ADDENDUM #1 - Issued July 31, 2018

This addendum is issued in accordance with the Primary Specifications in the Request for Bid and is hereby incorporated into and made a part of the Request for Bid Documents. Offerors are reminded that receipt of this addendum must be acknowledged and submitted with Offeror’s Response Form.

Specifications for the above noted Request for Bid 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.

1) Replace 2.12. with

2.12. Contractor Qualifications and Experience: Bidders must provide evidence that they have past experience in the type of work as outlined in the attached specifications for a minimum of three years. Bidder shall submit, with the bid, the name, address, telephone number and point-of-contact for a minimum of three organizations for which the bidder has provided similar services within the preceding 36 months. References may be checked prior to award. Any negative responses received may result in disqualification of the bid. Exhibit A – Prior Experience may be used to list references.

2) Replace 2.15. with

2.15. Invoices: The County’s purchase order number must appear on the invoice. All contracted work done for the County on a “time and material” basis must include the following information with all invoices:
   1. Date(s) work performed.
   2. Quantity of material applied and where it was applied. (per roadway)
   3. Amount for service and material.
OFFEROR has examined **Addendum #1** to Request for Bid# 37-07AUG18 – *Magnesium Chloride Application – Term & Supply*, for Boone County Road & Bridge receipt of which is hereby acknowledged:

Company Name: ____________________________________________

Address: _________________________________________________

Phone Number: ___________ Fax Number: _________________

E-mail: __________________________________________________

Authorized Representative Signature: _______________ Date: ______

Authorized Representative Printed Name: _____________________________