EL PASO COUNTY
COLORADO

El Paso County
Contracts and Procurement Division
15 East Vermijo Avenue
Colorado Springs, Colorado 80903

REQUEST FOR PROPOSAL RFP #23-003

- **Addendum #1 – January, 11, 2023**

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

Request for Proposal RFP-23-003 – Cattle Guard Replacement Materials - dated January 5, 2023

CLARIFICATIONS:

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
- Responses should follow the Response Format on pages 19-20 and include all responses to all mandatory requirements.
- We will be verifying submittals include the following:
  - Submittal Properly Acknowledged (Cover Sheet)
  - Addendum(s) Acknowledged
  - Required Documentation
  - Evaluation Criteria Documentation
  - Submission Form
  - Completed W9
  - Warranty
  - Pricing Form
  - Product Information Form(s)

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.

RESPONSE TO QUESTIONS:

No Questions Received.

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: _____