTRACTOR IS RESPONSIBLE FOR FIELD VERIFICATION FOR DEMOLITION WORK.                                                                                                                                                |     | RE-HEAT COIL                                                                                                                                                                                                                                       |
|     |                                                                                                                                                                                                                                                                                                                                                                                         |     | HYDRONIC SUPPLY AND RETURN PIPING                                                                                                                                                                                                                  |
|     |                                                                                                                                                                                                                                                                                                                                                                                         |     | PIPING ELBOW DOWN                                                                                                                                                                                                                                  |
|     |                                                                                                                                                                                                                                                                                                                                                                                         |     | PIPING ELBOW UP                                                                                                                                                                                                                                    |
|     |                                                                                                                                                                                                                                                                                                                                                                                         |     | DEMOLISH MECHANICAL EQUIPMENT IN HATCHED AREA, INCLUDING ALL RELATED PIPING, INSULATION, VALVES, FITTINGS, DUCTWORK, INSULATION, HANGERS, SUPPORTS, HARDWARE, DEVICES AND INSULATION, ENCLOSURES, MOUNTS, AND WALL LOUVERS UNLESS OTHERWISE NOTED. |



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ART ROOM & OFFICE RENNOVATION

159 SACKETT STREET  
PROVIDENCE, RI 02905

PROJECT

## REVISIONS

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SHEET TITLE

# MECHANICAL COVER SHEET

ISSUE

FOR  
CONSTRUCTION

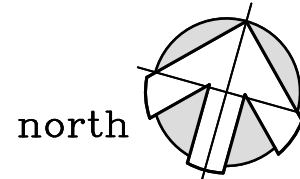
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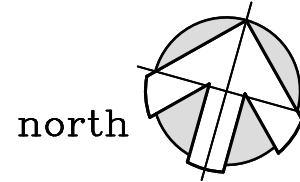
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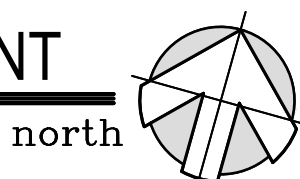
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REQUIREMENTS, AND INDOOR AND OUTDOOR UNITS - SHALL BE BORNE SOLELY BY THE CONTRACTOR.

**CP-1** CONDENSATE DISCHARGE TO EXIT BUILDING AT 18" ABOVE GRADE TO SPLASHBLOCK. SEE ARCHITECTURAL PLANS FOR WALL PENETRATION TYPE

1. ALL CONDENSATE PIPING CONCEALED ABOVE INACCESSIBLE CEILINGS, BEHIND WALLS, OR EXTERIOR TO BUILDING SHALL BE PROVIDED AS COPPER. ALL CONDENSATE PIPING SHALL BE INSULATED.
2. CLEANOUTS SHALL BE PROVIDED IN CONDENSATE PIPING AT EACH CHANGE OF DIRECTION AND AT 50' INTERVALS
3. ALL CONDENSATE PIPING SHALL SLOPE A MINIMUM OF 1/8" / 1'-0"

NOTES: PROVIDE EQUIPMENT AS SCHEDULED OR APPROVED EQUAL. ALL UNITS SHALL HAVE EC MOTOR WITH FAN SPEED CONTROLLER. ALL UNITS TO BE FURNISHED WITH ASPEN MINI WHITE CONDENSATE PUMP. PROVIDE CENTRAL HEAT PUMP CONTROLLER FIELD-LOCATED IN COORDINATION WITH OWNER AND PROVIDE BAGNET GATEWAY FOR POTENTIAL CONNECTION TO EXISTING CAMPI WHITE METASYS BAS BY OTHERS. PROVIDE 7-DAY, 24-HR PROGRAMMABLE THERMOSTAT FOR EACH UNIT WITH LCD DISPLAY AND INDIVIDUAL ZONE CONTROL OF EACH INDOOR UNIT. FURNISH HEAT PUMP WITH MANUFACTURER'S WALL-MOUNT KIT. THE INDOOR UNIT SHALL BE POWERED BY THE OUTDOOR UNIT. SEE ELECTRICAL DRAWINGS.



north

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## REVISIONS

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SHEET TITLE

## MECHANICAL ART ROOM PLAN

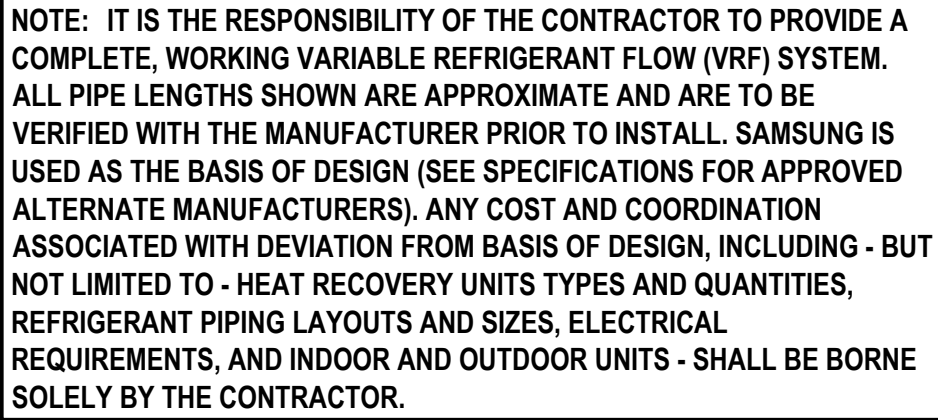
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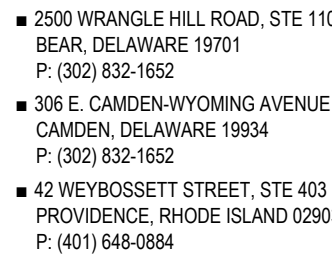
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2. CLEANOUTS SHALL BE PROVIDED IN CONDENSATE PIPING AT EACH CHANGE OF DIRECTION AND AT 50' INTERVALS
3. ALL CONDENSATE PIPING SHALL SLOPE A MINIMUM OF 1/8" / 1'-0"

NOTES: PROVIDE EQUIPMENT AS SCHEDULED OR APPROVED ETC. ALL UNITS SHALL HAVE EC MOTOR WITH FAN SPEED CONTROLLER. ALL UNITS TO BE FURNISHED WITH ASPEN MINI WHITE CONDENSATE PUMP. PROVIDE CENTRAL HEAT PUMP CONTROLLER FIELD-LOCATED IN COORDINATION WITH OWNER AND PROVIDE SACKETT GATEWAY FOR POTENTIAL CONNECTION TO EXISTING CAMPUS-WIDE METEASYS BAS BY OTHERS. PROVIDE 7-DAY, 24-HR PROGRAMMABLE THERMOSTAT FOR EACH UNIT WITH LCD DISPLAY AND INDIVIDUAL ZONE CONTROL OF EACH INDOOR UNIT. FURNISH HEAT PUMP WITH MANUFACTURER'S WALL-MOUNT KIT. THE INDOOR UNIT SHALL BE POWERED BY THE OUTDOOR UNIT, SEE ELECTRICAL DRAWINGS.



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[illegible]

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north



north



SCALE: NOT TO SCALE



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north

north 

north 

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LILLIAN FEINSTEIN ELEMENTARY SCHOOL  
ART ROOM & OFFICE RENOVATION  
159 SACKETT STREET  
PROVIDENCE, RI 02905

PROJECT

#### REVISIONS

| MARK | DESCRIPTION | DATE |
|------|-------------|------|
|      |             |      |
|      |             |      |
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|      |             |      |
|      |             |      |
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|      |             |      |

SHEET TITLE

ELECTRICAL OFFICE  
PLANS

ISSUE

FOR  
CONSTRUCTION  
7-15-2026

|             |            |                      |
|-------------|------------|----------------------|
| DRAWN<br>JD | CHKD<br>JD | PROJECT NO.<br>26070 |
|-------------|------------|----------------------|

SHEET NO.

## E-102

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### EXISTING PANEL

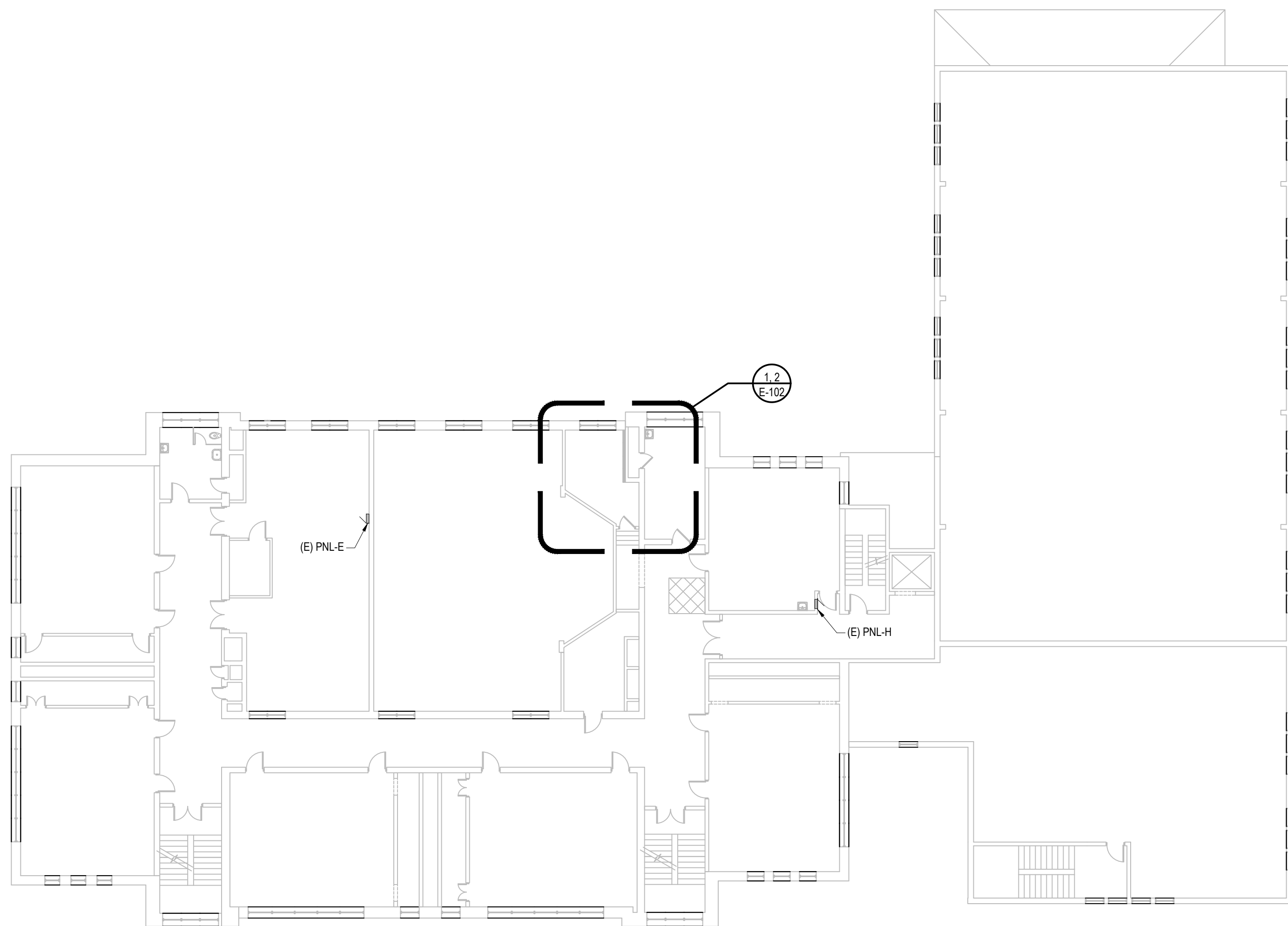
| PANEL: E                       |           | 2ND FLR - LIBRARY |           | VOLTAGE: 240/120V, 1PH, 3W   |             |                 |           |   |
|--------------------------------|-----------|-------------------|-----------|------------------------------|-------------|-----------------|-----------|---|
| LOCATION: 100A                 |           |                   |           | ENCLOSURE: NEMA-1            |             |                 |           |   |
| BUS: MLO                       |           |                   |           | A.I.C. RATINGS: FRANK & ADAM |             |                 |           |   |
| MAIN: MLO                      |           |                   |           | MFR: FRANK & ADAM            |             |                 |           |   |
| ØA<br>kVA                      | ØB<br>kVA | DESCRIPTION       | ØA<br>kVA | ØB<br>kVA                    | DESCRIPTION | ØA<br>kVA       | ØB<br>kVA |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 1           | EXISTING LOAD   | -         |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 2           | EXISTING LOAD   | -         |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 3           | EXISTING LOAD   | -         |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 4           | EXISTING LOAD   | -         |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 5           | EXISTING LOAD   | -         |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 6           | RECEPT - OFFICE | 0.72      |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 6           | SPARE           | -         |   |
| -                              | -         | EXISTING LOAD     | 1         | 20                           | 7           | EXISTING LOAD   | -         |   |
| -                              | -         | SPARE             | 1         | 20                           | 8           | EXISTING LOAD   | -         |   |
| -                              | -         | SPARE             | 1         | 20                           | 9           | SPARE           | -         |   |
| -                              | -         | SPARE             | -         | 10                           | 20          | -               | SPACE     | - |
| CONNECTED LOAD                 |           |                   |           |                              |             |                 |           |   |
| PHASE A: ___ kVA               |           |                   |           |                              |             |                 |           |   |
| PHASE B: ___ kVA               |           |                   |           |                              |             |                 |           |   |
| TOTAL CONNECTED LOAD = ___ kVA |           |                   |           |                              |             |                 |           |   |

\* REUSE EXISTING SPARE CIRCUIT BREAKER AND PROVIDE NEW 2Ø10 • 1Ø10G • 3/4"

\* REUSE EXISTING SPARE CIRCUIT BREAKER AND PROVIDE NEW 2Ø10 • 1Ø12G - 3/4" C.

### EXISTING PANEL

|                                |           |                    |               |                                       |           |           |               |           |           |           |
|--------------------------------|-----------|--------------------|---------------|---------------------------------------|-----------|-----------|---------------|-----------|-----------|-----------|
| PANEL: H                       |           | 2ND FLR - CORRIDOR |               | VOLTAGE: 208Y120V, 3PH, 4W            |           |           |               |           |           |           |
| LOCATION: 125A                 |           |                    |               | ENCLOSURE: NEMA-1                     |           |           |               |           |           |           |
| BUS: MLO                       |           |                    |               | A.I.C. RATINGS: SIEMENS S1C30ML125ATF |           |           |               |           |           |           |
| MAIN: MLO                      |           |                    |               | MFR: MFR                              |           |           |               |           |           |           |
|                                |           |                    |               |                                       |           |           |               |           |           |           |
| ØA<br>kVA                      | ØB<br>kVA | ØC<br>kVA          | DESCRIPTION   | ØA<br>kVA                             | ØB<br>kVA | ØC<br>kVA | DESCRIPTION   | ØA<br>kVA | ØB<br>kVA | ØC<br>kVA |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 1         | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 3         | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 5         | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 7         | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 9         | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 11        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 13        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 15        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 17        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 19        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 21        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 23        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 25        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 27        | EXISTING LOAD | -         | -         | -         |
| -                              | -         | -                  | EXISTING LOAD | 1                                     | 20        | 29        | EXISTING LOAD | -         | -         | -         |
| CONNECTED LOAD                 |           |                    |               |                                       |           |           |               |           |           |           |
| PHASE A: ___ kVA               |           |                    |               |                                       |           |           |               |           |           |           |
| PHASE B: ___ kVA               |           |                    |               |                                       |           |           |               |           |           |           |
| PHASE C: ___ kVA               |           |                    |               |                                       |           |           |               |           |           |           |
| TOTAL CONNECTED LOAD = ___ kVA |           |                    |               |                                       |           |           |               |           |           |           |



3

### OVERALL 2ND FLOOR ELECTRICAL PLAN

SCALE: 1/16" = 1'-0"

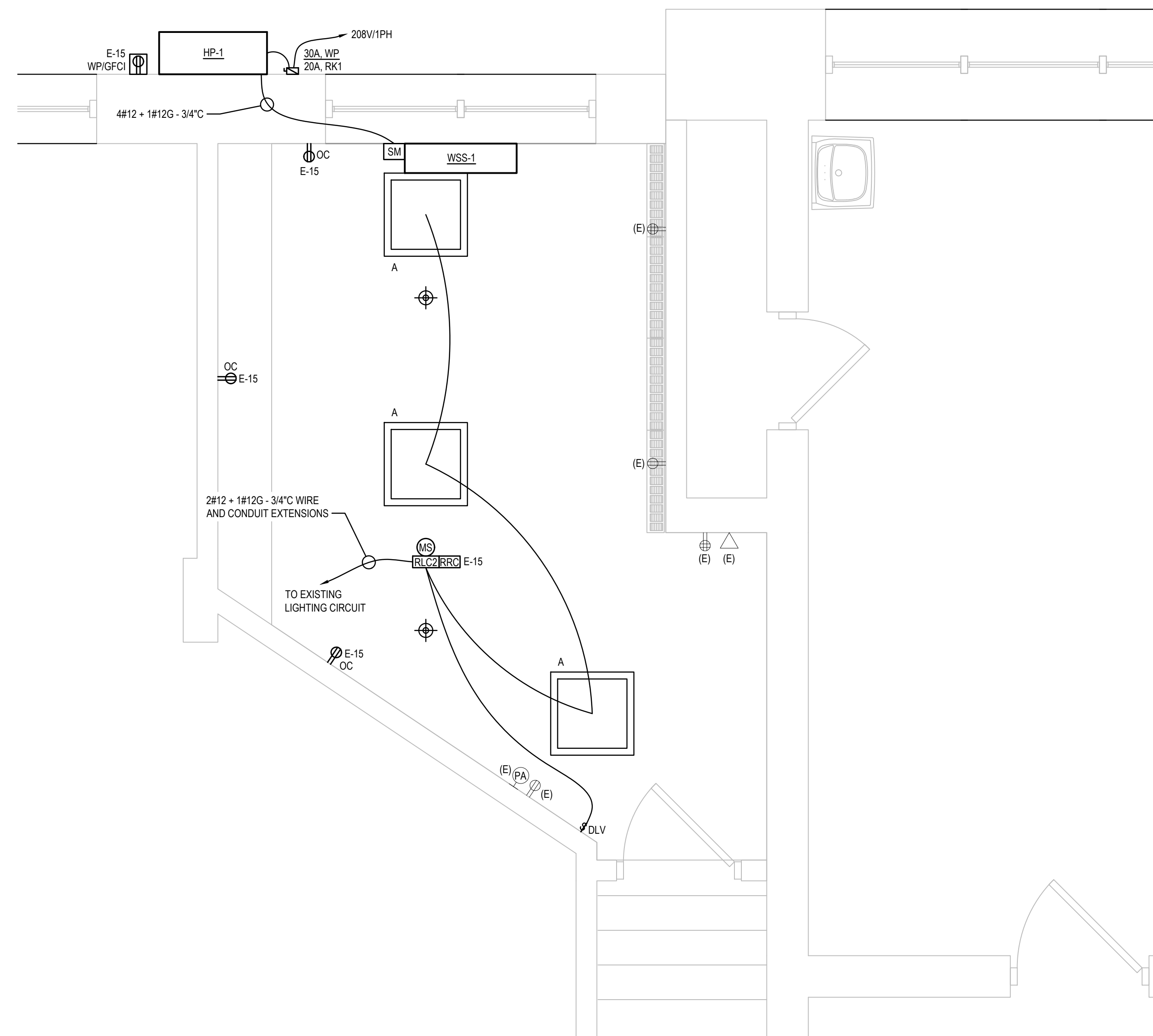
north

1

### OFFICE A ELECTRICAL DEMOLITION PLAN

SCALE: 1/2" = 1'-0"

north



2

### OFFICE A ELECTRICAL PLAN

SCALE: 1/2" = 1'-0"

north

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PROVIDENCE, RI 02905

## REVISIONS

[illegible]

EET TITLE

## ELECTRICAL DETAILS

UE

FOR  
CONSTRUCTION

DRAWN

JD

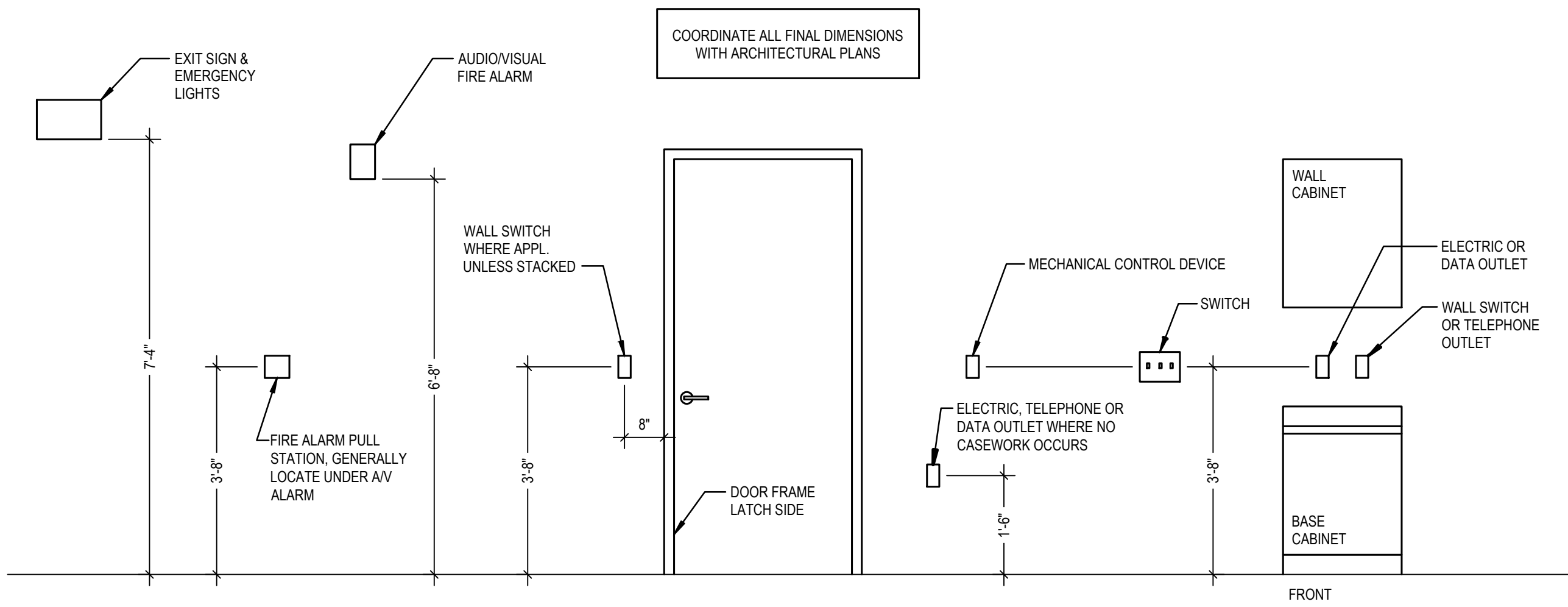
SHEET NO.

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E

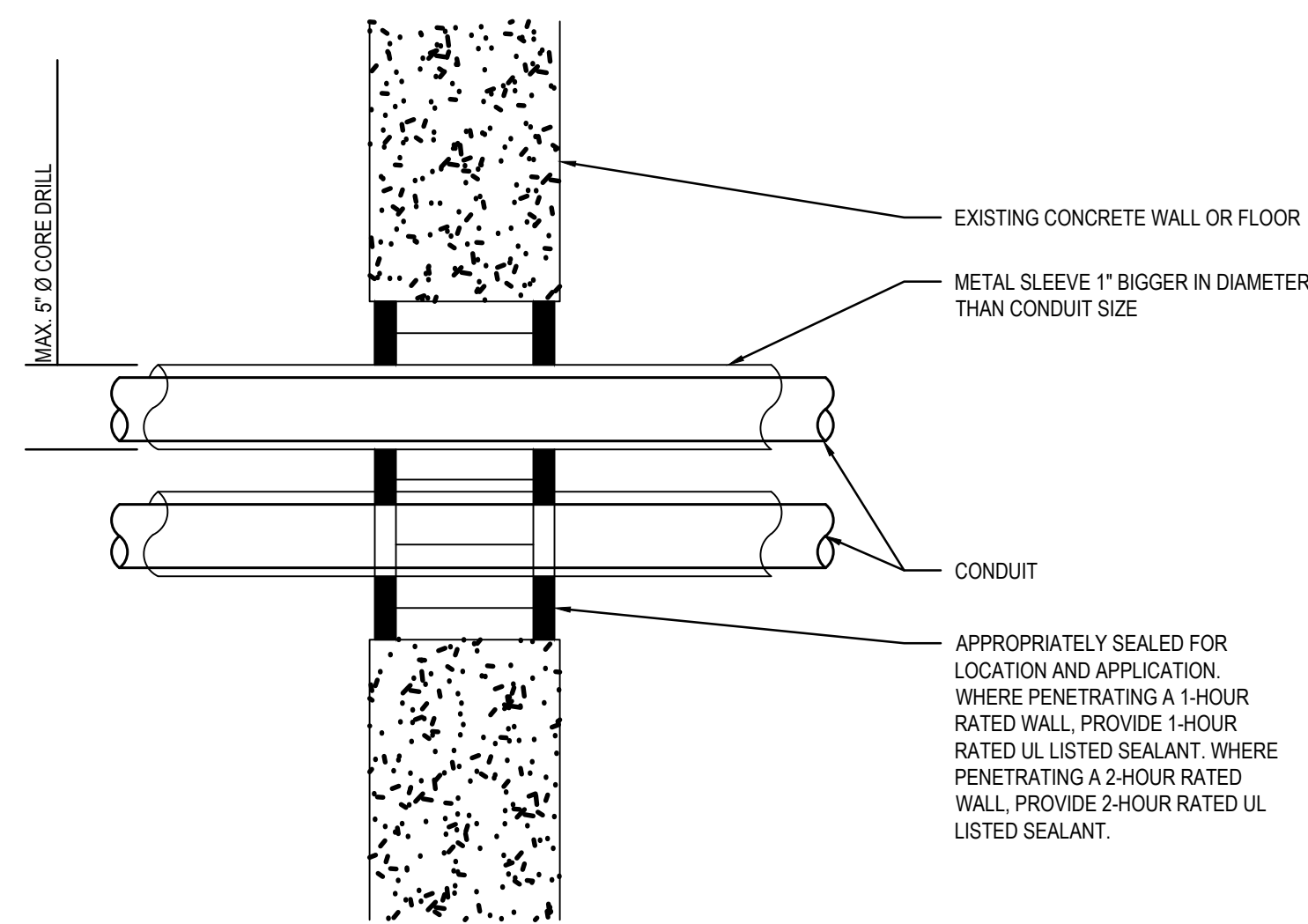
0.312

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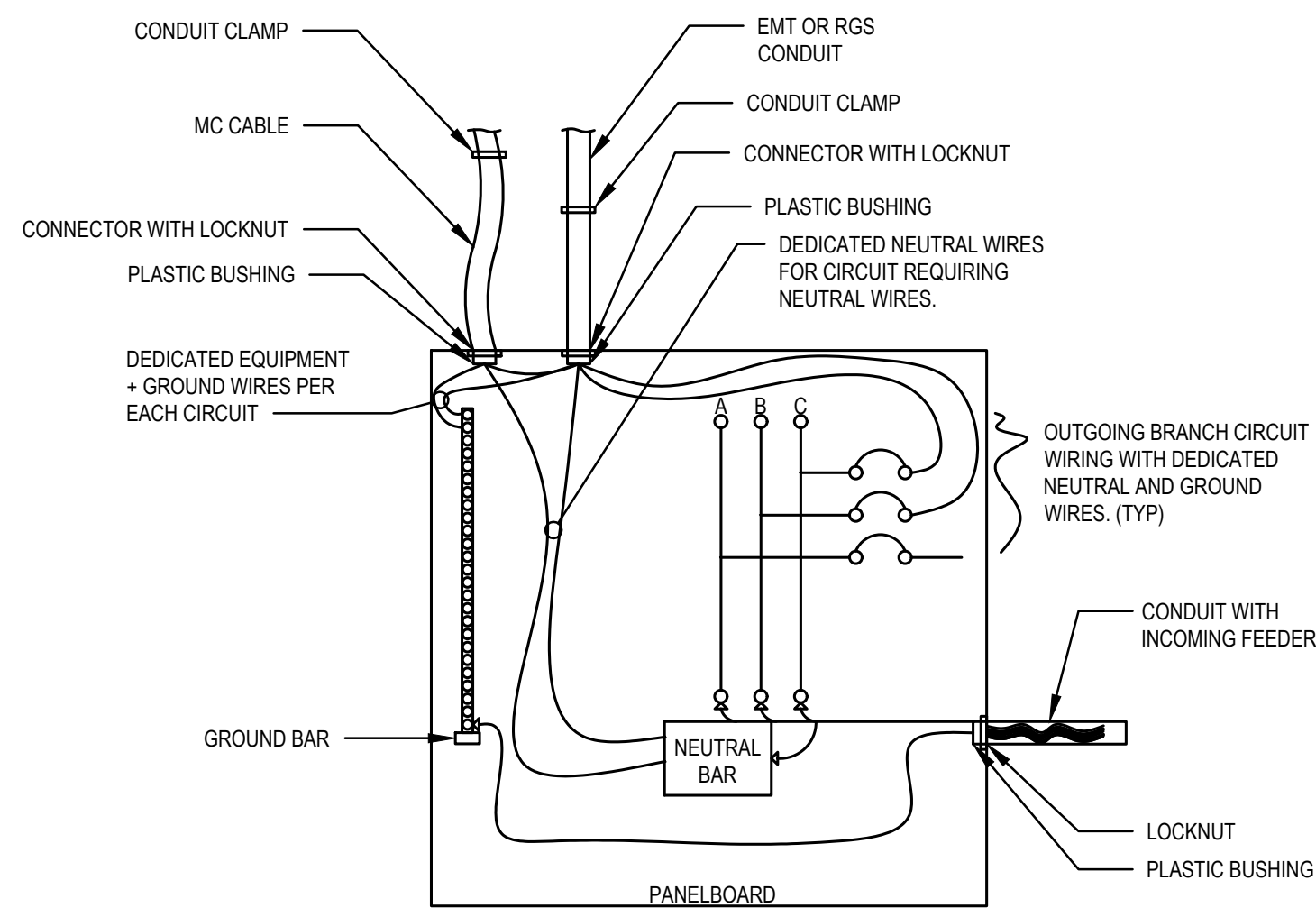
## TYPICAL ELECTRICAL MOUNTING HEIGHTS

SCALE: NOT TO SCALE



## TYPICAL PENETRATION IN WALL OR FLOOR

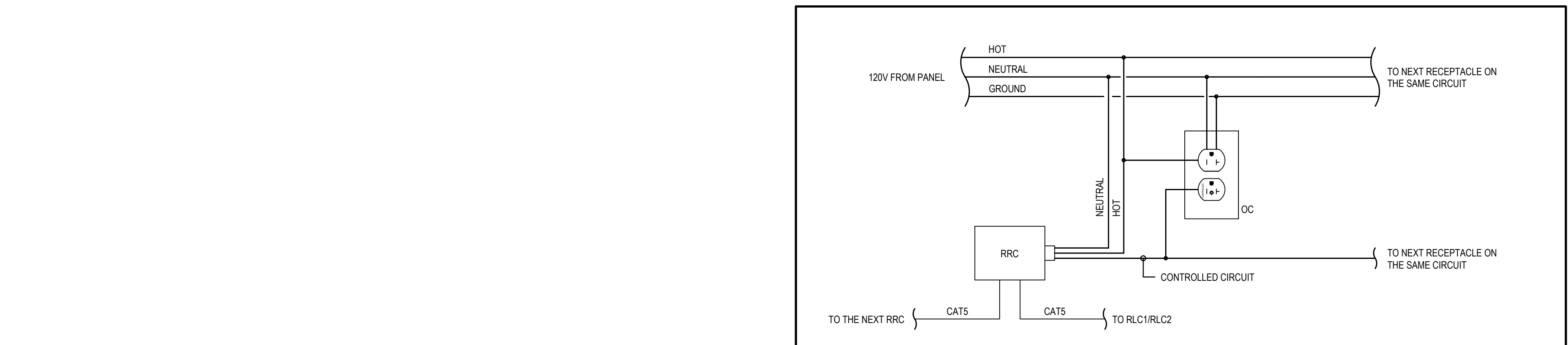
SCALE: NOT TO SCALE



- NOTES: 1. PROVIDE GROUND BAR WITH ADEQUATE TERMINALS FOR EQUIPMENT GROUND WIRES.  
2. DOUBLE LUGGING OF NEUTRAL OR EQUIPMENT GROUND WIRES IS NOT PERMITTED.  
3. NUMBER OF NEUTRAL AND EQUIPMENT GROUND WIRES VARY BY PANEL AND BRANCH CIRCUITS.

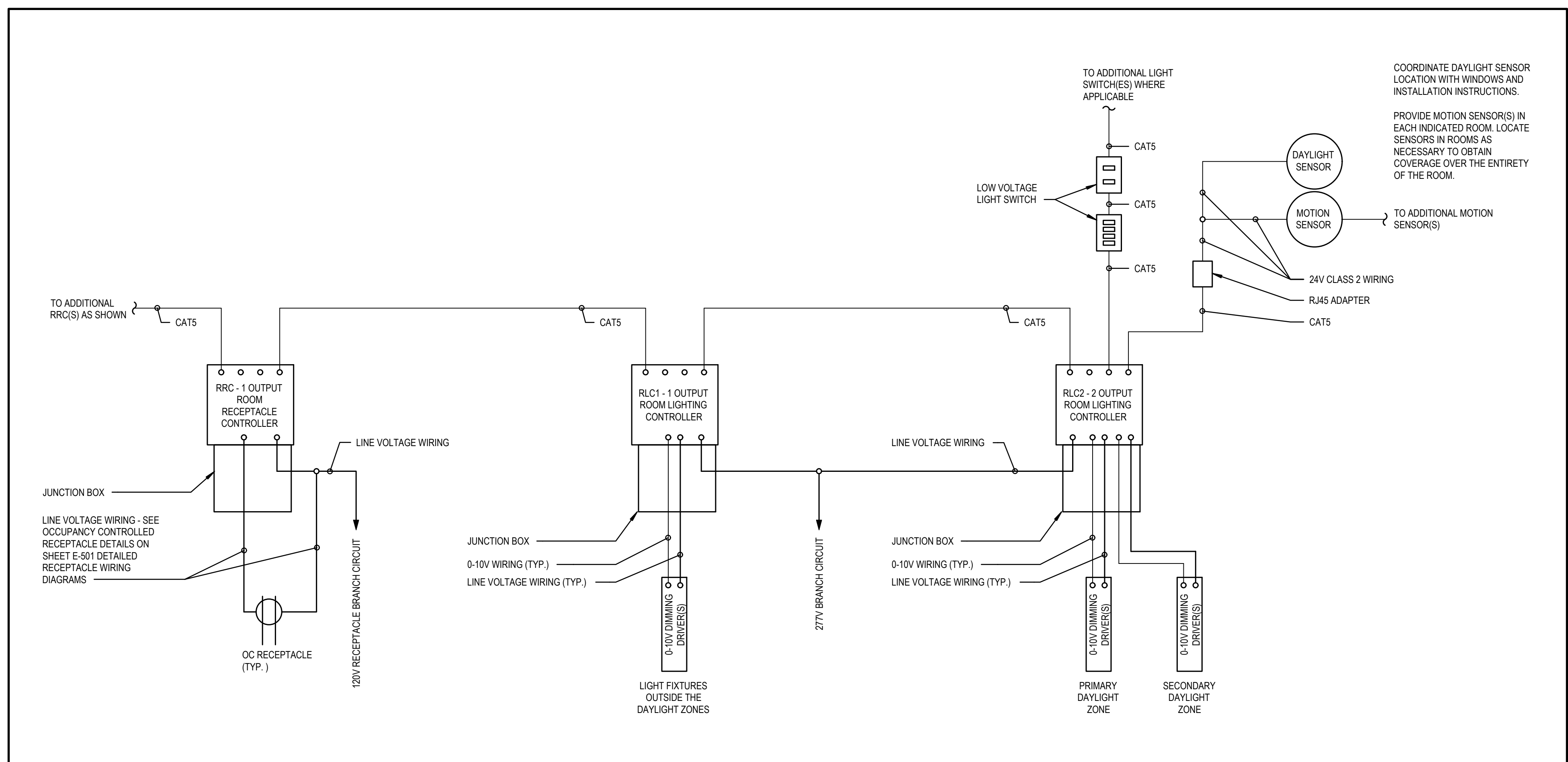
## EQUIPMENT GROUND AND NEUTRAL WIRING IN PANELBOARD (TYP)

SCALE: NOT TO SCALE



## OCCUPANCY CONTROLLED RECEPTACLE DETAIL

SCALE: NOT TO SCALE



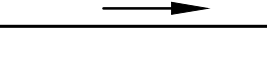
## TYPICAL CLASSROOM LIGHTING AND RECEPTACLE CONTROL WIRING SCHEMATIC

SCALE: NOT TO SCALE

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7/15/2026 10:18 AM

| GENERAL PLUMBING NOTES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. SEE THE ARCHITECTURAL DRAWINGS FOR INFORMATION ON THE SCOPE OF CONSTRUCTION.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 2. COLLECT FIXTURE VENTS IN VENT HEADER ABOVE CEILING AND CONNECT TO CLOSEST EXISTING VTR OR BRANCH VENT (OF THE SAME OR LARGER SIZE).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 3. FOR ALL EQUIPMENT REQUIREMENTS, REFER TO SPECIFICATIONS, PLUMBING SCHEDULE OR DRAWINGS. CONTRACTOR SHALL NOT INSTALL EQUIPMENT/MATERIALS UNTIL SAME IS APPROVED.                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 4. INSTALL WATER HAMMER ARRESTORS IN DOMESTIC WATER PIPING AS REQUIRED PER P.D.I. WH-201 STANDARDS FOR WATER HAMMER ARRESTORS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 5. PROVIDE TRAPS FOR ALL PLUMBING EQUIPMENT CONNECTIONS AND/OR IN ANY SANITARY PIPING AS REQUIRED BY THE APPLICATION.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 6. PRIOR TO SUBMITTING BID, THE CONTRACTOR/BIDDER SHALL VISIT THE SITE AND BE THOROUGHLY FAMILIAR WITH THE EXISTING CONDITIONS AND PROPOSED CONSTRUCTION. CONTRACTOR/BIDDER SHALL INCLUDE IN THEIR BID ALL MATERIALS, LABOR AND ALL INCIDENTALS FOR A COMPLETE INSTALLATION WHETHER SPECIFICALLY INDICATED OR NOT. ALL ERRORS, DISCREPANCIES AND MISSED ITEMS SHALL BE BROUGHT TO THE ATTENTION OF THE ENGINEER DURING THE BIDDING PROCESS BY THE CONTRACTOR/BIDDER. THESE ITEMS SHALL BE INCLUDED IN THE BID PRICE. NO EXTRA COST WILL BE ALLOWED FOR ANY DISCREPANCY WHICH COULD HAVE BEEN NOTICED AT THE SITE BY THE CONTRACTOR/BIDDER. |
| 7. ALL INSTALLATIONS SHALL COMPLY WITH ALL CODES OR REGULATIONS, LOCAL, STATE, OR NATIONAL HAVING JURISDICTION OVER THE PROJECT.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 8. ALL FIXTURES AND PIPING INSTALLATIONS SHALL BE PROPERLY BRACED, RIGIDLY SUPPORTED, AND INSTALLED WITH ADEQUATE VIBRATION ISOLATION AND INSULATION.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 9. PROVIDE ALL LABOR, MATERIALS, AND INSTALLATION APPARATUS TO INSURE A COMPLETE OPERATING SYSTEM IMPLIED BY DRAWING CONTENT AND AS SPECIFIED.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 10. THOROUGHLY COORDINATE ALL PLUMBING INSTALLATIONS WITH WORK OF OTHER CONSTRUCTION DISCIPLINES.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 11. SEAL ALL RESPECTIVE WALL, FLOOR, AND CEILING/ROOF PENETRATIONS AS APPROPRIATE TO MAINTAIN A WEATHER TIGHT ENCLOSURE. FIRE BARRIER, SMOKE BARRIER, ETC. AS APPLICABLE. REFER TO ARCHITECTURE PLANS FOR SMOKE AND FIRE BARRIERS/PARTITIONS.                                                                                                                                                                                                                                                                                                                                                                                              |
| 12. CONTRACTOR TO PAY FOR ALL FEES AND PERMITS ASSOCIATED WITH PLUMBING WORK INDICATED AS NECESSARY TO SECURE A COMPLETE AND OPERATIONAL SYSTEM ON SCHEDULE AND IN A TIMELY MANNER.                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 13. CONNECT DHW, DCW, DHWR VENT, AND SOIL & WASTE LINES TO FIXTURES IN ACCORDANCE WITH SIZES INDICATED ON FIXTURE SCHEDULE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 14. RUN 2" MINIMUM SIZES SOIL & WASTE PIPING BELOW GROUND INSIDE BUILDING REGARDLESS OF SIZE ON FIXTURE CONNECTION SCHEDULE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 15. ALL DIMENSIONS AND PIPE SIZES ARE IN INCHES, UNLESS NOTED OTHERWISE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 16. FURNISH AND INSTALL ACCESS PANELS WHERE REQUIRED FOR ACCESS TO ALL CONCEALED VALVES, TRAPS, OR OTHER EQUIPMENT FURNISHED UNDER THIS CONTRACT WHERE NO OTHER MEANS IS AVAILABLE.                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 17. INSTALL ALL SHUT-OFF AND ISOLATION VALVES (WITH ACCESS PANELS IF NECESSARY) IN A LOCATION WHICH IS ACCESSIBLE FROM THE MAIN FLOOR.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 18. CONTRACTOR TO PROVIDE SHUT-OFF VALVES AT ALL DEVICES.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 19. KEEP ALL OPENINGS IN PIPES OR FITTINGS PLUGGED OR CAPPED UNTIL CONNECTED.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 20. SLOPE ALL DWV LINES 1/8" PER FOOT (3" AND ABOVE), 1/2" PER FOOT (24" AND BELOW).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 21. INSTALL ALL FIXTURES, AS SPECIFIED, WITH SUPPLY STOPS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 22. INSTALL WASTE AND SUPPLY GUARDS UNDER ALL LAVS-SEE FIXTURE SCHEDULE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 23. MAINTAIN RECORD DRAWINGS ON SITE. RECORD SET MUST BE COMPLETE, CURRENT AND AVAILABLE FOR INSPECTION WHEN REQUESTIONS FOR PAYMENT ARE SUBMITTED.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

| PLUMBING LEGEND                                                                                                |
|----------------------------------------------------------------------------------------------------------------|
|  FLOOR MOUNTED WATER CLOSET |
|  LAVATORY                   |
|  SINK                       |
|  DOMESTIC COLD WATER        |
|  DOMESTIC HOT WATER         |
|  DOMESTIC HOT WATER RETURN  |
|  SANITARY SEWER             |
|  SANITARY VENT PIPING       |
|  DIRECTION OF FLOW          |
|  BALL VALVE                 |
|  CAPPED PIPE                |
|  PIPE UP                    |
|  PIPE DOWN                  |
|  CLEANOUT IN FLOOR          |
|  RUN IN WALL                |
|  DOMESTIC COLD WATER        |
|  DOMESTIC HOT WATER         |
|  DOMESTIC HOT WATER RETURN  |

| PLUMBING FIXTURE & CONNECTION SCHEDULE                                                            |                              |                                                                             |                                                                                                                                         |              |        |        |      |      |                                                                                                                                                                                                  |  |  |
|---------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------------|--------|--------|------|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| SYMBOL                                                                                            | FIXTURE                      | MANUFACTURER/MODEL #                                                        | TRIM (ADD GPM)                                                                                                                          | COLOR        | DRAIN  | VENT   | CW   | HW   | REMARKS                                                                                                                                                                                          |  |  |
| P - 1                                                                                             | FLOOR MOUNTED TOILET         | AMERICAN STANDARD: MADERA FLOWISE ELONGATED FLUSHOMETER TOILET, MODEL: 3043 | PROVIDE WITH AMERICAN STANDARD SELECTRONIC SENSOR-OPERATED BATTERY POWERED FLUSH VALVE, 1.1 GPF, MODEL 6065111.002. PROVIDE WITH SEAT   | WHITE        | 4"     | 2"     | 1"   | -    | REFER TO ARCHITECTURAL PLANS FOR MOUNTING HEIGHTS. PROVIDE WITH ZURN Z1201-N CARRIER (CONTRACTOR TO VERIFY COMPATIBILITY WITH FIXTURE AND WITH MOUNTING HEIGHTS SHOWN ON ARCHITECTURAL DRAWINGS) |  |  |
| P - 2                                                                                             | MOP SINK                     | ZURN CUSTODIAL FLOOR SINK, MODEL: Z5650                                     | PROVIDE WITH Z2843M1 SERVICE SINK FAUCET, REMOVABLE RIM GUARD, AND 3" IPS                                                               | WHITE        | 3"     | 1 1/2" | 1/2" | 1/2" | COORDINATE WITH ARCHITECTURAL DIMENSIONS, PLANS AND DETAILS                                                                                                                                      |  |  |
| P - 3                                                                                             | WALL MOUNTED LAVATORY        | AMERICAN STANDARD: LUCERNE 0356 421                                         | PROVIDE WITH 0.35 GPM ZURN SERIO SENSOR FAUCET WITH HYDROPOWER, BATTERY BACKUP AND THERMOSTATIC MIXING VALVE, MODEL Z36950-M-TM-V-1     | WHITE        | 1 1/4" | 1 1/4" | 1/2" | 1/2" | PROVIDE WITH TRUEBRO LAVGUARD. REFER TO ARCHITECTURAL PLANS FOR MOUNTING HEIGHTS. PROVIDE WITH ZURN Z1231 CONCEALED ARM LAVATORY CARRIER (CONTRACTOR TO VERIFY COMPATABILITY)                    |  |  |
| P - 4                                                                                             | SINGLE HAND WASHING STATION  | BRADLEY: VERGE LVQD1                                                        | PROVIDE WITH (1) 0.35 GPM ZURN SERIO SENSOR FAUCET WITH HYDROPOWER, BATTERY BACKUP AND THERMOSTATIC MIXING VALVE, MODEL Z36950-M-TM-V-1 | BY ARCHITECT | 1 1/2" | 1 1/4" | 1/2" | 1/2" | PROVIDE WITH PIPE SKIRT AND ACCESS PANEL(S)                                                                                                                                                      |  |  |
| P - 5                                                                                             | DOUBLE HAND WASHING STATION  | BRADLEY: VERGE LVQD2                                                        | PROVIDE WITH (2) 0.35 GPM ZURN SERIO SENSOR FAUCET WITH HYDROPOWER, BATTERY BACKUP AND THERMOSTATIC MIXING VALVE, MODEL Z36950-M-TM-V-1 | BY ARCHITECT | 2"     | 1 1/2" | 1/2" | 1/2" | PROVIDE WITH PIPE SKIRT AND ACCESS PANEL(S)                                                                                                                                                      |  |  |
| P - 6                                                                                             | STAINLESS STEEL DROP-IN SINK | ELKAY: LRAD172255, 17"X22"X5.5" SINGLE BOWL DROP-IN ADA SINK                | ROVIDE WITH ELKAY #LK800GN08T4 CONCEALED DECK FAUCET, 1.5 GPM                                                                           | BY ARCHITECT | 1 1/2" | 1 1/4" | 1/2" | 1/2" |                                                                                                                                                                                                  |  |  |
| P - 7                                                                                             | BOTTLE FILLING STATION       | ELKAY: LZVSM8K                                                              | -                                                                                                                                       | BY ARCHITECT | 1 1/2" | 1 1/2" | 1/2" | -    | PROVIDE WITH 2 ADDITIONAL FILTERS AND MOUNTING KIT                                                                                                                                               |  |  |
| P - 8                                                                                             | FLOOR DRAIN                  | WATTS FD-100-A                                                              | 5" ROUND CAST IRON FACE                                                                                                                 | CAST IRON    | 3"     | -      | -    | -    | PROVIDE WITH PROVENT PROSET TRAP GUARD                                                                                                                                                           |  |  |
| P - 9                                                                                             | STAINLESS STEEL DROP-IN SINK | ELKAY: LRAD252265, 25"X22"X6.5" SINGLE BOWL DROP-IN ADA SINK                | ROVIDE WITH ELKAY #LK800GN08T4 CONCEALED DECK FAUCET, 1.5 GPM                                                                           | BY ARCHITECT | 1 1/2" | 1 1/4" | 1/2" | 1/2" | COORDINATE WITH ARCHITECTURAL                                                                                                                                                                    |  |  |
| WH-1                                                                                              | WATER HEATER                 | A.O. SMITH: DEL-205-5                                                       | 20 GALLON CAPACITY, 5 KW INPUT, 120/277V, 21 GPH @ 100°F TEMPERATURE RISE.                                                              |              |        |        |      |      | PROVIDE WITH DRAIN PAN. PROVIDE WITH 1P-000 & 2P-000                                                                                                                                             |  |  |
| NOTES: PROVIDE EQUIPMENT AS SCHEDULED OR APPROVED EQUAL. PROVIDE FIXTURE STOPS FOR ALL EQUIPMENT. |                              |                                                                             |                                                                                                                                         |              |        |        |      |      |                                                                                                                                                                                                  |  |  |

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PROVIDENCE, RI 02905

PROJECT

| REVISIONS |             |      |
|-----------|-------------|------|
| MARK      | DESCRIPTION | DATE |
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SHEET TITLE

PLUMBING COVER  
SHEET

ISSUE

FOR  
CONSTRUCTION

|             |             |                      |
|-------------|-------------|----------------------|
| DRAWN<br>AG | CHKD<br>TAD | PROJECT NO.<br>26070 |
|-------------|-------------|----------------------|

SHEET NO.

P-000

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# Report

**Project**

Customer:

Project Name:      Feinstein Art Room & Office

Location:           USA, DE, Wilmington

Date:                2026-08-10

**Designer**

Name:

Phone:

Email:

Address:

**Software**

Version:            2.0.1.69

DB version:         20260809-140012

## **Table of Abbreviations**

| Abbreviation          | Description                                     |
|-----------------------|-------------------------------------------------|
| Add. Ref.             | Additional Refrigerant                          |
| AM                    | Airflow Mode                                    |
| Block Load            | Block Load                                      |
| CM                    | Cooling Operation Mode                          |
| Corr. Capa            | Correction Capacity                             |
| Corr. PI              | Correction Power Input                          |
| CR                    | Combination Ratio                               |
| DB                    | Dry Bulb Temperature                            |
| Des Temp              | Design Temperature                              |
| Dis. Temp.            | Discharge Temperature                           |
| Equip. Name           | Equipment Name                                  |
| EWT                   | Entering Water Temperature                      |
| FR                    | Flow Rate                                       |
| HM                    | Heating Operation Mode                          |
| IDU                   | Indoor Unit                                     |
| LWT                   | Leaving Water Temperature                       |
| Max. Capa             | Maximum Capacity                                |
| Min. HOR              | Minimum Heating Operation Ratio                 |
| ODU                   | Outdoor Unit                                    |
| Op. WF Range          | Operating Water Flow Range                      |
| Op. WT Range          | Operating Water Temperature Range               |
| Operating Temp. Range | Operating Temperature Range                     |
| PHE                   | Plate Heat Exchanger                            |
| Pipe Mat.             | Piping Material                                 |
| PL                    | Pressure Loss                                   |
| PWL                   | Sound Power level                               |
| Ref. Pipe             | Refrigerant Pipe                                |
| Rq. Vent. Vol.        | Required Ventilation Volume                     |
| SHC                   | Sensible Heat Capacity                          |
| SPL                   | Sound Pressure Level                            |
| TC                    | Total Capacity                                  |
| WB                    | Wet Bulb Temperature                            |
| 47/43, 120            | DB / WB, LWT (for DVM Chiller Heating capacity) |
|                       |                                                 |
|                       |                                                 |
|                       |                                                 |
|                       |                                                 |
|                       |                                                 |



## Equipment List

| Type       | Model Code     | Description                                    |          |          | Unit   | Qty. |
|------------|----------------|------------------------------------------------|----------|----------|--------|------|
| ODU        | AM060HCMDCS/AA |                                                |          |          | EA     | 1    |
|            | AR09DXDABWKXCV | RAC Outdoor unit                               |          |          | EA     | 1    |
| IDU        | AM024FEVDCG/AA | Wall Mounted                                   |          |          | EA     | 3    |
|            | AR09DXDABWKNCV | Wall Mounted                                   |          |          | EA     | 1    |
| Pipe Mat.  | MCU-R4NEK1UN   |                                                |          |          | EA     | 1    |
| Controller | MWR-WG01UN     | Wired remote controller                        |          |          | EA     | 4    |
|            | MIM-B17BUN     | BACnet Gateway                                 |          |          | EA     | 1    |
|            | MIM-A00UN      | Wall-mounted unit wired controller sub-PCB kit |          |          | EA     | 1    |
|            | MIM-R10UN      | RAC interface module                           |          |          | EA     | 1    |
| Accessory  | BD-BLUE230     | Blue Diamond Maxi Blue Condensate Pump         |          |          | EA     | 4    |
| Add. Ref.  | R32            | Refrigerant                                    |          |          | lbs    | 8.76 |
| Type       | Size           | Length [ft] / Quantity [EA]                    |          |          |        |      |
|            |                | Liquid Pipe                                    | Gas Pipe | H.P. Gas | Total  |      |
| Ref. Pipe  | 6.35(1/4")     | 50.00                                          | 0.00     | 0.00     | 50.00  |      |
|            | 9.52(3/8")     | 110.00                                         | 50.00    | 0.00     | 160.00 |      |
|            | 15.88(5/8")    | 0.00                                           | 60.00    | 50.00    | 110.00 |      |
|            | 19.05(3/4")    | 0.00                                           | 50.00    | 0.00     | 50.00  |      |

## Piping (Integration)

### System (HP-1)

#### Design Condition

| Design Condition (Air)   | Outdoor       |              | Indoor        |               |
|--------------------------|---------------|--------------|---------------|---------------|
|                          | CM            | HM           | CM            | HM            |
| Temperature (DB/WB) [°F] | 95.00 / 78.00 | 10.00 / 8.00 | 75.00 / 63.00 | 70.00 / 56.00 |
| Altitude Correction      | -             |              |               |               |

#### Installation

| Type | Floor | Room Name | Equip. Name | Model Code     |
|------|-------|-----------|-------------|----------------|
| ODU  | 1F    | -         | HP-1        | AM060HCMDCS/AA |
| IDU  | 1F    | -         | IDU_1       | AM024FEVDCG/AA |
|      |       | -         | IDU_2       | AM024FEVDCG/AA |
|      |       | -         | IDU_3       | AM024FEVDCG/AA |

#### Outdoor Unit

| Equipment Name | Model Code     | Combination Ratio [%] | Des Temp [°F] |            |
|----------------|----------------|-----------------------|---------------|------------|
|                |                |                       | CM (IN WB)    | HM (IN DB) |
| HP-1           | AM060HCMDCS/AA | 116.00                | 63.00         | 70.00      |

\* Des Temp : The sum of (Rated capacity ratios for each indoor unit \* WB/DB temperatures for each indoor unit)

| Max. Capa. [Btu/h] |       | Corr. Capa. [Btu/h] |          | Power Input (Rated/Corrected) [kW] |             |
|--------------------|-------|---------------------|----------|------------------------------------|-------------|
| CM                 | HM    | CM                  | HM       | CM                                 | HM          |
| 58999              | 69419 | 58999.00            | 69419.00 | 5.800/5.831                        | 5.600/7.254 |

\* Capacity Correction (VRF Only) based on Simultaneous Operating

**\* Corrected Power Input : Electrical wiring work shall fully comply with Installation Manual, Local / National Electrical regulations. Contact a Samsung expert for more information. Samsung Electronics is not responsible for any problems that may occur during use.**

#### Indoor Unit

| Equip. Name | Model Code     | AM | Des Temp[°F] |       | Max. Capa. [Btu/h] |          |          | Corr. Capa. [Btu/h] |          |          |
|-------------|----------------|----|--------------|-------|--------------------|----------|----------|---------------------|----------|----------|
|             |                |    | CM           | HM    | CM                 |          | HM       | CM                  |          | HM       |
|             |                |    | IN WB        | IN DB | TC                 | SHC      | TC       | TC                  | SHC      | TC       |
| IDU_1       | AM024FEVDCG/AA | H  | 63.00        | 70.00 | 21000.00           | 14652.00 | 23800.00 | 19666.00            | 13721.00 | 23140.00 |
| IDU_2       | AM024FEVDCG/AA | H  | 63.00        | 70.00 | 21000.00           | 14652.00 | 23800.00 | 19666.00            | 13721.00 | 23140.00 |
| IDU_3       | AM024FEVDCG/AA | H  | 63.00        | 70.00 | 21000.00           | 14652.00 | 23800.00 | 19666.00            | 13721.00 | 23140.00 |

\* Capacity Correction (VRF Only) based on Simultaneous Operating

## Piping (Integration)

### System (HP-1)

#### Accessory

| Equip. Name | Model Code     | Address |   |     |   | Accessory  |
|-------------|----------------|---------|---|-----|---|------------|
|             |                | Main    |   | RMC |   |            |
| HP-1        | AM060HCMDCS/AA | -       | - | -   | - |            |
| IDU_1       | AM024FEVDCG/AA | -       | - | -   | - | BD-BLUE230 |
| IDU_2       | AM024FEVDCG/AA | -       | - | -   | - | BD-BLUE230 |
| IDU_3       | AM024FEVDCG/AA | -       | - | -   | - | BD-BLUE230 |

#### Combination Ratio

| Model Code     | CR [%] | Operation Mode | Min. HOR [%] | Block Load [Btu/h] / [%] |     | Corr. Capa. [Btu/h] |          |
|----------------|--------|----------------|--------------|--------------------------|-----|---------------------|----------|
|                |        |                |              | CM                       | HM  | CM                  | HM       |
| AM060HCMDCS/AA | 116.00 | HP/HR          | -            | -/-                      | -/- | 58999.00            | 69419.00 |

\* Block Load (VRF Only) Option : Not Apply

\* Capacity Correction (VRF Only) based on Simultaneous Operating

#### System Check Result

| Checklist                                                                                                                | Restriction Value | Design Result |
|--------------------------------------------------------------------------------------------------------------------------|-------------------|---------------|
| Long pipe length is 70.49 ft (Restriction: 591.00 ft). [IDU_1(AM024FEVDCG/AA)]                                           | 591.00 ft         | 70.49 ft      |
| Total pipe length is 110.49 ft (Restriction: 984.25 ft).                                                                 | 984.25 ft         | 110.49 ft     |
| Pipe length from first Y-Joint to the farthest IDU is 20.49 ft (Restriction: 131.23 ft). [IDU_1(AM024FEVDCG/AA)]         | 131.23 ft         | 20.49 ft      |
| Height difference between ODU and IDU is 0.00 ft (restriction: 164.00 ft) (ODU higher than IDUs). [HP-1(AM060HCMDCS/AA)] | 164.00 ft         | 0.00 ft       |
| Height difference between ODU and IDU is 6.56 ft (restriction: 131.00 ft) (ODU lower than IDUs). [HP-1(AM060HCMDCS/AA)]  | 131.00 ft         | 6.56 ft       |
| Height difference between IDUs when there is no wall mounts with EEV is 0.00 ft (restriction: 49.21 ft).                 | 49.21 ft          | 0.00 ft       |

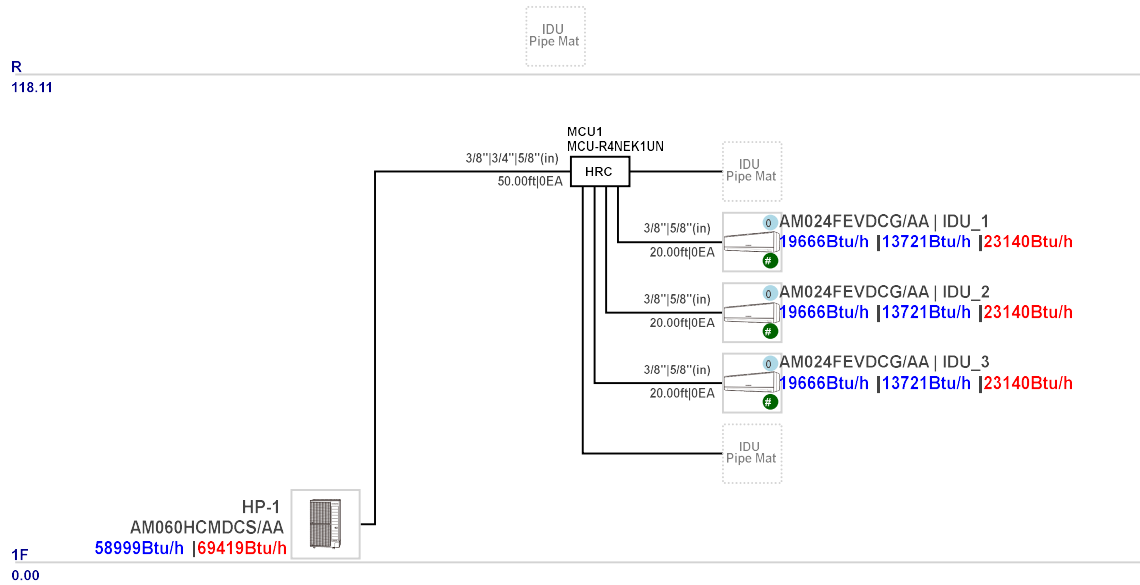
#### Refrigerant

| Factory Charging and Additional Refrigerant Amount | Refrigerant Amount [lbs] |
|----------------------------------------------------|--------------------------|
| Factory Charging Refrigerant Amount                | 6.60                     |
| Additional Refrigerant Amount                      | 8.68                     |
| Total                                              | 15.28                    |

## Piping (Integration) (Continued)

### System (HP-1) (Continued)

Piping Diagram / Feinstein Art Room & Office / Combination Ratio 116.00%



\* Capacity Correction (VRF Only) based on Simultaneous Operating

-The above system configuration may differ from The actual installation conditions.  
Please refer to The installation manual for full details.

## Piping (Integration)

### System (HP-2)

#### Design Condition

| Design Condition (Air)   | Outdoor       |              | Indoor        |               |
|--------------------------|---------------|--------------|---------------|---------------|
|                          | CM            | HM           | CM            | HM            |
| Temperature (DB/WB) [°F] | 95.00 / 78.00 | 10.00 / 8.00 | 75.00 / 63.00 | 70.00 / 56.00 |
| Altitude Correction      | -             |              |               |               |

#### Installation

| Type | Floor | Room Name | Equip. Name | Model Code     |
|------|-------|-----------|-------------|----------------|
| ODU  | 1F    | -         | HP-2        | AR09DXDABWKXCV |
| IDU  | 1F    | -         | IDU_4       | AR09DXDABWKNCV |

#### Outdoor Unit

| Equip. Name | Model Code     | CR [%] | Max. Capa. [Btu/h] |    | Corr. Capa. [Btu/h] |          |
|-------------|----------------|--------|--------------------|----|---------------------|----------|
|             |                |        | CM                 | HM | CM                  | HM       |
| HP-2        | AR09DXDABWKXCV | -      | -                  | -  | 10788.00            | 12974.00 |

#### Indoor Unit

| Equip. Name | Model Code     | AM | Des Temp[°F] |       | Max. Capa. [Btu/h] |     |    | Corr. Capa. [Btu/h] |         |          |
|-------------|----------------|----|--------------|-------|--------------------|-----|----|---------------------|---------|----------|
|             |                |    | CM           | HM    | CM                 |     | HM | CM                  |         | HM       |
|             |                |    | IN WB        | IN DB | TC                 | SHC | TC | TC                  | SHC     | TC       |
| IDU_4       | AR09DXDABWKNCV | -  | 63.00        | 70.00 | -                  | -   | -  | 10788.00            | 8593.00 | 12974.00 |

#### Accessory

| Equip. Name | Model Code     | Address |     |   |   | Accessory |
|-------------|----------------|---------|-----|---|---|-----------|
|             |                | Main    | RMC |   |   |           |
| HP-2        | AR09DXDABWKXCV | -       | -   | - | - |           |

#### System Check Result

| Checklist                                                                                                               | Restriction Value | Design Result |
|-------------------------------------------------------------------------------------------------------------------------|-------------------|---------------|
| Long pipe length is 50.00 ft (Restriction: 66.00 ft). [IDU_4(AR09DXDABWKNCV)]                                           | 66.00 ft          | 50.00 ft      |
| Height difference between ODU and IDU is 0.00 ft (restriction: 49.00 ft) (ODU higher than IDUs). [HP-2(AR09DXDABWKXCV)] | 49.00 ft          | 0.00 ft       |
| Height difference between ODU and IDU is 6.56 ft (restriction: 49.00 ft) (ODU lower than IDUs). [HP-2(AR09DXDABWKXCV)]  | 49.00 ft          | 6.56 ft       |



**Piping (Integration)**

**System (HP-2)**

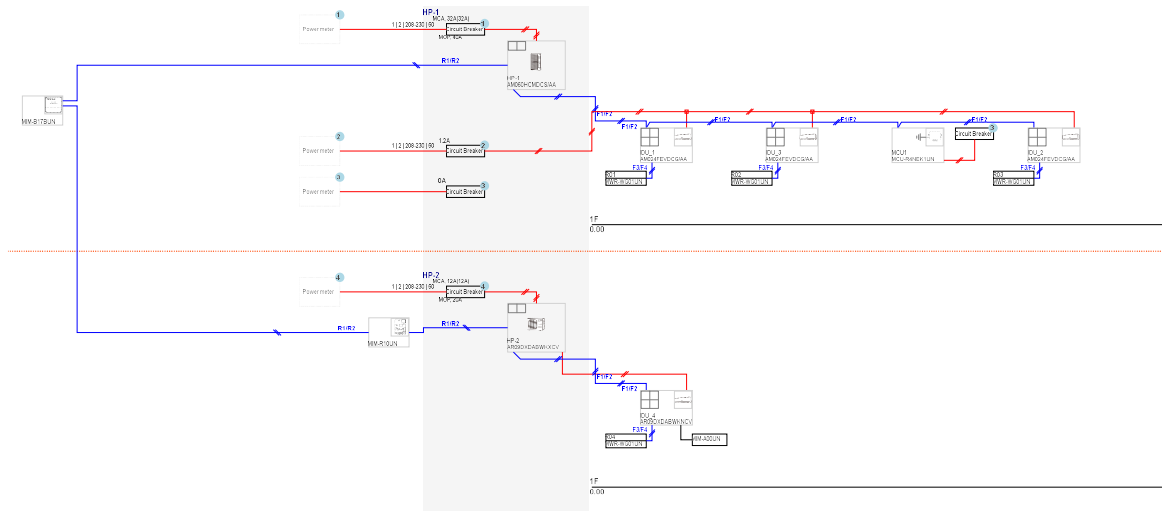
**Refrigerant**

| Factory Charging and Additional Refrigerant Amount | Refrigerant Amount [lbs] |
|----------------------------------------------------|--------------------------|
| Factory Charging Refrigerant Amount                | 2.13                     |
| Additional Refrigerant Amount                      | 0.08                     |
| Total                                              | 2.21                     |

-The above system configuration may differ from The actual installation conditions.  
Please refer to The installation manual for full details.

## Wiring and Controller

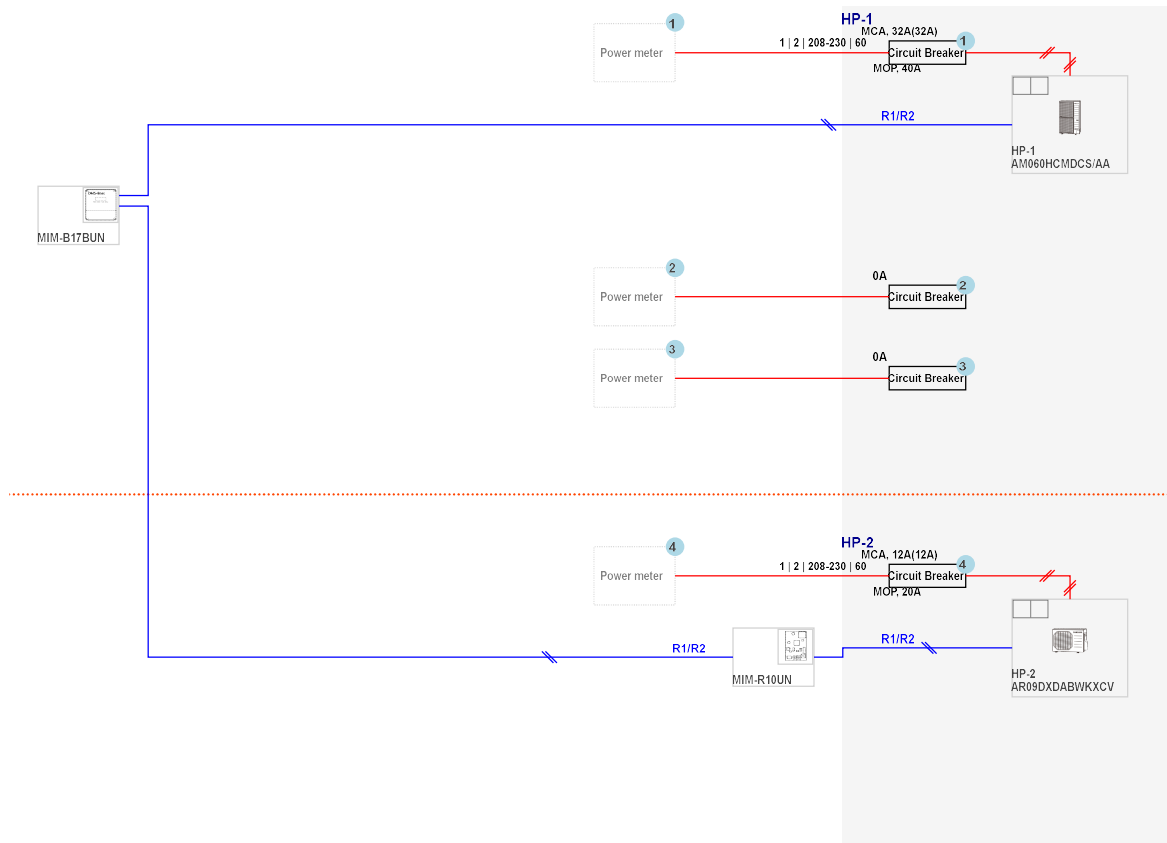
### Wiring and Controller Diagram



-The above system configuration may differ from The actual installation conditions.  
Please refer to The installation manual for full details.

## Controller

### Controller Diagram

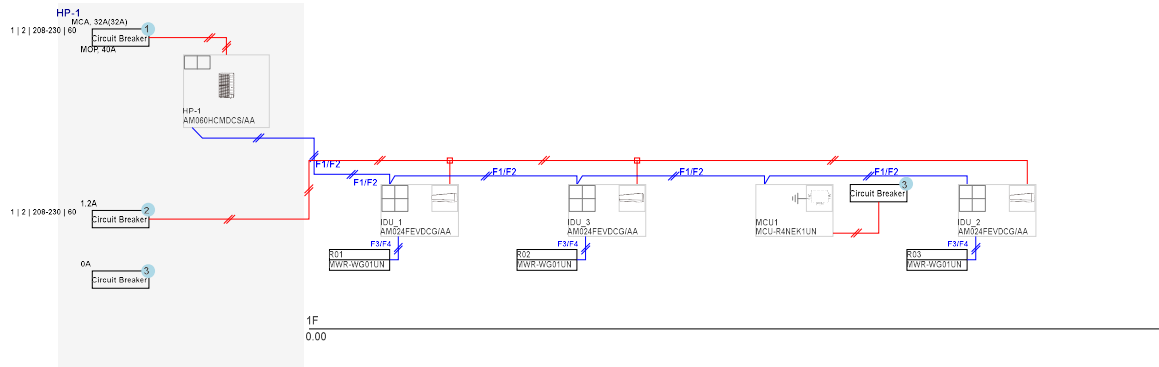


-The above system configuration may differ from The actual installation conditions.  
Please refer to The installation manual for full details.

## Wiring

### System (HP-1)

#### Wiring Diagram

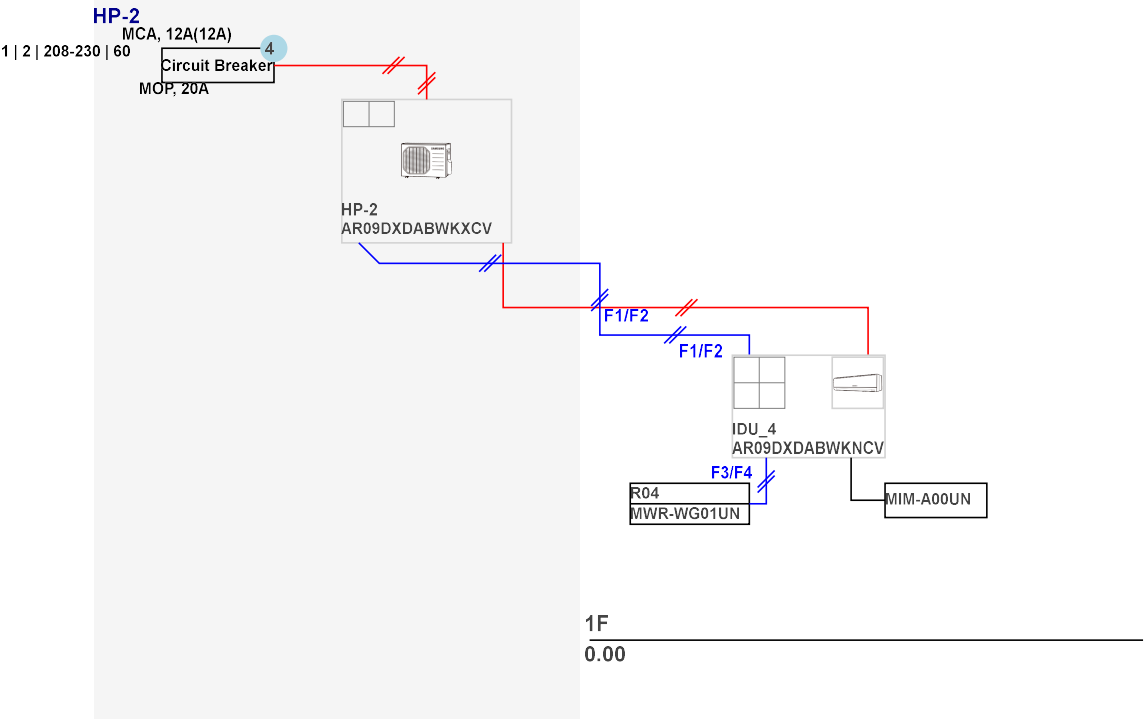


-The above system configuration may differ from The actual installation conditions.  
Please refer to The installation manual for full details.

## Wiring

### System (HP-2)

#### Wiring Diagram



-The above system configuration may differ from The actual installation conditions.  
Please refer to The installation manual for full details.

## Product Specification (Integration)

### VRF

#### Indoor Unit

|                    |                |            |         |             |                      |
|--------------------|----------------|------------|---------|-------------|----------------------|
| Model Name         |                |            |         |             | AM024FEVDCG/AA       |
| Power Supply       |                |            |         | Ø, #, V, Hz | 1   2   208-230   60 |
| Mode               |                |            |         |             | HP                   |
| Performance        | MBH            |            |         |             | 23.2                 |
|                    | Capacity       | Cooling    | Nominal | Btu/h       | 23200                |
|                    |                | Heating    | Nominal | Btu/h       | 23800                |
| Power              | Power Input    | Cooling    | Nominal | kW          | 0.06                 |
|                    |                | Heating    | Nominal | kW          | 0.06                 |
|                    | Current Input  | Cooling    | Nominal | A           | 0.4                  |
|                    |                | Heating    | Nominal | A           | 0.4                  |
|                    | Current        | MCA        |         | A           | 0.5                  |
|                    |                | MOP        |         | A           | 15                   |
|                    |                | FLA        | A       | A           | 0.4                  |
| Heat Exchanger     | Type           |            |         |             | Fin & Tube           |
|                    | Material       | Fin        |         |             | Al                   |
|                    |                | Tube       |         |             | Cu                   |
|                    | Fin Treatment  |            |         |             | Blue Hydrophile      |
| Fan                | Type           |            |         |             | Crossflow Fan        |
|                    | Quantity       |            |         | EA          | 1                    |
|                    | Air Flow Rate  | High       |         | CFM         | 593                  |
|                    |                | Mid        |         | CFM         | 530                  |
|                    |                | Low        |         | CFM         | 466                  |
| Fan Motor          | Type           |            |         |             | BLDC                 |
|                    | Quantity       |            |         | EA          | 1                    |
|                    | Output         |            |         | W           | 27                   |
| Piping Connections | Liquid Pipe    | Type       |         |             | Flaring              |
|                    |                | Diameter   |         | in          | 3/8"                 |
|                    | Gas Pipe       | Type       |         |             | Flaring              |
|                    |                | Diameter   |         | in          | 5/8"                 |
|                    | Drain Pipe     | Diameter   |         |             | VP25                 |
| Wiring connections | Communication  | Min.       |         | AWG         | 18                   |
|                    |                | Comm.Layer |         |             | F1, F2               |
| Refrigerant        | Type           |            |         |             | R32                  |
|                    | Control Type   |            |         |             | EEV included         |
| Sound              | Sound Pressure | High       |         | dB(A)       | 43                   |

Product Specification (Integration)

VRF

Indoor Unit

|                    |                      |         |       |      |
|--------------------|----------------------|---------|-------|------|
| Sound              | Sound Pressure Level | Mid     | dB(A) | 40   |
|                    |                      | Low     | dB(A) | 37   |
|                    | Sound Power Level    | Cooling | dB(A) | 62   |
| External Dimension | Net Weight           |         | lbs   | 26.5 |
|                    | Shipping Weight      |         | lbs   | 30.9 |
|                    | Net Dimensions       | W       | in    | 41.5 |
|                    |                      | H       | in    | 11.8 |
|                    |                      | D       | in    | 8.5  |
|                    | Shipping Dimensions  | W       | in    | 43.9 |
|                    |                      | H       | in    | 11.4 |
|                    |                      | D       | in    | 14.8 |

## Product Specification (Integration)

### VRF

#### Outdoor Unit

|                    |                     |                   |         |             |                      |
|--------------------|---------------------|-------------------|---------|-------------|----------------------|
| Model Name         |                     |                   |         |             | AM060HCMDCS/AA       |
| Power Supply       |                     |                   |         | Ø, #, V, Hz | 1   2   208-230   60 |
| Mode               |                     |                   |         |             | HP/HR                |
| Performance        | Ton                 |                   |         |             | 5                    |
|                    | Capacity            | Cooling           | Nominal | Btu/h       | 60000                |
|                    |                     | Heating           | Nominal | Btu/h       | 66000                |
| Power              | Power Input         | Cooling           | Nominal | kW          | 5.8                  |
|                    |                     | Heating           | Nominal | kW          | 5.6                  |
|                    | Current Input       | Cooling           | Nominal | A           | 26.5                 |
|                    |                     | Heating           | Nominal | A           | 25.6                 |
|                    | Current             | MCA               |         | A           | 32                   |
|                    |                     | MOP               |         | A           | 40                   |
| Efficiency         | Cooling             | EER2              |         | Btu/W·h     | 10                   |
|                    |                     | SEER2(Ducted)     |         | -           | 16.5                 |
|                    |                     | SEER2(Non-Ducted) |         | -           | 20                   |
|                    | Heating             | HSPF2(Ducted)     |         | -           | 9.5                  |
|                    |                     | HSPF2(Non-Ducted) |         | -           | 10.2                 |
| Casing             | Material            | Body              |         |             | EGI Steel Plate      |
|                    |                     | Base              |         |             | SGMCC Steel Plate    |
| Heat Exchanger     | Type                |                   |         |             | Fin & Tube           |
|                    | Material            | Fin               |         |             | Al                   |
|                    |                     | Tube              |         |             | Cu                   |
|                    | Fin Treatment       |                   |         |             | Anti-corrosion       |
| Compressor         | Quantity            |                   |         | EA          | 1                    |
| Fan                | Type                |                   |         |             | Propeller            |
|                    | Discharge direction |                   |         |             | Horizontal           |
|                    | Quantity            |                   |         | EA          | 2                    |
|                    | Air Flow Rate       | High              |         | CFM         | 4414                 |
| Fan Motor          | Type                |                   |         |             | BLDC                 |
|                    | Quantity            |                   |         | EA          | 2                    |
|                    | Output              |                   |         | W           | 125                  |
| Piping Connections | Liquid Pipe         | Type              |         |             | Welding              |
|                    |                     | Diameter          |         | in          | 3/8"                 |
|                    | Gas Pipe            | Type              |         |             | Welding              |
|                    |                     | Diameter          |         | in          | 3/4"                 |

## Product Specification (Integration)

### VRF

#### Outdoor Unit

|                                            |                        |            |       |         |
|--------------------------------------------|------------------------|------------|-------|---------|
| Piping Connections                         | High Pressure Gas Pipe | Type       |       | Welding |
|                                            |                        | Diameter   | in    | 5/8"    |
| Wiring connections                         | Communication          | Min.       | AWG   | 18      |
|                                            |                        | Comm.Layer |       | F1,F2   |
| Refrigerant                                | Type                   |            |       | R32     |
|                                            | Factory Charging       |            | lbs   | 6.6     |
| Sound                                      | Sound Pressure Level   | Cooling    | dB(A) | 55      |
|                                            |                        | Heating    | dB(A) | 57      |
|                                            | Sound Power Level      | Cooling    | dB(A) | 73      |
| External Dimension                         | Net Weight             |            | lbs   | 246.9   |
|                                            | Shipping Weight        |            | lbs   | 269     |
|                                            | Net Dimensions         | W          | in    | 37      |
|                                            |                        | H          | in    | 55.88   |
|                                            |                        | D          | in    | 13      |
|                                            | Shipping Dimensions    | W          | in    | 39.19   |
|                                            |                        | H          | in    | 62.94   |
|                                            |                        | D          | in    | 16.81   |
| Operating Temp. Range                      | Cooling                | Min.       | °F    | 23      |
|                                            |                        | Max.       | °F    | 118     |
|                                            | Heating                | Min.       | °F    | -22     |
|                                            |                        | Max.       | °F    | 75      |
| Maximum number of connectable indoor units |                        |            | EA    | 10      |

## Product Specification (Integration)

### RAC System

|                    |                  |               |          |         |                               |
|--------------------|------------------|---------------|----------|---------|-------------------------------|
| Model Name         |                  |               |          |         | AR09DXDABWKXCV+AR09DXDABWKNCV |
| Mode               |                  |               |          |         | HP                            |
| Performance        | MBH              |               |          |         | 9                             |
|                    | Capacity         | Cooling       | Standard | Btu/h   | 9000                          |
|                    |                  |               | Max      | Btu/h   | 13000                         |
|                    |                  |               | Min      | Btu/h   | 3000                          |
|                    |                  | Heating       | Standard | Btu/h   | 11000                         |
|                    |                  |               | Max      | Btu/h   | 23000                         |
|                    |                  |               | Min      | Btu/h   | 2400                          |
| Power              | Power Input      | Cooling       | Standard | kW      | 0.55                          |
|                    |                  |               | Max      | kW      | 0.93                          |
|                    |                  |               | Min      | kW      | 0.16                          |
|                    |                  | Heating       | Standard | kW      | 0.73                          |
|                    |                  |               | Max      | kW      | 2.05                          |
|                    |                  |               | Min      | kW      | 0.15                          |
|                    | Current Input    | Cooling       | Standard | A       | 2.8                           |
|                    |                  |               | Max      | A       | 4.5                           |
|                    |                  |               | Min      | A       | 1.1                           |
|                    |                  | Heating       | Standard | A       | 3.4                           |
|                    |                  |               | Max      | A       | 9                             |
|                    |                  |               | Min      | A       | 1                             |
|                    | Current          | MCA           | A        |         | 12                            |
|                    |                  | MOP           | A        |         | 20                            |
| Efficiency         | Cooling          | EER2(Ducted)  |          | Btu/W·h | 16.35                         |
|                    |                  | SEER2(Ducted) |          | Btu/W·h | 25                            |
|                    | Heating          | COP           |          | Btu/W·h | 15.0475                       |
|                    |                  | HSPF2(Ducted) |          | Btu/W·h | 10.5                          |
| Piping Connections | Liquid Pipe      | Type          |          |         | Flaring                       |
|                    |                  | Diameter      |          | in      | 1/4"                          |
|                    | Gas Pipe         | Type          |          |         | Flaring                       |
|                    |                  | Diameter      |          | in      | 3/8"                          |
| Wiring connections | Communication    | Min.          |          | mm²     | 0.75                          |
|                    |                  | Comm.Layer    |          |         | F1,F2                         |
| Refrigerant        | Type             |               |          |         | R32                           |
|                    | Factory Charging |               |          | lbs     | 2.13                          |

Product Specification (Integration)

RAC  
System

|                          |         |      |    |       |
|--------------------------|---------|------|----|-------|
| Operating<br>Temp. Range | Cooling | Min. | °F | 14    |
|                          |         | Max. | °F | 114.8 |
|                          | Heating | Min. | °F | -5.1  |
|                          |         | Max. | °F | 75.2  |

## Product Specification (Integration)

### RAC

#### Indoor Unit

|                    |                      |          |         |             |                      |
|--------------------|----------------------|----------|---------|-------------|----------------------|
| Model Name         |                      |          |         |             | AR09DXDABWKNCV       |
| Power Supply       |                      |          |         | Ø, #, V, Hz | 1   2   208-230   60 |
| Performance        | Capacity             | Cooling  | Nominal | Btu/h       | 9000                 |
|                    |                      | Heating  | Nominal | Btu/h       | 11000                |
| Heat Exchanger     | Type                 |          |         |             | F&T                  |
|                    | Material             | Fin      |         |             | Al                   |
|                    |                      | Tube     |         |             | Cu                   |
|                    | Fin Treatment        |          |         |             | Hydrophile Coating   |
| Fan                | Type                 |          |         |             | Cross Flow           |
|                    | Quantity             |          |         | EA          | 1                    |
|                    | Air Flow Rate        | High     |         | CFM         | 357                  |
|                    |                      | Mid      |         | CFM         | 304                  |
|                    |                      | Low      |         | CFM         | 251                  |
| Fan Motor          | Type                 |          |         |             | BLDC                 |
|                    | Quantity             |          |         | EA          | 1                    |
|                    | Output               |          |         | W           | 27                   |
| Piping Connections | Drain Pipe           | Diameter |         |             | ID18 HOSE            |
| Refrigerant        | Type                 |          |         |             | R32                  |
|                    | Control Type         |          |         |             | EEV not included     |
| Sound              | Sound Pressure Level | High     |         | dB(A)       | 38                   |
|                    |                      | Low      |         | dB(A)       | 22                   |
| External Dimension | Net Weight           |          |         | lbs         | 23.1                 |
|                    | Shipping Weight      |          |         | lbs         | 26                   |
|                    | Net Dimensions       | W        |         | in          | 35                   |
|                    |                      | H        |         | in          | 11.75                |
|                    |                      | D        |         | in          | 8.44                 |
|                    | Shipping Dimensions  | W        |         | in          | 37.37                |
|                    |                      | H        |         | in          | 11.44                |
|                    |                      | D        |         | in          | 14.75                |

## Product Specification (Integration)

### RAC

#### Outdoor Unit

|                    |                     |         |          |             |                      |
|--------------------|---------------------|---------|----------|-------------|----------------------|
| Model Name         |                     |         |          |             | AR09DXDABWKXCV       |
| Power Supply       |                     |         |          | Ø, #, V, Hz | 1   2   208-230   60 |
| Performance        | MBH                 |         |          |             | 9                    |
|                    | Capacity            | Cooling | Standard | Btu/h       | 9000                 |
|                    |                     |         | Max      | Btu/h       | 13000                |
|                    |                     |         | Min      | Btu/h       | 3000                 |
|                    |                     | Heating | Standard | Btu/h       | 11000                |
|                    |                     |         | Max      | Btu/h       | 23000                |
|                    |                     |         | Min      | Btu/h       | 2400                 |
| Casing             | Material            | Body    |          |             | EGI Steel Plate / PP |
| Heat Exchanger     | Type                |         |          |             | F&T                  |
|                    | Material            | Fin     |          |             | Al                   |
|                    |                     | Tube    |          |             | Cu                   |
|                    | Fin Treatment       |         |          |             | Hydrophile Coating   |
| Compressor         | Quantity            |         |          | EA          | 1                    |
| Fan                | Type                |         |          |             | Propeller            |
|                    | Discharge direction |         |          |             | Horizontal           |
|                    | Quantity            |         |          | EA          | 1                    |
|                    | Air Flow Rate       | High    |          | CFM         | 1589                 |
| Fan Motor          | Type                |         |          |             | BLDC                 |
|                    | Quantity            |         |          | EA          | 1                    |
|                    | Output              |         |          | W           | 40                   |
| Refrigerant        | Type                |         |          |             | R32                  |
| Sound              | Sound Pressure      | Cooling |          | dB(A)       | 45                   |
| External Dimension | Net Weight          |         |          | lbs         | 69.2                 |
|                    | Shipping Weight     |         |          | lbs         | 74.5                 |
|                    | Net Dimensions      | W       |          | in          | 31.12                |
|                    |                     | H       |          | in          | 21.56                |
|                    |                     | D       |          | in          | 11.25                |
|                    | Shipping Dimensions | W       |          | in          | 35.94                |
|                    |                     | H       |          | in          | 24.5                 |
|                    |                     | D       |          | in          | 14.63                |



**BOARD OF CONTRACT AND SUPPLY  
CITY OF PROVIDENCE, RHODE ISLAND**

# **REQUEST FOR PROPOSALS**

**Item Description:** LILIAN FEINSTEIN ELEMENTARY SCHOOL ART ROOM & OFFICE RENOVATIONS

**Procurement/MinuteTraq #:** 54695

**Date to be opened:** 10/19/2026

**Issuing Department:** Department of Public Property

## **QUESTIONS**

- Please direct questions related to the process, how to fill out forms, and how to submit an application(Pages 1-8) to the Purchasing Department.
  - Email: [purchasing@providenceri.gov](mailto:purchasing@providenceri.gov)
    - Please use the subject line “**Solicitation Question**”
- Please direct questions relative to the Minority and Women’s Business Enterprise Program and the corresponding forms (Pages 10-11) to the MBE/WBE Outreach Director for the City of Providence, Grace Diaz
  - Email: [gdiaz@providenceri.gov](mailto:gdiaz@providenceri.gov)
    - Please use subject line “**MBE WBE Forms**”
- Please direct questions relative to the specifications outlined (beginning on page 14) to the issuing department’s subject matter expert:
  - Name: Paul DeMelo
  - Title: Project Manager
  - Email Address: [pdemelo@downesco.com](mailto:pdemelo@downesco.com)

## **Pre-submission Conference**

There will be a Mandatory Pre-Bid Conference

Date of Pre-Bid Conference: 9/28/2026 Time: 3:30 pm

Other details (e.g. location, links, question submission deadline): 159 Sackett Street, Providence, RI 02905

**Deadline for questions submissions:** October 1, 2026 @ 4:00 pm  
Final Addendum: October 5, 2026

## INSTRUCTIONS FOR SUBMISSION

|                                        |
|----------------------------------------|
| <b><u>Meeting Date: 10/19/2026</u></b> |
|----------------------------------------|

Bids may be submitted up to **2:15 P.M.** on the above meeting date at the **Department of the City Clerk, Room 311, City Hall, 25 Dorrance Street, Providence.** At 2:15 P.M. all bids will be publicly opened and read at the Board of Contract Meeting in Conference Room 305, on the 3<sup>rd</sup> floor of City Hall.

- Bidders must submit **2 copies** of their bid in sealed envelopes or packages labeled with the captioned **Item Description** and the **City Department to which the solicitation and bid are related and must include the company name and address on the envelope as well.** (On page 1).
- If required by the Department, please keep the original bid bond and check in only one of the envelopes.
- Communications to the Board of Contract and Supply that are not competitive sealed bids (i.e. product information/samples) should have “**NOT A BID**” written on the envelope or wrapper.
- Only use form versions and templates included in this solicitation. If you have an old version of a form, do not recycle it for use in this bid.
- The bid envelope and information relative to the bid must be addressed to:

**Board of Contract and Supply  
Department of the City Clerk – City Hall, Room 311  
25 Dorrance Street  
Providence, RI 02903**

**\*\*PLEASE NOTE:** This bid may include details regarding information that you will need to provide (such as proof of licenses) to the issuing department before the formalization of an award.

*This information is **NOT** requested to be provided in your initial bid by design.*

**All bids submitted to the City Clerk become public record.** Failure to follow instructions could result in information considered private being posted to the city’s Open Meetings Portal and made available as a public record. The City has made a conscious effort to avoid the posting of sensitive information on the City’s Open Meetings Portal, by requesting that such sensitive information be submitted to the issuing department only at their request.

## **BID PACKAGE CHECKLIST**

Digital forms are available in the City of Providence Purchasing Department Office or online at <http://www.providenceri.gov/purchasing/how-to-submit-a-bid/>

The bid package **MUST** include the following, in this order:

- Bid Form 1: Bidder's Blank as the cover page/ 1<sup>st</sup> page (*see page 6 of this document*)
- Bid Form 2: Certification of Bidder as 2<sup>nd</sup> page (*see page 7 of this document*)
- Bid Form 3: Certificate Regarding Public Records (*see page 8 of this document*)
- Bid Form 4: Affidavit of City Vendor (*see pages 9 and 10 of this document*)
- Forms from the Minority and Women Business Enterprise Program: Based on Bidder Category. See *forms and instructions enclosed (pages 10-11) or on:*  
<https://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/>

**\*Please note: MBE/WBE forms must be completed for EVERY bid submitted and must be inclusive of ALL required signatures. Forms without all required signatures will be considered incomplete.**

- Bidder's Proposal/Packet: Formal response to the specifications outlined in this RFP, including pricing information and details related to the good(s) or service(s) being provided. Please be mindful of formatting responses as requested to ensure clarity.
- Financial Assurance, *if requested* (as indicated on page 5 of this document under "Bid Terms")

**All of the above listed documents are REQUIRED.** (With the exception of financial assurances, which are only required if specified on page 5.)

**\*\*\*Failure to meet specified deadlines, follow specific submission instructions, or enclose all required documents with all applicable signatures will result in disqualification, or in an inability to appropriately evaluate bids.**

## **NOTICE TO VENDORS**

1. The Board of Contract and Supply will make the award to the lowest qualified and responsible bidder.
2. In determining the lowest responsible bidder, cash discounts based on preferable payment terms will not be considered.
3. Where prices are the same, the Board of Contract and Supply reserves the right to award to one bidder, or to split the award.
4. No proposal will be accepted if the bid is made in collusion with any other bidder.
5. Bids may be submitted on an "equal in quality" basis. The City reserves the right to decide equality. Bidders must indicate brand or the make being offered and submit detailed specifications if other than brand requested.
6. A bidder who is an out-of-state corporation shall qualify or register to transact business in this State, in accordance with the Rhode Island Business Corporation Act, RIGL Sec. 7-1.2-1401, et seq.
7. The Board of Contract and Supply reserves the right to reject any and all bids.
8. Competing bids may be viewed in person at the Department of the City Clerk, City Hall, Providence, immediately upon the conclusion of the formal Board of Contract and Supply meeting during which the bids were unsealed/opened. Bids may also be accessed electronically on the internet via the City's [Open Meetings Portal](#).
9. As the City of Providence is exempt from the payment of Federal Excise Taxes and Rhode Island Sales Tax, prices quoted are not to include these taxes.
10. In case of error in the extension of prices quoted, the unit price will govern.
11. The contractor will **NOT** be permitted to: a) assign or underlet the contract, or b) assign either legally or equitably any monies or any claim thereto without the previous written consent of the City Purchasing Director.
12. Delivery dates must be shown in the bid. If no delivery date is specified, it will be assumed that an immediate delivery from stock will be made.
13. A certificate of insurance will normally be required of a successful vendor.
14. For many contracts involving construction, alteration and/or repair work, State law provisions concerning payment of prevailing wage rates apply ([RIGL Sec. 37-13-1 et seq.](#))
15. No goods should be delivered, or work started without a Purchase Order.
16. **Submit 2 copies of the bid to the City Clerk, unless the specification section of this document indicates otherwise.**
17. Bidder must certify that it does not unlawfully discriminate on the basis of race, color, national origin, gender, gender identity or expression, sexual orientation and/or religion in its business and hiring practices and that all of its employees are lawfully employed under all applicable federal, state and local laws, rules and regulations. (See Bid Form 2.)

## **BID TERMS**

1. Financial assurances may be required in order to be a successful bidder for Commodity or Construction and Service contracts. If either of the first two checkboxes below is checked, the specified assurance must accompany a bid, or the bid will not be considered by the Board of Contract and Supply. The third checkbox indicates the lowest responsible bidder will be contacted and required to post a bond to be awarded the contract.
  - a) ☐ A certified check for \$\_\_\_\_\_ must be deposited with the City Clerk as a guarantee that the Contract will be signed and delivered by the bidder.
  - b) ☐ A bid bond in the amount of \_\_\_\_\_ per centum (%) of the proposed total price, must be deposited with the City Clerk as a guarantee that the contract will be signed and delivered by the bidder; and the amount of such bid bond shall be retained for the use of the City as liquidated damages in case of default. Any person signing a bid bond as an attorney-in-fact shall include with the bid bond an original, or a photocopy or facsimile of an original, power of attorney.
  - c) ☐ A performance and payment bond with a satisfactory surety company will be posted by the bidder in a sum equal to one hundred per centum (100%) of the awarded contract.
  - d) ☒ No financial assurance is necessary for this item.
2. Awards will be made within **nighty (90) days of bid opening**. All bid prices will be considered firm, unless qualified otherwise. Requests for price increases will not be honored.
3. Failure to deliver within the time quoted or failure to meet specifications may result in default in accordance with the general specifications. It is agreed that deliveries and/or completion are subject to strikes, lockouts, accidents, and Acts of God.

### **The following entry applies only for COMMODITY BID TERMS:**

4. Payment for partial delivery will not be allowed except when provided for in blanket or term contracts.

### **The following entries apply only for CONSTRUCTION AND SERVICE BID TERMS:**

5. Only one shipping charge will be applied in the event of partial deliveries for blanket or term contracts.
6. Prior to commencing performance under the contract, the successful bidder shall attest to compliance with the provisions of the Rhode Island Worker's Compensation Act, [RIGL 28-29-1, et seq.](#) If exempt from compliance, the successful bidder shall submit a sworn Affidavit by a corporate officer to that effect, which shall accompany the signed contract.
7. Prior to commencing performance under the contract, the successful bidder shall, submit a certificate of insurance, in a form and in an amount satisfactory to the City.

## **BID FORM 1: Bidders Blank**

1. Bids must meet the attached specifications. Any exceptions or modifications must be noted and fully explained.
2. Bidder's responses must be in ink or typewritten, and all blanks on the bid form should be completed.
3. The price or prices proposed should be stated both in **WRITING** and in **FIGURES**, and any proposal not so stated may be rejected. **Contracts exceeding twelve months must specify annual costs for each year.**
4. Bids **SHOULD BE TOTALED** so that the final cost is clearly stated (unless submitting a unit price bid), however **each item should be priced individually**. Do not group items. Awards may be made on the basis of *total* bid or by *individual items*.
5. All bids **MUST BE SIGNED IN INK.**

**Name of Bidder (Firm or Individual):** \_\_\_\_\_

Contact Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone #: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Agrees to bid on (Write the "Item Description" here): Lilian Feinstein Elementary School Art Room & Office Renovations

If the bidder's company is based in a state other than Rhode Island, list name and contact information for a local agent for service of process that **is located within Rhode Island** \_\_\_\_\_

Delivery Date (if applicable): \_\_\_\_\_

Name of Surety Company (if applicable): \_\_\_\_\_

Total Amount for Art Room in Writing\*: \_\_\_\_\_

Total Amount for Art Room in Figures\*: \_\_\_\_\_

Total Amount for Office in Writing\*: \_\_\_\_\_

Total Amount for Office in Figures\*: \_\_\_\_\_

Total Project Amount in Writing\*: \_\_\_\_\_

Total Project Amount in Figures\*: \_\_\_\_\_

### **Alternates**

The following amounts shall be added to or deducted from the Base Bid Amount, contractor to indicate whether alternate is an add or deduct from the base bid. Refer to Section 01 23 00 Alternates.

Alternate #1: Add / Deduct \_\_\_\_\_ \$ \_\_\_\_\_

\*If you are submitting a unit price bid, please insert "Unit Price Bid"

***Use additional pages if necessary for additional bidding details.***

\_\_\_\_\_  
Signature of Representation

\_\_\_\_\_  
Title

**BID FORM 2: Certification of Bidder**  
(Non-Discrimination/Hiring)

Upon behalf of \_\_\_\_\_ (Firm or Individual Bidding),

I, \_\_\_\_\_ (Name of Person Making Certification),

being its \_\_\_\_\_ (Title or "Self"), hereby certify that:

1. Bidder does not unlawfully discriminate on the basis of race, color, national origin, gender, sexual orientation and/or religion in its business and hiring practices.
2. All of Bidder's employees have been hired in compliance with all applicable federal, state and local laws, rules and regulations.

I affirm by signing below that I am duly authorized on behalf of Bidder, on

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Representation

\_\_\_\_\_  
Printed Name

### BID FORM 3: Certificate Regarding Public Records

Upon behalf of \_\_\_\_\_ (Firm or Individual Bidding),

I, \_\_\_\_\_ (Name of Person Making Certification),

being its \_\_\_\_\_ (Title or "Self"), hereby certify an

understanding that:

1. All bids submitted in response to Requests for Proposals (RFP's) and Requests for Qualification (RFQ's), documents contained within, and the details outlined on those documents become public record upon receipt by the City Clerk's office and opening at the corresponding Board of Contract and Supply (BOCS) meeting.
2. The Purchasing Department and the issuing department for this RFP/RFQ have made a conscious effort to request that sensitive/personal information be submitted directly to the issuing department and only at request if verification of specific details is critical the evaluation of a vendor's bid.
3. The requested supplemental information may be crucial to evaluating bids. Failure to provide such details may result in disqualification, or an inability to appropriately evaluate bids.
4. If sensitive information that has not been requested is enclosed or if a bidder opts to enclose the defined supplemental information prior to the issuing department's request in the bidding packet submitted to the City Clerk, the City of Providence has no obligation to redact those details and bears no liability associated with the information becoming public record.
5. The City of Providence observes a public and transparent bidding process. Information required in the bidding packet may not be submitted directly to the issuing department at the discretion of the bidder in order to protect other information, such as pricing terms, from becoming public. Bidders who make such an attempt will be disqualified.

I affirm by signing below that I am duly authorized on behalf of Bidder, on

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

---

Signature of Representation

---

Printed Name

## BID FORM 4: Affidavit of City Vendor

Per our Code of Ordinances [Sec. 21.-28.1 \(e\)](#), this form applies to a) the business, b) any political action committee whose name includes the name of the business, c) all persons holding ten (10) percent or greater equity interest or five thousand dollars (\$5,000.00) or greater cash value interest in the business at any time during the reporting period, d) all executive officers of the business entity, e) any spouse or dependent child of any individual identified in a) through d) above.

Executive officers who are not residents of the state of Rhode Island are exempted from this requirement.

Per [R.I.G.L. § 36-14-2](#), “Business” means a sole proprietorship, partnership, firm, corporation, holding company, joint stock company, receivership, trust, or any other entity recognized in law through which business for profit or not for profit is conducted.

Name of the person making this affidavit: \_\_\_\_\_

Position in the “Business” \_\_\_\_\_

Name of Entity \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

The number of persons or entities in your entity that are required to report under [Sec. 21.-28.1 \(e\)](#): \_\_\_\_\_

### Read the following paragraph and answer one of the options:

Within the 12 month period preceding the date of this bid submission with the City of Providence, or with respect to the contracts that are not in writing within the 12 month period preceding the date of notification that the contract has reached the \$100,000 threshold, have you made campaign contributions within a calendar year to (please list all persons or entities required under [Sec. 21.-28.1 \(e\)](#)).

a. Members of the Providence City Council? ☐ Yes ☐ No

- If Yes, please complete the following:

Recipient(s) of the Contribution:

Contribution Date(s):

Contribution Amount(s):

b. Candidates for election or reelection to the Providence City Council? ☐ Yes ☐ No

- If Yes, please complete the following:

Recipient(s) of the Contribution:

Contribution Date(s):

Contribution Amount(s):

c. The Mayor of Providence? ☐ Yes ☐ No

- If Yes, please complete the following:

Recipient(s) of the Contribution:

Contribution Date(s):

Contribution Amount(s):

d. Candidates for election or reelection to the office of Mayor of Providence? ☐ Yes ☐ No

- If Yes, please complete the following:

Recipient(s) of the Contribution:

Contribution Date(s):

Contribution Amount(s):

\_\_\_\_\_  
Signed under the pains and penalties of perjury.

\_\_\_\_\_  
Position

## MBE/WBE Participation Plan

Please complete separate forms for each MBE/WBE subcontractor/supplier to be utilized on the solicitation.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                        |                         |       |                         |      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------|-------|-------------------------|------|
| Bidder's Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                        |                         |       |                         |      |
| Bidder's Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                        |                         |       |                         |      |
| Point of Contact:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                        |                         |       |                         |      |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                        |                         |       |                         |      |
| Email:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                        |                         |       |                         |      |
| Procurement #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                        |                         |       |                         |      |
| Project Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                        |                         |       |                         |      |
| Which one of the following describes your business' status in terms of Minority and/or Woman Owned Business Enterprise certification with the State of Rhode Island? (Check all that apply).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Neither MBE nor WBE |                         |       |                         |      |
| <p>This form is intended to capture commitments between the prime contractor/vendor and MBE/WBE subcontractors and suppliers, including a description of the work to be performed and the percentage of the work as submitted to the prime contractor/vendor. Please note that all MBE/WBE subcontractors/suppliers must be certified by the Office of Diversity, Equity and Opportunity at the time of bid. The MBE/WBE Directory can be found <a href="#">here</a>. Please visit, the <a href="#">City's MBE/WBE page</a> for details of the program (e.g. instructions and requirements).</p> <ul style="list-style-type: none"> <li>• <b>Nonprofit organizations are not required to complete the rest of this form.</b></li> <li>• <b>Construction projects unable to identify subcontractors prior to bid submission (e.g. Design Build) are required to provide updates to the MBE/WBE Outreach Office</b></li> </ul> |                                                                                                        |                         |       |                         |      |
| Name of Subcontractor/Supplier:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                        |                         |       |                         |      |
| Type of RI Certification:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Neither             |                         |       |                         |      |
| Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                        |                         |       |                         |      |
| Point of Contact:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                        |                         |       |                         |      |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                        |                         |       |                         |      |
| Email:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                        |                         |       |                         |      |
| Detailed Description of Work to Be Performed by Subcontractor or Materials to be Supplied by Supplier Per the Scope of Work provided in the RFP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                        |                         |       |                         |      |
| Total Contract Value (\$):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                        | Subcontract Value (\$): |       | Participation Rate (%): |      |
| Anticipated Date of Performance:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                        |                         |       |                         |      |
| I certify under penalty of perjury that the forgoing statements are true and correct.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                        |                         |       |                         |      |
| Prime Contractor/Vendor Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                        |                         | Title |                         | Date |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                        |                         |       |                         |      |
| Subcontractor/Supplier Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                        |                         | Title |                         | Date |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                        |                         |       |                         |      |

**\*If you did not meet the 20% MBE/WBE combined participation goal, submit a Waiver Request Form.**

## **MBE/WBE Waiver Request Form**

**Fill out this form only if you did not meet the 20% MBE/WBE participation goal.**

**State-certified MBE or WBE Prime Bidders are NOT REQUIRED to fill out this form.**

Submit this form to the City of Providence MBE/WBE Outreach Director, Grace Diaz, at [gdiaz@providenceri.gov](mailto:gdiaz@providenceri.gov) <https://dedi.ri.gov/divisions-units/minority-business-enterprise-compliance-office/minority-business-enterprise-mbe>, for review **prior to bid submission**. This waiver applies only to the current bid which you are submitting to the City of Providence and does not apply to other bids your company may submit in the future. **In case a waiver is needed, City Department Directors should not** recommend a bidder for an award if this form is not included, absent or is not signed by the city of Providence MBE/WBE director.

Prime Bidder: \_\_\_\_\_ Contact Email and Phone \_\_\_\_\_  
Company Name, Address: \_\_\_\_\_ Trade \_\_\_\_\_  
Project /Item Description (as seen on RFP): \_\_\_\_\_  
\_\_\_\_\_

To receive a waiver, you must list the certified MBE and/or WBE companies you contacted, the name of the primary individual with whom you interacted, and the reason the MBE/WBE company could not participate on this project.

| <b>MBE/WBE Company Name</b> | <b>Individual's Name</b> | <b>Company Name</b> | <b>Why did you choose not to work with this company?</b> |
|-----------------------------|--------------------------|---------------------|----------------------------------------------------------|
|                             |                          |                     |                                                          |
|                             |                          |                     |                                                          |
|                             |                          |                     |                                                          |
|                             |                          |                     |                                                          |
|                             |                          |                     |                                                          |

I acknowledge the City of Providence's goal of a combined MBE/WBE participation is 20% of the total bid value. I am requesting a waiver of \_\_\_\_\_ % MBE/WBE (20% minus the value of **Box F** on the Subcontractor Disclosure Form). If an opportunity is identified to subcontract any task associated with the fulfillment of this contract, a good faith effort will be made to select MBE/WBE certified businesses as partners.

\_\_\_\_\_  
Signature of Prime Contractor /  
or Duly Authorized Representative

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of City of Providence  
MBE/WBE Outreach Director /  
or Duly Authorized Representative

\_\_\_\_\_  
Printed Name of City of Providence  
MBE/WBE Outreach Director

\_\_\_\_\_  
Date Signed

## **FOR CONSTRUCTION PROJECTS**

### **APPRENTICE REQUIREMENTS (Construction Projects Valued at \$100,000 or More).**

Attention of prospective bidders is called to the fact that this project is to be bid upon and executed under the City of Providence Code of Ordinances Chapter 21 Art. II [Section 21-28.1](#) c(1) and (2) related to utilizing apprentices in the contract. This ordinance outlines requirements for utilizing not less than 15% of total hours worked by apprentices. The City may lower this percentage only if it determines in writing that compliance is not feasible or that it would be unduly cost prohibitive to the project. The attention of prospective bidders is also called to the fact that reporting the efforts undertaken and progress towards achieving the requirements in this ordinance is a condition for payment. Compliance reporting shall be submitted with any contract payment requisition, in a format to be specified by the City. This demonstration of compliance through such reports shall be a condition of the requisition for payment to be processed. Upon the contract being awarded to the successful bidder, a mandatory meeting will be scheduled to review the project requirements relative to apprenticeship requirements and the process and protocols by which these goals will be achieved. At this meeting, specific forms and procedures for the documentation and achievement of these requirements by the successful bidder will be provided, discussed and agreed upon for the execution of the contract.

### **“FIRST SOURCE” REQUIREMENTS.**

Attention of prospective bidders is called to the fact that this project is to be bid upon and executed under the City of Providence Code of Ordinances [Chapter 21 Art. III 1/2 First Source Agreements](#) Sec. 21-91 through 21-96. This ordinance outlines requirements for hiring Providence residents to work on this project. The City may waive this requirement only upon a determination in writing that qualified residents of Providence are not available for the project, pursuant to Sec. 21-94(e). The attention of prospective bidders is called to the fact that reporting the efforts undertaken and progress towards achieving the requirements in this ordinance is a condition for payment. Compliance reporting shall be submitted with any contract payment requisition, in a format to be specified by the City. This demonstration of compliance through such reports shall be a condition of the requisition for payment to be processed. Upon the contract being awarded to the successful bidder, a mandatory meeting will be scheduled to review the project requirements relative to the First Source Agreements and the process and protocols by which these goals will be achieved. At this meeting, specific forms and procedures for the documentation and achievement of these requirements by the successful bidder will be provided, discussed, and agreed upon for the execution of the contract.

# BID PACKAGE SPECIFICATIONS

## Overview

The City of Providence is seeking proposals for renovations to the Art Room and second floor office at Lilian Feinstein Elementary School.

## Scope of Work

**The scope of work for the Lilian Feinstein Elementary School Art Room and Office Renovation is as indicated in the construction documents:**

### Drawings

#### GENERAL INFORMATION

G-00 COVER SHEET

G-01 GENERAL NOTES, ABBREVIATIONS AND SYMBOLS

#### ARCHITECTURAL

A-100 PARTIAL BASEMENT DEMOLITION AND NEW WORK PLAN

A-101 PARTIAL FIRST FLOOR DEMOLITION AND NEW WORK PLAN

AR100 PARTIAL BASEMENT REFLECTED CEILING DEMO AND WORK PLAN

AR101 PARTIAL SECOND REFLECTED CEILING DEMO AND WORK PLAN

A-400 INTERIOR ELEVATIONS WINDOW SCHEDULE, AND DETAILS

IF-101 FURNITURE LAYOUT PLAN

#### MECHANICAL

M-000 MECHANICAL COVER SHEET

M-101 MECHANICAL ART ROOM PLAN

M-102 MECHANICAL OFFICE PLAN

#### ELECTRICAL

E000 ELECTRICAL COVER SHEET

E-101 ELECTRICAL ART ROOM PLANS E-102 ELECTRICAL OFFICE PLANS

E-500 ELECTRICAL DETAILS

#### PLUMBING

P-101 PLUMBING ART ROOM PLAN

### Specifications

**See attached Table of Contents.**

## SUPPLEMENTAL INFORMATION

If the issuing department for this RFP determines that your firm's bid is best suited to accommodate their need, you will be asked to provide proof of the following prior to formalizing an award.

An inability to provide the outlined items at the request of the department may lead to the disqualification of your bid.

*This information is **NOT** requested to be provided in your initial bid that you will submit to the City Clerk's office by the "date to be opened" noted on page 1. This list only serves as a list of items that your firm should be ready to provide on request.*

**All bids submitted to the City Clerk become public record.** Failure to follow instructions could result in information considered private being posted to the city's Open Meetings Portal and made available as a public record.

**You must be able to provide:**

- Business Tax ID will be requested after an award is approved by the Board of Contract and Supply.
- Proof of Insurance.
- Certificate of Good Standing with the Rhode Island Secretary of State.



**BOARD OF CONTRACT AND SUPPLY  
CITY OF PROVIDENCE, RHODE ISLAND**

**CITY OF PROVIDENCE STANDARD TERMS & CONDITIONS**

1. The terms “you” and “your” contained herein refer to the person or entity that is a party to the agreement with the City of Providence (“the City”) and to such person’s or entity’s employees, officers, and agents.
2. The Request For Proposals (“RFP”) and these Standard Terms and Conditions together constitute the entire agreement of the parties (“the Agreement”) with regard to any and all matters. By your submission of a bid proposal or response to the City’s RFP, you accept these Standard Terms & Conditions and agree that they supersede any conflicting provisions provided by bid or in any terms and conditions contained or linked within a bid and/or response. Changes in the terms and conditions of the Agreement, or the scope of work thereunder, may only be made by a writing signed by the parties.
3. You are an independent contractor and in no way does this Agreement render you an employee or agent of the City or entitle you to fringe benefits, workers’ compensation, pension obligations, retirement or any other employment benefits. The City shall not deduct federal or state income taxes, social security or Medicare withholdings, or any other taxes required to be deducted by an employer, and this is your responsibility to yourself and your employees and agents.
4. You shall not assign your rights and obligations under this Agreement without the prior written consent of the City. Any assignment without prior written consent of the City shall be voidable at the election of the City. The City retains the right to refuse any and all assignments in the City’s sole and absolute discretion.
5. Invoices submitted to the City shall be payable sixty (60) days from the time of receipt by the City. Invoices shall include support documentation necessary to evidence completion of the work being invoiced. The City may request any other reasonable documentation in support of an invoice. The time for payment shall not commence, and invoices shall not be processed for payment, until you provide reasonably sufficient support documentation. In no circumstances shall the City be obligated to pay or shall you be entitled to receive interest on any overdue invoice or payment. In no circumstances shall the City be obligated to pay any costs associated with your collection of an outstanding invoice.
6. For contracts involving construction, alteration, and/or repair work, the provisions of applicable state labor law concerning payment of prevailing wage rates (R.I. Gen. Laws §§ 37-13-1 et seq., as amended) and the City’s First Source Ordinance (Providence Code of Ordinances §§ 21-91 et seq., as amended) apply.
7. With regard to any issues, claims, or controversies that may arise under this Agreement, the City shall not be required to submit to dispute resolution or mandatory/binding arbitration. Nothing prevents the parties from mutually agreeing to settle any disputes using mediation or non-binding arbitration.
8. To the fullest extent permitted by law, you shall indemnify, defend, and hold harmless the City, its employees, officers, agents, and assigns from and against any and all claims, damages, losses, allegations, demands, actions, causes of action, suits, obligations, fines, penalties, judgments, liabilities, costs and expenses, including but not limited to attorneys’ fees, of any nature whatsoever arising out of, in connection with, or resulting from the performance of the work provided in the Agreement.
9. You shall maintain throughout the term of this Agreement the insurance coverage that is required by the RFP or, if none is required in the RFP, insurance coverage that is considered in your industry to be commercially reasonable, and you agree to name the City as an additional insured on your general liability policy and on any umbrella policy you carry.
10. The City shall not subject itself to any contractual limitations on liability. The City shall have the time permitted within the applicable statute of limitations, and no less, to bring or assert any and all causes of action, suits, claims or demands the City may have arising out of, in connection with, or resulting from the performance of the work provided in the Agreement, and in no event does the City agree to limit your liability to the price of the Agreement or any other monetary limit.
11. The City may terminate this Agreement upon five (5) days’ written notice to you if you fail to observe any of the terms and conditions of this Agreement, or if the City believes your ability to perform the



**BOARD OF CONTRACT AND SUPPLY  
CITY OF PROVIDENCE, RHODE ISLAND**

terms and conditions of this Agreement has been materially impaired in any way, including but in no way limited to loss of insurance coverage, lapsing of a surety bond, if required, declaration of bankruptcy, or appointment of a receiver. In the event of termination by the City, you shall be entitled to just and equitable compensation for any satisfactory work completed and expenses incurred up to the date of termination.

12. Written notice hereunder shall be deemed to have been duly served if delivered in person to the individual or member of the firm or entity or to an officer of the entity for whom it was intended, or if delivered at or sent by registered or certified mail to the last business address known by the party providing notice.
13. In no event shall the Agreement automatically renew or be extended without a writing signed by the parties.
14. You agree that products produced or resulting from the performance of the Agreement are the sole property of the City and may not be used by you without the express written permission of the City.
15. For any Agreement involving the sharing or exchange of data involving potentially confidential and/or personal information, you shall comply with any and all state and/or federal laws or regulations applicable to confidential and/or personal information you receive from the City, including but not limited to the Rhode Island Identity Theft Protection Act, R.I. Gen. Laws § 11-49.3-1, during the term of the Agreement. You shall implement and maintain appropriate physical, technical, and administrative security measures for the protection of, and to prevent access to, use, or disclosure of, confidential and/or personal information. In the event of a breach of such information, you shall notify the City of such breach immediately, but in no event later than twenty-four (24) hours after discovery of such breach.
16. The Agreement is governed by the laws of the State of Rhode Island. You expressly submit yourself to and agree that any and all actions arising out of, in connection with, or resulting from the performance of the Agreement or relationship between the parties shall occur solely in the venue and jurisdiction of the State of Rhode Island or the federal court located in Rhode Island.
17. The failure of the City to require performance of any provision shall not affect the City's right to

require performance at any time thereafter, nor shall a waiver of any breach or default of this Agreement constitute a waiver of any subsequent breach or default or a waiver of the provision itself.

18. If any term or provision of this Agreement, or the application thereof to any person or circumstance shall, in any extent, be invalid or unenforceable, the remainder of this Agreement shall not be affected thereby, and each term and provision shall be valid and enforceable to the fullest extent permitted by law.