

# JACKSON COUNTY BOARD OF COUNTY COMMISSIONERS

RFP #2122-ENG-01

# Annual Contract for Culvert Pipe

### **ADDENDUM 1**

**November 1, 2021** 

The purpose of this addendum is to provide additional forms that were unintentionally excluded from the original bid documents. The following two (2) forms should be completed where applicable and included in all bid response submittals:

- Experience Statement
- Subcontractor List

Additionally, please ensure all requested documents listed on the attached Bid Packet Contents page are included with submittal.

### **EXPERIENCE STATEMENT**

(TO BE SUBMITTED WITH RESPONSE PACKET)

BID NUMBER: 2122-ENG-01

BID NAME: Annual Contract for Culvert Pipe

List at least three references for work of a similar nature performed within the last three years.

Description of work	Year of project	Dollar amount	Company name:
		of project	Contact person:
			Phone number:
	1 1/ 6		
Description of work	Year of project	Dollar amount of project	Company name:
		of project	Contact person:
			Phone number:
Description of work	Year of project	Dollar amount of project	Company name:
		or project	Contact person:
			Phone number:
Description of work	Year of	Dollar	
Description of work	project	amount of project	Company name:
		or project	Contact person:
			Phone number:
Description of work	Year of	Dollar	1
Description of work	project	amount of project	Company name:
		or project	Contact person:
			Phone number:
December 1 and 1 and 1	17/	D. II.	
Description of work	Year of project	Dollar amount	Company name:
		of project	Contact person:
			Phone number:
	T	T =	1
Description of work	Year of project	Dollar amount	Company name:
		of project	Contact person:
			Phone number:

## SUBCONTRACTOR LIST

(TO BE SUBMITTED WITH RESPONSE PACKET IF SUBCONTRACTORS WILL BE USED)

BID NUMBER: 2122-ENG-01

**BID NAME: Annual Contract for Culvert Pipe** 

	DESCRIPTION OF WORK TO BE DONE:
COMPANY NAME:	
ADDRESS:	
REPRESENTATIVE:	
PHONE NUMBER:	CURRENT FLORIDA LICENSE #:
FAX NUMBER:	CLASSIFICATION:
	DESCRIPTION OF WORK TO BE DONE:
COMPANY NAME:	
ADDRESS:	
REPRESENTATIVE:	
PHONE NUMBER:	CURRENT FLORIDA LICENSE #:
FAX NUMBER:	CLASSIFICATION:
TAX NOMBER.	CLASSIFICATION.
	DESCRIPTION OF WORK TO BE DONE:
COMPANY NAME:	DESCRIPTION OF WORK TO BE DONE:
	DESCRIPTION OF WORK TO BE DONE:
COMPANY NAME:  ADDRESS:	DESCRIPTION OF WORK TO BE DONE:
	DESCRIPTION OF WORK TO BE DONE:
	DESCRIPTION OF WORK TO BE DONE:
ADDRESS:	DESCRIPTION OF WORK TO BE DONE:  CURRENT FLORIDA LICENSE #:
ADDRESS:  REPRESENTATIVE:	
ADDRESS:  REPRESENTATIVE:  PHONE NUMBER:	CURRENT FLORIDA LICENSE #:
ADDRESS:  REPRESENTATIVE:  PHONE NUMBER:	CURRENT FLORIDA LICENSE #:
ADDRESS:  REPRESENTATIVE:  PHONE NUMBER:	CURRENT FLORIDA LICENSE #: CLASSIFICATION:
ADDRESS:  REPRESENTATIVE:  PHONE NUMBER:  FAX NUMBER:	CURRENT FLORIDA LICENSE #: CLASSIFICATION:
ADDRESS:  REPRESENTATIVE:  PHONE NUMBER:  FAX NUMBER:	CURRENT FLORIDA LICENSE #: CLASSIFICATION:
ADDRESS:  REPRESENTATIVE: PHONE NUMBER:  FAX NUMBER:  COMPANY NAME:	CURRENT FLORIDA LICENSE #: CLASSIFICATION:
ADDRESS:  REPRESENTATIVE: PHONE NUMBER:  FAX NUMBER:  COMPANY NAME:	CURRENT FLORIDA LICENSE #: CLASSIFICATION:
ADDRESS:  REPRESENTATIVE: PHONE NUMBER:  FAX NUMBER:  COMPANY NAME:  ADDRESS:	CURRENT FLORIDA LICENSE #: CLASSIFICATION:
ADDRESS:  REPRESENTATIVE:  PHONE NUMBER:  FAX NUMBER:  COMPANY NAME:  ADDRESS:  REPRESENTATIVE:	CURRENT FLORIDA LICENSE #:  CLASSIFICATION:  DESCRIPTION OF WORK TO BE DONE:

# COUNTY ROOM TRUCK

### **Jackson County Board of County Commissioners**

### GENERAL CONDITIONS AND SPECIFICATIONS

(CONT'D)

### **BID PACKET CONTENTS**

#### ADDITIONAL DOCUMENTS REQUIRED IN CONJUNCTION WITH THIS BID

Documents that are in BOLD ARE required for submission. Documents NOT in BOLD are NOT required.

- BID BOND
- PAYMENT BOND
- PERFORMANCE BOND
- PROOF OF WORKMAN'S COMPENSATION INSURANCE
- PROOF OF CURRENT LIABILITY INSURANCE (County may, if necessary request an increase)