GUAM MEMORIAL HOSPITAL AUTHORITY 850 GOV. CARLOS G. CAMACHO ROAD TAMUNING, GUAM 96913 PHONE: 671-647-2165

TRANSMITTAL SHEET

TO:

Prospective Bidder

FROM:

Hospital Material Management Administrator

DATE:

March 28, 2025

SUBJECT:

GMHA IFB-031-2025 Maintenance & Repairs on the Vertical

Transport Elevators

PAGES:

2 including cover sheet

NOTES:

An acknowledgement via a return email would be appreciated as soon as possible.

DATE / VENDOR ACKNOWLEDGEMENT

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GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÅT ESPETÅT MIMURIÅT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913 Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



March 28, 2025

AMENDMENT #1 GMHA IFB 031-2025 MAINTENANCE & REPAIRS ON THE VERTICAL TRANSPORT ELEVATORS

This amendment is in response to a request submitted by Otis Guam.

Question: We would like to ask for an extension for our bid to be submitted on April 7, 2025. This extension is necessary for us to gather our resources to make a thorough consideration. Our company has corporate offices that are spread out in the states and with the given time frame it was a challenging task to gather all necessary information to come out with our competitive bid. Also, our General Manager Severt Anderson is currently off-Island and will be back on March 31, 2025. Mr Anderson will be our authorized signatory for all required documents.

Response: The request to extend the bid submission deadline is granted.

The current bid submission deadline is Monday, March 31, 2025, at 9:00 a.m. However, to facilitate open competition, we have granted an extension. The new submission deadline is Monday, April 7, 2025, at 9:00 a.m.

Please acknowledge receipt of this amendment by signing and returning it to Materials Management via email to materials.mgmt@gmha.org.

If you have any questions, please feel free to address your letter to Lillian Perez-Posadas MN, RN, and email it to the Materials Management department at materials.mgmt@gmha.org.

Sincerely,

DOLORES PANGELINAN
Hospital Materials Management Department

ACKNOWLEDGMENT:

PRINT NAME (VENDOR)

SIGNATURE DATE