



**ADDENDUM #1
IFB NUMBER – B16-094 IP
July 15, 2016**

NAME OF PROJECT: "RAC LOOP REHABILITATION PROJECT"

BID DUE DATE: REMAINS: AUGUST 2, 2016 AT 2:00 PM

This document shall become as fully a part of the above named Bid and Contract Documents as if included and shall take full and complete precedence over anything stated or shown to the contrary in them.

Acknowledgment: Each Offeror shall indicate in the place provided acknowledgment of receipt of this Addendum.

Each and every Offeror, subcontractor, and material supplier shall be responsible for reading each and every item in this Addendum to ascertain the extent and manner it affects the work in which he is interested.

*****CHANGES TO THE PUBLICATION NOTICE*****

The following items and information are corrections and additions to the above referenced project.

1. **BID DUE DATE AND TIME**
REMAINS: AUGUST 2, 2016 AT 2:00 PM

2. CORRECTIONS/ADDITIONS:

1. List of Pre-Bid Conference Attendees
 2. Qualification Statement
- Continues on next page

Offeror shall acknowledge receipt of this addendum by signing below, and this addendum must be returned as part of the proposal.

Signature

Date

Firm

Attachment 1:

List of Pre-Bid Conference Attendees July 15, 2016 10:00 AM

Section B.12.3 Bid Submittal Documents

Please delete: Minimum Qualification per Supplemental Bid Note 2 (Separate Envelope)

Please insert: Exhibit 8 Qualification Statement (**Attachment 2** to Addendum# 1)

Section B.31.1 Bid Documents

Please delete: Minimum Qualification per Supplemental Bid Note 2 (Separate Envelope)

Please insert: Exhibit 8 Qualification Statement (**Attachment 2** to Addendum# 1)

Schedule D

Please delete: Exhibit 8 Notification of Utilities

Please insert: Exhibit 8 Qualification Statement (**Attachment 2** to Addendum#1)



SOLICITATION: B16-094 IP RAC LOOP ROAD REHABILITATION
 NON-MANDATORY PRE-BID MEETING
 07/15/2016 10:00 AM

NAME	DEPT/COMPANY	PHONE	EMAIL
DAN DEANE	Kennedy	719-388-3881	dane@kennedy.com
Alex Melkani	RS&H	303-409-7915	alex.melkani@rsandh.com
Pete Mazzarella	KIEWIT	303-241-5479	Pete.Mazzarella@kiewit.com
Tripp Fox	RS&H	303-409-7917	tripp.fox@rsandh.com
Glenn Jacob	COSA	719-550-1964	glenn@cosa-springs.gov.com
Art Deines	COSA	719-550-1956	art@cosa-springs.gov.com
Ken Cruise	RS&H	903-303-9403	Ken.Cruise@rsandh.com
Lanny Willers	Martina Marzetta	719-591-3364	lanny.willers@martinmarzetta.com
DAN SOPRATO	COS REPORT	719-550-1975	dansoprato@cosreport.com
Loren Miller	Schmidt Const.	719-392-6207	lmler@schmidtconst.com
ESAD Supilovic II	Pyramid Paving Inc	719-310-5708	ESAD@pyramidpaving.com
Dan Wood	Pyramid Paving Inc	719-491-3107	Dan@pyramidpaving.com
Kris Andrews	COSA	719-550-1915	kandrews@springs.gov.com

Please return to Contracting Specialist-Izabela Podlecki

**ATTACHMENT 2
EXHIBIT 8 – QUALIFICATION STATEMENT**

**CITY OF COLORADO SPRINGS
QUALIFICATION STATEMENT**

This statement will provide information which will enable the City to evaluate the qualifications of your firm and staff with regard to the requirements of this Request for Proposal. Please complete this form in its entirety and submit it (in the number of copies requested) along with the other required proposal documents. If a request in the Qualification Statement is contained in the proposal, indicate the section in the proposal where that information can be found.

(PRINT)

FIRM NAME: _____
ADDRESS: _____
CITY STATE ZIP: _____
AUTHORIZED REPRESENTATIVE: _____
TITLE: _____
AUTHORIZED SIGNATURE: _____
PHONE: _____ FAX: _____
E-MAIL ADDRESS: _____

1. TYPE OF BUSINESS

2. TYPE OF LICENSE & LOCATION

CORPORATION INDIVIDUAL
PARTNERSHIP JOINT VENTURE _____
OTHER: _____

3. TYPE OF SERVICE TO BE PROVIDED FOR RFP: _____

4. NUMBER OF YEARS IN BUSINESS: _____

5. ON A SEPARATE SHEET PROVIDE A BRIEF HISTORY OF YOUR FIRM, STAFF SIZE AND EXPERIENCE. SUBMIT A RESUME FOR THE PROJECT MANAGER AND EACH KEY PERSONNEL ASSIGNED TO THIS PROJECT.

6. WHAT OTHER NAME(S) HAS YOUR COMPANY OPERATED UNDER: _____

7. HAVE YOU OR YOUR FIRM EVER FAILED TO COMPLETE ANY WORK AWARDED TO YOU? YES NO IF "YES", EXPLAIN:

8. HAS ANY OFFICER OR PARTNER OF YOUR ORGANIZATION EVER BEEN AN OFFICER OR PARTNER OF ANOTHER ORGANIZATION THAT FAILED TO COMPLETE A CONTRACT WITHIN THE LAST FIVE (5) YEARS? YES NO
IF "YES", EXPLAIN:

9. HAS YOUR FIRM OR ANY PARTNERS OR OFFICERS EVER BEEN INVOLVED IN ANY BANKRUPTCY ACTION? YES NO IF "YES", EXPLAIN:

10. ARE YOU PRESENTLY INVOLVED IN ANY LITIGATION WITH ANY GOVERNMENT AGENCY? YES NO IF "YES", EXPLAIN TYPE, KIND, PLAINTIFF, DEFENDANT, ETC., AND STATE THE CURRENT STATUS:

11. BANK REFERENCE:

ADDRESS: _____
CONTACT: _____ PHONE: _____

12. LIST THREE (3) SIMILAR PROJECTS (LOCAL OR STATE-WIDE) **FROM LAST FIVE (5) YEARS**-INCLUDE LOCATION OF PROJECT, SIZE OF PROJECT (CONTRACT AMOUNT), CONTACT NAME, ADDRESS, TELEPHONE NUMBERS
NOTE: DETAILED INFORMATION ON THESE PROJECTS MAY ALSO BE REQUESTED IN THE RFP PACKAGE.

- 1. Location of Project: _____
Size of Project: _____
Contract Amount: _____
Contact Name and Title: _____
Contract Address: _____
Contact telephone and FAX Numbers: _____
- 2. Location of Project: _____
Size of Project: _____
Contract Amount: _____
Contact Name: _____
Contact Address: _____
Contact telephone and FAX Numbers: _____
- 3. Location of Project: _____
Size of Project: _____
Contract Amount: _____
Contact Name: _____
Contact Address: _____
Contact telephone and FAX Numbers: _____

13. LIST **CURRENT** SIMILAR PROJECTS (LOCAL OR STATE-WIDE) UNDER CONTRACT- INCLUDE LOCATION OF PROJECT, SIZE OF PROJECT (CONTRACT AMOUNT) CONTACT NAME, ADDRESS, TELEPHONE NUMBERS.
NOTE: DETAILED INFORMATION ON THESE PROJECTS MAY ALSO BE REQUESTED IN THE RFP PACKAGE.

- 1. Location of Project: _____
Size of Project: _____

Contract Amount:
Contact Name and Title:
Contact Address:

Contact telephone and FAX Numbers:

2. Location of Project:
Size of Project:
Contract Amount:
Contact Name and Title:
Contact Address:
Contact telephone and FAX Numbers:

3. Location of Project:
Size of Project:
Contract Amount:
Contact Name and Title:
Contact Address:
Contact telephone and FAX Numbers:

14. LIST OF SUB-CONTRACTORS TO BE USED FOR THIS PROJECT:
(INCLUDE NAME, ADDRESS, TELEPHONE NUMBER, TYPE OF WORK)

1. Name:
Address:
Telephone Number:
Type of Work:

2. Name:
Address:
Telephone Number:
Type of Work:

3. Name:
Address:
Telephone Number:
Type of Work:

IF ADDITIONAL INFORMATION IS PROVIDED ON A SEPARATE SHEET FOR ANY OF THE ITEMS, CLEARLY SPECIFY WHERE IT CAN BE LOCATED IN YOUR PROPOSAL PACKAGE.