

BOONE COUNTY, MISSOURI

Request for Proposal #: 67-30DEC08 – Feasibility Analysis for Retrofitting Storm Water Treatment Structures or Best Management Practices

ADDENDUM #1 - Issued December 18, 2008

This addendum is issued in accordance with the Introduction and General Information, the Scope of Services, and the Response Page of the Request for Proposal and is hereby incorporated into and made a part of the Request for Proposal Documents. Offerors are reminded that receipt of this addendum MUST be acknowledged and submitted with Offeror's *Proposal*.

Specifications for the above noted Request for Proposal and the work covered thereby are herein modified as follows, and except as set forth herein, otherwise remain unchanged and in full force and effect:

I. Add to RFP INTRODUCTION AND GENERAL INFORMATION:

- 1. The Pre-Proposal Conference Attendance Sheet is provided per request. See Attachment A
- 2. Add section 2.3.4. to Pre-Proposal Conference as follows:

Pre-Proposal Presentation Information- For a copy of the presentation given during the pre-proposal meeting you may visit this website: http://www.helpthehinkson.org/Info.asp

II. Add to RFP SCOPE OF SERVICES:

1. Add Section 3.2.2.1. to Background Information as follows:

General Project Background Information Continued- This project will have approximately \$166,000 available for retrofitting one or more stormwater BMPs within the hotspot area.

2. Add section 3.3.3. to Minimum Requirements as follows:

Projected Project Time Schedule - The estimated time from notice to proceed until desired project completion is three to four months.

3. Add Section 3.3.4. to Minimum Requirements as follows:

The County of Boone has budgeted \$25,000 for this project.

4. Delete Section 4.2.1.C.:

C. Cost – Identify all costs including expenses to be charged for performing the services necessary to accomplish the objectives of the contract. The Offeror is to provide a fully detailed budget including estimated staff time, costs for travel. Supplies, equipment, and any additional contractual services.

III. Remove and Replace Response Page With Attached Revised Response Page:

See Attachment B.

You must sign and return this Addendum. Any Proposal returned without this Addendum attached will be considered non-responsive.

By: Tyson Boldan, Buyer

Boone County Purchasing

OFFEROR has examined copy of Addendum #1 to Request for Proposal # 67-30DEC08 – Feasibility Analysis for Retrofitting Stormwater Treatment Structures or Best Management Practices, receipt of which is hereby acknowledged:

Company Name:		

Phone Number:		Fax Number:	
Authorized Representative S	Signature:	Date:	
Authorized Representative I	Printed Name:	1	_

Attachment A

PRE-PROPOSAL CONFRENCE SIGN IN SHEET

67-30DEC08 – Feasibility Analysis for Retrofitting Stormwater Treatment Structures or Best Management Practices

Thursday, December 11, 2008, 10:30 a.m.

	Representative Name	Business Name	Telephone Number	Fax Number
1.	Melinda Bobbitt	Boone County Purchasing	886-4391	886-4390
2,	Tyson Boldan	Boone County Purchasing	886-4392	
3.	Scott Hamilton	Boone County Planning & Building	886-4343	
4.	PATRICK DEVANEY	A CIUL GROUP	817-5750	817-1677
_5.	Lisa Fennewald	Horner & Shifting	314-531-4321	314-531-6966
6.	JEFF KACHTANEK	A CIVIL GROW	817-5150	817-1677
7.	Copy Daver	A CIVIL GROUP	817-5750	817-1674
8.	JonBakker	BUR	216 363 2676	216 363 0027
9.	Bill Florec	Boone County Planning	886-9330	386-4340
10.	David Ellermann	Intuition + Logic	(636) 777-3000	(314)432-5812
11.	Christing Luebbeit	<i>y</i>	513-442-4537	573-442-454
12.	Paul Mortz	Civil + Environmental Consultan	314-656-4566	314-1.56-4595
13.				
14.				
15.				

Attachment B

5. Revised Response Page

In compliance with this Request for Proposal and subject to all the conditions thereof, the Offeror agrees to furnish the services/equipment/supplies requested and proposed and certifies he/she has read, understands, and agrees to all terms, conditions, and requirements of this proposal and is authorized to contract on behalf of the firm named below.

Note: This form must be signed. All signatures	must be original and not photocopies.
Company Name:	
Telephone:	
Federal Tax ID (or Social Security #):	
Print Name:	Title:
Signature:	Date:
of all parties involved in the response, to i	consible for coordinating the efforts and personnel include, but not be limited to, oral presentations, to request for clarification, if any. Provide the
Name: Organization: Address: E-mail: Phone Number: Fax:	,