

RFQ No. 21-34

for

Private Side Lead Service Line Replacement Plumber

ADDENDUM No. 01

December 28, 2021

Any and all changes to the Request for Qualifications are valid only if they are included by written addendum to all potential respondents, which will be emailed prior to the proposal due date. Each respondent must acknowledge receipt of any addenda by indicating in its proposal. Each respondent, by acknowledging receipt of addenda, is responsible for the contents of the addenda and any changes to the bid therein. Failure to acknowledge receipt of addenda may cause the proposal to be rejected. If any language or figures contained in this addendum are in conflict with the original document, this addendum shall prevail.

This addendum consists of the following:

1. Addendum Number One (1) is attached and consists of a total four (4) pages including this cover sheet.

Please contact me at (847-866-2971) or <u>jostman@cityofevanston.org</u> with any further questions or comments.

Sincerely,

Jillian Ostman Purchasing Specialist

RFQ No. 21-34

Private Side Lead Service Line Replacement Plumber

ADDENDUM No. 01

December 28, 2021

This addendum forms a part of the RFQ Documents for RFQ # 21-34 and modifies these documents. This addendum consists of the following:

Clarification:

 Exhibit G – replace Exhibit G in the original RFQ document with the attached Exhibit G M/W/EBE Compliance Form and M/W/EBE Utilization Summary Report.

Note: Acknowledgment of this Addendum is required in the Proposal.

EXHIBIT G

M/W/EBE PARTICIPATION COMPLIANCE FORM

I do h	ereb	y certify that								
partic	ipate	as a Subcontractor or	Gei	neral Contractor		e of firm) intends to referenced above.				
This f	irm is	s a (check only one):								
						least 51% managed gency within Illinois.				
		Women's Business and controlled by a				least 51% managed ency within Illinois.				
						in Evanston for a ially useful function".				
Total	prop	osed price of response)		\$					
Amount to be performed by a M/W/EBE					\$					
Perce	entag	e of work to be perforn	ned	by a M/W/EBE		%				
Inform	natio	n on the M/W/EBE Util	ized	:						
	Nar	me								
	Add	dress								
	Pho	one Number								
	Sigi	ignature of firm attesting to participation								
	Title	e and Date	rirm attesting to participation							
	Тур	Type of work to be performed								
Pleas	e atta	ach:								
1.		per certification docu ropriate box below. Tl			•					
		Cook County Federal Certification City of Chicago			ness Enterpris	se National Council velopment Council				

2. Attach business license if applying as an EBE

EXHIBIT G

M/W/EBE UTILIZATION SUMMARY REPORT

The following Schedule accurately reflects the value of each MBE/WBE/EBE sub-agreement, the amounts of money paid to each to date, and this Pay Request. The total proposed price of response submitted is _____.

				PERCENT OF
MADE/MAIDE/EDE	FIRM TYPE	050//050	AMOUNT OF	TOTAL
MBE/WBE/EBE	(MBE/WBE/	SERVICES PERFORMED	SUB-	CONTRACT
FIRM NAME	EBE)	PERFURIMED	CONTRACT	AMOUNT
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
TOTAL	\$			