

CHATHAM COUNTY PURCHASING DEPARTMENT

ADDENDUM NO. 1 FOR RFQ NO. 12-0010-3

**DISASTER DEBRIS MONITORING FOR CHATHAM COUNTY PUBLIC
WORKS AND PARK SERVICES**

Please note that the RFP Opening has not been changed

General Information:

Please note the following changes listed below:

1. Page 5, 1.3(A) “Submit an original and one copy” to read Submit “an original and three copies”.
2. **Page 20, 4.1.1(a) QUALIFICATIONS OF THE FIRM**

Provide a description and history of the firm focusing on previous governmental disaster debris monitoring experience. Submitting firms should have a history of large volume projects or a minimum of 500,000 cubic yards. Only corporate experience with local governments as prime contractor will be considered.

Page 20, 4.1.1 (c) QUALIFICATIONS OF THE FIRM

Provide at least five references from large volume projects preferable over 500,000 cubic yards for which the firm has performed services within the past ten (10) years that are similar to the requirements in the Scope of Services. Provide the references contact name, brief description of the service provided, total value of the contract, address, e-mail address, telephone numbers and date of the contract.

3. Please see new attached Proposal Sheet.

DATE

MARGARET H. JOYNER
PURCHASING AGENT
CHATHAM COUNTY, GEORGIA

**PROPOSAL SHEET
FOR DISASTER DEBRIS MONITORING FOR PUBLIC WORKS AND PARK SERVICES
RFP NO. 12-0010-3**

POSITIONS	HOURLY RATES
Project Manager	
Operations Manager	
FEMA Coordinator	
Scheduler/ Expeditor	
GIS Analyst	
Field Supervisor	
Debris Site/Tower	
Environmental Specialist	
Project Inspector (Citizens Site Monitor)	
Load Ticket Data Entry Clerks (QA/QC)	
Billing/Invoice Analyst	
Project Assistant	
Field Coordinator (Crew Monitor)	
OTHER REQUIRED POSITIONS	
Assistance Coordinator	
Data Manager	
GIS Specialist	

***** The hourly rates should be fully burdened*****

Guarantee Response in Hours _____

Guarantee to be on Disaster Site in Hours _____

NAME/TITLE

COMPANY NAME

MAILING ADDRESS

CITY/STATE/ZIP

PHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

THIS BID WILL REMAIN IN EFFECT FOR _____ DAYS FROM THE DATE OF THE BID OPENING.

DISCOUNT(S): _____

TERMS: _____

BUSINESS TAX CERTIFICATE/LICENSE NUMBER: _____

CITY/COUNTY/STATE: _____

RECEIPT OF ADDENDUM NOS. _____ HEREBY ACKNOWLEDGED.

BY: _____

VENDOR SIGNATURE

MINORITY VENDOR/CONTRACTOR? _____ /YES _____ /NO

MINORITY CLASSIFICATION: _____