



# Office of General Services

DESIGN & CONSTRUCTION GROUP  
THE GOVERNOR NELSON A. ROCKEFELLER  
EMPIRE STATE PLAZA  
ALBANY, NY 12242

---

## ADDENDUM NO. 5 TO PROJECT NO. 47128

HVAC AND ELECTRICAL WORK  
REPLACE FAN COIL UNITS  
BUILDING 80, PHASE II  
SAGAMORE CHILDREN'S PSYCHIATRIC CENTER  
197 HALF HOLLOW ROAD  
DIX HILLS, NY

February 18, 2026

**NOTE:** This Addendum forms a part of the Contract Documents. Insert it in the Project Manual. Acknowledge receipt of this Addendum in the space provided on the Bid Form.

### HVAC WORK SPECIFICATIONS

1. SECTION 015213 STATE FIELD OFFICE: Discard the Section bound in the Project Manual and substitute the accompanying Section (pages 015213 – 1 thru 015213 – 5) noted “Revised 2/4/2026”.

### HVAC WORK APPENDIX

2. TEMPORARY SITE FACILITY OFFICE TRAILER – LEASE AGREEMENT – CASSONE: Add the attached Document (pages 1 through 2) to the Project Manual.

### GENERAL DRAWINGS

3. Revised Drawing:
  - a. Drawing No. G-003, noted Revised Drawings dated 2/4/2026, accompanies this Addendum and supersedes the same numbered previously issued drawings.

**ELECTRICAL WORK DRAWINGS**

4. Revised Drawing:
  - a. Drawing No. E-110, noted Revised Drawings dated 2/4/2026, accompanies this Addendum and supersedes the same numbered previously issued drawings.

**END OF ADDENDUM**

Brady M. Sherlock, P.E.  
Director, Division of Design  
Design & Construction

SECTION 015213 - STATE FIELD OFFICE

PART 1 - GENERAL

1.1 SECTION INCLUDES

- A. Temporary OGS Trailer: Provide and maintain a “temporary OGS trailer” comprised of new custom built mobile or relocatable office units, new furniture, and new equipment, stair, and ramp for the sole use of the Director’s Representative and staff. Include temporary services and accessories necessary for use of the specified items.
- B. Temporary Site Facility Office Trailer: Transfer lease agreement from Project No. 47045 (HVAC Contract 47045-H) to this project (HVAC Contract 47128-H)..

1.2 SUBMITTALS

- A. Waiver of Submittals: The “Waiver of Certain Submittal Requirements” in Section 013300 does not apply to this Section.
- B. Shop Drawings:
  - 1. Site Plan Temporary OGS Trailer: Show locations of temporary OGS trailer where directed. Indicate holding tanks, utility services, connections and accessible stairs and ramps.
- C. Product Data: Catalog sheets, specifications, and installation instructions, for all major items of the trailers including furnishings and equipment. Submit within 15 days after award of Contract.

1.3 SCHEDULING

- A. Temporary OGS Trailer: Provide units, ready for occupancy by the Director’s Representative and staff, or facility staff, within 30 days after shop drawings specified above are approved.

1.4 QUALITY ASSURANCE

- A. Accessibility Requirements: Provide fully accessible units including stairs and ramps that comply with ICC/ANSI A117.1 as referenced by the Building Code of New York State.
- B. Provide units and all related utility connections in accordance with the NYS Uniform Fire Prevention and Building Code.
- C. Provide certification insignia from New York Department of State that certifies trailer unit is code compliant.

## PART 2 - PRODUCTS

## 2.1 TEMPORARY OGS TRAILER - MOBILE OFFICE UNITS

## A. Manufacturers/Companies:

1. ModSpace, 1620 Route 9, Clifton Park, NY 12065-0511, (518) 371-0384, [www.modspace.com](http://www.modspace.com).
2. Williams Scotsman, Corporate Headquarters, 8211 Town Center Dr., Baltimore, MD 21236, (800) 782-1500, [www.willscot.com](http://www.willscot.com).
3. Anchor Modular Buildings, PO Box 100, Medford, NJ 08055, (866) 396-0227, [www.anchormodular.com](http://www.anchormodular.com).
4. Cassone Leasing, 1900 Lakeland Ave Ronkonkoma NY 11779, (631) 585-7800 [www.Cassone.com](http://www.Cassone.com)

## B. Number, Approximate Size and Model:

1. One, 60 x 23 feet, double-wide office unit by ModSpace.

## C. Unit shall include contained sanitary system with holding tank. Sanitary sewer lines are not required for the office units.

## D. Unit shall include holding tank for potable water service to the office unit.

## E. Office Unit Requirements:

1. Ceiling Height: 8'-0" minimum.
2. Insulation: Exceed code required minimums for insulation. If wood frame construction, exceed the following values, walls > R - 11, floor > R - 25 and roof > R - 25. Provide code requirements and provided insulation values.
3. Exterior Doors: Minimum 2, minimum 34 inches wide, with key-in-lever locksets (U-factor to exceed 0.7). Furnish Director's Representative with three (3) sets of keys.
4. Windows: Approximately 7 percent of exterior wall area with insect screens (U-factor to exceed 0.45).
5. Complete electric ducted heating, ventilating, and air conditioning system with sufficient capacity to maintain a summer office temperature of 75 degrees F and a winter office temperature of 70 degrees F.
6. Electric Water Heater: 6 gal minimum.
7. VCT or sheet vinyl floor finish.
8. Interior partitions to be wood 2 x 4 framing with ½" vinyl covered gypsum board.
9. LED lights in all rooms as required to maintain a minimum of 60-foot candles at desktop level.
10. Bulletin board (4 feet x 6 feet).
11. Toilet room with toilet, grab bars, toilet tissue dispenser, lavatory, built-in medicine cabinet, paper towel dispenser, mirror and sink and faucet in countertop. Provide toilet tissue, paper towel and soap for duration of project.
12. Insulated skirting from bottom of units to grade, around entire unit. Skirting is to be 2' x 4' wood framing with 2" rigid insulation type SM and white ventilated vinyl siding to match unit.
13. Provide electric energy for the duration of the Contract.

14. Pre-wire unit for voice and data (5 connections each) as shown on approved shop drawings.
15. Room Layout: Provide four single offices and a central open office plan for additional desks.
16. Contractor is responsible for assuming the costs associated with demobilization and removal of the site facility office trailer and all services at the end of lease agreement.

## 2.2 TEMPORARY OGS TRAILER - FURNITURE AND EQUIPMENT

### A. Furniture:

1. Four swivel type chairs with arms suitable for use at office desks.
2. Four floor chair mats.
3. Four lockable metal office desks, 30 x 60 inches, double pedestal type with keys. Provide two sets of keys for each desk to the Director's Representative.
4. Ten straight back foldable chairs.
5. One drafting table, 37 x 60 inches.
6. Five shelves built on site at the Director's Representative's direction.
7. One conference table, 44 x 96 inches.
8. One "Planhold" plan rack, adjustable height, floor supported cantilever type, with plan clamps or plan rack sticks.
9. Two lockable 4-drawer letter size file cabinets. Provide two sets of keys for each file cabinet to the Director's Representative.
10. One 4'x 6' wall mounted dry erase board with 10 dry erase markers.
11. One 2'x4' foldable table.

### B. Office Equipment:

1. Two multifunction Printer - HP Office Jet Pro Printer 7740 (to become property of the stat at the end of the project). Provide service agreement, paid in advance for the duration of the project.
  - a. Supplies: 2000 pages per month of 8-1/2 x 11, 500 pages per month of 11 x 17 and toner cartridges for the duration of the project.
2. One Panasonic Voicemail system installed, with programming and maintenance for the duration of the project to handle 3 outside lines and 5 compatible instruments. Provide the instruments and all wiring.
  - a. System - Panasonic KX-TDA50 Digital Hybrid IP-PBX with wall rack.
  - b. Voicemail System - Panasonic KX-TVA50.
  - c. Telephones - Main 2 each KX-T7636.
  - d. Telephone - Regular 3 ea. KX-T7625.
  - e. Provide all wiring between all stations, equipment rack, etc. such that a complete system is installed and operates properly. Maintain the system for the life of the contract.
3. One refrigerated bottled water dispenser, (Hot & Cold Type) with cups, bottled water and necessary supplies. Provide water and cups for duration of contract.
4. One first aid kit.
5. One 15 cubic foot refrigerator, EnergyStar energy efficient model.

6. Fire Extinguisher: Multipurpose Dry-Chemical Type in Steel Container UL-rated 20-A:120-B:C, 20-lb nominal capacity, with monoammonium phosphate-based dry chemical in enameled-steel container.
7. Security System
  - a. Acceptable manufacturer: X10 Wireless Technology, Inc. 19823 58th Place South, Kent, WA 98032, Telephone # 1-800-675-3044, Website address: <http://www.x10.com>
  - b. Acceptable Model: Protector Plus Voice Dialer, 12 piece system, [http://www.x10.com/security/ds7000\\_s\\_12pc\\_ps152.html](http://www.x10.com/security/ds7000_s_12pc_ps152.html)
    - 1) Base Station Voice Dialer Console for Protector Plus - X10 Model # PS561 - Quantity: 1.
    - 2) Lamp Module - X10 Model # LM465 - Quantity: 2.
    - 3) Door/Window Sensor - X10 Model # DS10A - Quantity: Each Door / Window.
    - 4) Security Motion Detector - X10 Model # MS10A - Quantity: 2.
    - 5) Security Remote Control - X10 Model # SH624 - Quantity: 1.
    - 6) Security Keychain Remote - X10 Model # KR10A - Quantity: 2.
    - 7) Battery back-up power.
    - 8) Smoke Detectors – Quantity: 6.
  - c. Maintain the system for the duration of the contract.

C. Retain and pay for the following utility services for the duration of the project:

1. Sanitary Pumping.
2. Potable Water Delivery and Filling.
3. Electrical Service.
4. Telephone / Internet.

## 2.3 TEMPORARY SITE FACILITY OFFICE TRAILER - MOBILE OFFICE UNITS

- A. Transfer lease agreement from Project No. 47045 (HVAC Contract 47045-H) to this project (HVAC Contract 47128-H) within 45 days after award of the contract.
- B. Coordinate the transfer lease agreement with Director's Representative, Project No. 47045 HVAC Contractor and Trailer Leasing Company.
- C. Lease Temporary Site Facility Office Trailer and maintain it for 924 days (31 months).

D. The current cost of the office is a monthly rental cost for the trailer is \$3,836.00. See the Temporary Site Facility Office Trailer - Lease Agreement – Cassone included in the Appendix for details.

E. Retain and pay for the following utility services for the duration of the project:

1. Sanitary Pumping monthly cost to service the bathroom tanks.
2. Potable Water Delivery and Filling: 5 bottles of 5-gal water for each week.

F. Contractor is responsible for assuming the costs associated with demobilization and removal of the site facility office trailer and all services at the end of lease agreement.

## PART 3 - EXECUTION

## 3.1 INSTALLATION

- A. Install units where directed. Remove wheels and store them where directed. Provide ABS pads and tie-downs installed per code requirements.
- B. Provide manufacturer's stair with platform at one exterior door and ADA ramp with platform(s) at one exterior entrance. Each entrance requires canopies serving the platforms. Provide concrete walk-way platforms at stair entrances.
- C. Temporary OGS Trailer Only - Provide 24' x 72' parking area of 6" Sub-base Course Type 2 and maintain for the duration of the contract including snow removal.
- D. Install security system and set up per manufacturer's instructions.
- E. Install the telephone system and internet service and set up per the manufacturer's instructions. Power and telephone service from the utility provider main lines or main building to the trailer by the E-contractor.
- F. Anticipate moving the field office one time on site in order to facilitate construction.

## 3.2 MAINTENANCE AND CLEANING

- A. Maintain and clean the office units for the duration of this Contract. Include the following:
  - 1. Daily removal of rubbish.
  - 2. Daily cleaning of toilet room, including the plumbing fixtures. Replenish toilet room supplies as needed.
  - 3. Weekly mopping of floors.
  - 4. Weekly dusting of offices and other rooms.
- B. Maintain approaches free of mud and snow.
- C. Protect water lines from freezing.
- D. Check and refill water on a twice weekly schedule.
- E. Check and pump sanitary holding tank on a twice weekly schedule.

## 3.3 REMOVALS

- A. Remove the units, furniture, and equipment when directed. Restore permanent facilities used for or connected to temporary office trailers to their original condition or better. Restore the site to pre-construction condition or better.
- B. Clear and grub all overgrown vegetation for the entire area around the temporary office trailers weekly for the duration of the project.

END OF SECTION 015213

# Temporary Site Facility Office Trailer - Lease Agreement - Cassone

## CASSONE LEASING, INC.

## Lease Agreement

RETURN EQUIPMENT TO (LESSOR):  
 1900 LAKELAND AVE.  
 RONKONKOMA, NY 11779  
 (631) 585-7800 PHONE  
 (631) 585-7895 FAX

**Invoice Number 1917752**

Customer Number 86512

Cassone Leasing, Inc. (hereinafter referred to as "Lessor") does hereby lease the equipment below to

Inshallah Mechanical Corporation  
 193 West Hills Road  
 Huntington NY 11746  
 Phone (718) 969-9759 Ext.  
 Fax Contact Carald

**The Equipment will be Located at:**

Sagamore (Double #1)  
 197 Half Hollow Rd  
 Dix Hills NY

Size	Trailer Type	Lease Period
24 x 60	Office Trailer	25 Months

Pro Rated  Special (do not pro rate)

PO #	
Start Billing	8/15/2023
End Billing	
Monthly Rate 9/ 1/23 / 9/ 30/23	\$1,820.00
Pro rated 8/15/2023 / 8/ 31/23	\$1,051.81
	\$98.00
	\$1,532.00
	\$1,520.00
	\$3,864.00
	\$4,850.00
	\$500.00
	\$1,532.00
	\$480.00
	\$640.00
	\$4,600.00
	\$0.00
	\$0.00

- Additional Charges
- MONTHLY RENTAL - STEPS
  - DELIVERY - STANDARD
  - SETUP - INSTALL ANCHORS
  - SETUP - INSTALL VINYL SKIRTING
  - SETUP - COMPLEX INSTALL
  - MODIFICATIONS - SECURITY PACKAGE
  - RETURN DELIVERY - STANDARD
  - DISMANTLE - REMOVE ANCHORS
  - DISMANTLE - REMOVE VINYL SKIRTING
  - DISMANTLE - DISMANTLE COMPLEX

Make all checks payable to Cassone Leasing Inc.  
 Lessee assumes full responsibility for all damages to Lessee's premises during delivery and pick up of equipment and agrees to hold Cassone harmless from same. Lessee must provide Cassone with a current certificate of insurance covering the leased equipment within 10 business days. Required coverage listed on back. Lessee responsible and liable for any damages or theft of equipment. Terminations are not prorated. Rental is on a monthly basis. Storage Units are for on site storage use only. Trailer removal or relocation by Cassone Leasing, Inc. only. Notice has to be given 30 days in advance prior to termination at (631) 585-7839. Mon. to Fri. 9:00 am to 3:00 pm Lessee responsible for his own insurance. All Deferred Charges Are Due Payable Upon Termination and Pick Up Of Leased Equipment.

Pre Tax Total	\$22,487.81
SUFFOLK COUNTY Tax Rate	0.08625
Sales Tax	\$1,939.57
Security	\$0.00
<b>c.o.d. Total Due:</b>	<b>\$24,427.38</b>
Insurance Value	\$145,350.00

Above figures do not include sales tax.  
 Customer to provide certificate of insurance.  
 Electrical, water, sanitary, and other utility connections are installed by others.

Payment Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Ground is to be level and site prepared for delivery. Site must be clear and accessible.  
 If a translift or forklift is required to place the office trailer or container, an extra charge will apply  
 Purchase Order # Required before placing order. Payment within 30 days.

Contact Name	Carald 718-514-9577
Cross Street	L.I.E.
Notes	

Lessee is responsible for the full term of the lease from its inception date. A LATE PAYMENT CHARGE OF 2% WILL BE ASSESSED AGAINST BALANCE OVER 30 DAYS. No agent, employee or representative of Lessor has any authority for any representation or warranty concerning the Equipment leased pursuant to the Lease that is not specifically included herein. Lessee acknowledges that it is not, in leasing the Equipment, relying upon any warranty, promise, or representation not set forth in the Lease and assents to all the terms set forth therein unless otherwise set forth in addenda attached thereto. Lessor's obligations under the Lease shall not be subject to any additional provision inconsistent with the Lease that may be contained in the Lessee's Purchase Order. IN WITNESS WHEREOF, the parties hereto have executed this Agreement subject to the terms and conditions herein set forth on both sides of this Agreement.

Signed by duly authorized agents this 15 day of August 2023  
 By Guru Prasad  
 Name Tom Samdolski Cassone Leasing, Inc. SIGNATURE OF LESSEE OR AUTHORIZED AGENT  
 Name Guru Prasad (Print Name)

**CASSONE LEASING, INC.**

RETURN EQUIPMENT TO (LESSOR):  
 1900 LAKELAND AVE.  
 RONKONKOMA, NY 11779  
 (631) 585-7800 PHONE  
 (631) 585-7895 FAX

**Lease Agreement**

**Invoice Number 1917753**

Customer Number 86512

Cassone Leasing, Inc. (hereinafter referred to as "Lessor") does hereby lease the equipment below to

Inshallah Mechanical Corporation  
 193 West Hills Road  
 Huntington NY 11746  
 Phone (718) 969-9759 Ext.  
 Fax Contact Carald

**The Equipment will be Located at:**

Sagamore (Double #2)  
 197 Half Hollow Rd  
 Dix Hills NY

Size	Trailer Type	Lease Period
24 x 60	Office Trailer	25 Months

Pro Rated  Special (do not pro rate)

PO #	Start Billing	8/15/2023
	End Billing	
Monthly Rate 9/ 1/23 / 9/ 30/23		\$1,820.00
Pro rated 8/15/2023 / 8/ 31/23		\$1,051.81
		\$98.00
		\$1,532.00
		\$1,520.00
		\$3,864.00
		\$4,850.00
		\$500.00
		\$1,532.00
		\$480.00
		\$640.00
		\$4,600.00
		\$0.00
		\$0.00
Pre Tax Total		\$22,487.81
SUFFOLK COUNTY Tax Rate		0.08625
Sales Tax		\$1,939.57
Security		\$0.00
<b>c.o.d. Total Due:</b>		<b>\$24,427.38</b>
<b>Insurance Value</b>		\$145,350.00

**Additional Charges**

- MONTHLY RENTAL - STEPS
- DELIVERY - STANDARD
- SETUP - INSTALL ANCHORS
- SETUP - INSTALL VINYL SKIRTING
- SETUP - COMPLEX INSTALL
- MODIFICATIONS - SECURITY PACKAGE
- RETURN DELIVERY - STANDARD
- DISMANTLE - REMOVE ANCHORS
- DISMANTLE - REMOVE VINYL SKIRTING
- DISMANTLE - DISMANTLE COMPLEX

Make all checks payable to Cassone Leasing Inc.  
 Lessee assumes full responsibility for all damages to Lessee's premises during delivery and pick up of equipment and agrees to hold Cassone harmless from same. Lessee must provide Cassone with a current certificate of insurance covering the leased equipment within 10 business days. Required coverage listed on back. Lessee responsible and liable for any damages or theft of equipment. Terminations are not prorated. Rental is on a monthly basis. Storage Units are for on site storage use only. Trailer removal or relocation by Cassone Leasing, Inc. only. Notice has to be given 30 days in advance prior to termination at (631) 585-7839. Mon. to Fri. 9:00 am to 3:00 pm Lessee responsible for his own insurance. All Deferred Charges Are Due Payable Upon Termination and Pick Up Of Leased Equipment.

Above figures do not include sales tax.  
 Customer to provide certificate of insurance.  
 Electrical, water, sanitary, and other utility connections are installed by others.

Ground is to be level and site prepared for delivery. Site must be clear and accessible.  
 If a translift or forklift is required to place the office trailer or container, an extra charge will apply  
 Purchase Order # Required before placing order. Payment within 30 days.

Contact Name	Carald 718-514-9577
Cross Street	L.I.E.
Notes	

Lessee is responsible for the full term of the lease from its inception date. A LATE PAYMENT CHARGE OF 2% WILL BE ASSESSED AGAINST BALANCE OVER 30 DAYS. No agent, employee or representative of Lessor has any authority for any representation or warranty concerning the Equipment leased pursuant to the Lease that is not specifically included herein. Lessee acknowledges that it is not, in leasing the Equipment, relying upon any warranty, promise, or representation not set forth in the Lease and assents to all the terms set forth therein unless otherwise set forth in addenda attached thereto. Lessor's obligations under the Lease shall not be subject to any additional provision inconsistent with the Lease that may be contained in the Lessee's Purchase Order. IN WITNESS WHEREOF, the parties hereto have executed this Agreement subject to the terms and conditions herein set forth on both sides of this Agreement.

Signed by duly authorized agents this 15 day of August 2023

By \_\_\_\_\_  
 Cassone Leasing, Inc.  
 Name Tom Samdolski

By Guru Prasad  
 SIGNATURE OF LESSEE OR AUTHORIZED AGENT  
 Name Guru Prasad  
 (Print Name)

Payment Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_



