

PROCUREMENT DEPARTMENT
Rm 120 Municipal Services Building
Philadelphia, PA 19102-1685
FAX: (215) 686-4716

CITY OF PHILADELPHIA

Hugh Ortman
Procurement Commissioner

August 5, 2011

BID NUMBER: S2YL6770
TITLE: Repair of Truck Scales
DEPARTMENT: STREETS DEPARTMENT
DATE TO OPEN: August 29, 2011 at 10:30 AM

ADDENDUM # 1

TO ALL BIDDERS:

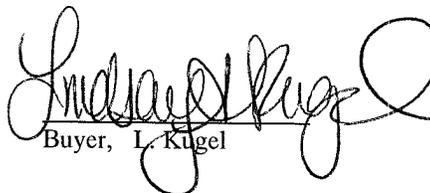
You are hereby notified of the following changes to the above mentioned bid:

REPLACE PAGE 9 OF 24 WITH ATTACHED PAGE 9 OF 24.

SECTION 5: PRICING the following line should be DELETED:

BIDDER SPECIFY IF DELIVERY IS OTHER THAN 30 DAYS: _____

Please sign, date and return this addendum with your bid to the Procurement Department, 1401 J.F.K Boulevard, Bid Room 170A, Philadelphia, PA 19102-1685 as it now becomes a part of the proposal.


Buyer, L. Kugel

AUTHORIZED SIGNATURE

FIRM NAME (PRINT)

DATE

LK/sj

INVITATION AND BID Continuation	CITY OF PHILADELPHIA PROCUREMENT DEPARTMENT PHILADELPHIA, PA 19102 - 1685	BID NUMBER S2YL6770	PAGE OF 9 24
		FIRM NAME (Must be filled in)	

1.10 SITE INSPECTION

Bidder is responsible for examining prior to bid submission, in detail the site(s) of the work to be done, shall acquaint himself with conditions affecting the work, and if applicable, shall take his own measurements for which he will be held responsible. The bid shall be prepared with due regard to the conditions existing or to be anticipated at the site(s) of the work.

Attendance at the site is Mandatory. Failure to submit a signed Certification of Site Visit form will disqualify bidder. (See "Certification of Site Visit" form below).

MANDATORY SITE VISIT CERTIFICATION

BID NO. **S2LY6770**

(TO BE SUBMITTED WITH BID PACKAGE)

Vendor must contact Mr. Mark Draber or Mr. Sylvester Montague at (215) 686-5091 or (215) 686-5554, to make arrangements to visit the site for inspection.

This form MUST be signed and dated by a representative of **Sanitation Division of the Street Department** to certify that the below vendor inspected the area as per specifications.

FAILURE TO VISIT THE SITE WILL DISQUALIFY YOUR BID.

COMPANY NAME: _____

ADDRESS: _____

CITY/STATE/ZIP CODE: _____

PHONE NO.: _____ FAX NO.: _____

CITY REPRESENTATIVE: _____

DEPT.: _____

NAME: _____

SIGNATURE: _____

DATE: _____