
**THIS ADDENDUM SHALL BECOME A PART OF THE SOLICITATION
AND MUST BE ACKNOWLEDGED**

Request For Proposal RFP-22-149 – Non-potable Irrigation Conversion – dated October 13, 2022

CLARIFICATIONS:

- Remove schedule 80 sleeve requirement for irrigation wiring conduit. All wire will be direct bury.
- Remove line 6 from alternate bid items (replace valve box covers / raise as needed).
- Remove line 7 from alternate bid items (adjust and raise all irrigation heads).

El Paso County will only accept electronic bid proposals submitted through the Rocky Mountain E-Purchasing system. A Submittal Log will be posted after the County has had an opportunity to review and verify the submittals offered to the County.

The original Offer must be received before the due date and time through electronic package through the Rocky Mountain E-Purchasing system. The Vendor is responsible for ensuring their proposal is posted by the due date and time outlined in the solicitation document.

If the submittal arrives late, it will not be included in the electronic lockbox.

ADMINISTRATION:

- The question period has expired.
- With clarifications to the alternate bid items, please use updated Excel Pricing Form when submitting proposals.
- New Phone Dial-in for bid openings.
 Bidders
 1. Dial access number: 1-719-520-7660
 2. Enter the participant-guest pass code: 51488#
 3. Attendee Access Code: 1234#
- Adjust completion date to 3/31/2023. Making the new Term of Contract 12/01/2022 thru 3/31/2023.
- Bid Closing date is being extended. The new Bid Closing date will be 11/16/2022 at 3:00 P.M.

If a submittal is missing any of the above-mentioned documentation the submittal may be returned to the vendor as non-responsive and be deemed ineligible to participate.

Signature below indicates that applicant has read all the information provided above and agrees to comply in full. This addendum is considered as a section of the Request For Proposal and therefore, this signed document shall become consideration and fully submitted with the original package.

PRINT OR TYPE YOUR INFORMATION

Company Name: _____	Fax: _____
Address: _____	City/State/Zip: _____
Contact Person: _____	Title: _____
Email: _____	Phone: _____
Authorized Representative's Signature: _____	Date: _____
Printed Name: _____	Title: _____
Email: _____	Phone: _____