

**NOVEMBER 27, 2018
BOARD OF COUNTY COMMISSIONERS
ORANGE COUNTY, FLORIDA
RFP Y19-802-RC / ADDENDUM #2
DESIGN SERVICES FOR THE ORANGE COUNTY CULTURAL COMMUNITY
CENTER
BID OPENING DATE IS NOVEMBER 29, 2018**

This addendum is hereby incorporated into the bid documents of the project referenced above. The following items are clarifications, corrections, additions, deletions and/or revisions to and shall take precedence over the original documents. Underlining indicates additions, deletions are indicated by ~~strikethrough~~.

A. The bid opening date remains unchanged.

B. Questions/Answers/Clarifications.

1. **Question:** Could you please post the following documents discussed at the pre-proposal conference?

- Holden Heights Floor Plan
- Building Assessment Report (existing Gooding's Building)
- Building As-Built Drawings (existing Gooding's Building)

Answer: ~~Please see the attached.~~ These documents will not be available until an award is made for the RFP.

2. **Question:** Form C-Pages appear as 1, 3, and 4 – is there a page 2?

Answer: Please see the attached. Revised Form C-Pages 1-3

C. All other terms and conditions of the IFB remain the same. The Proposer shall acknowledge receipt of this addendum by completing the applicable section in the solicitation or by completion of the acknowledgement information on the addendum. Either form of acknowledgement must be completed and returned not later than the date and time for receipt of the bid.

Receipt acknowledged by:

Authorized Signature

Date Signed

Title

Name of Firm

**Y19-802-RC
Addendum 2
November 27, 2018**

LOCATION

Proposers shall complete and submit the information below to clearly identify the location and applicable percentage of the work to be performed at each location listed. **Also, proposers shall complete and sign the attached pages, 2 through 4, concerning location. NOTE: THE AFFIDAVIT/NOTARIZATION REQUIREMENT (page 4).**

PRIME CONSULTANT/ CONTRACTOR (Name & Address)	CITY	COUNTY	STATE ZIP	PERCENTAGE OF WORK ASSIGNED
1. _____ _____	_____	_____	_____	_____ %
2. _____ _____	_____	_____	_____	_____ %
3. _____ _____	_____	_____	_____	_____ %

**SUBCONSULTANT/SUBCONTRACTOR
(Name & Address)**

1. _____ _____	_____	_____	_____	_____ %
2. _____ _____	_____	_____	_____	_____ %
3. _____ _____	_____	_____	_____	_____ %
4. _____ _____	_____	_____	_____	_____ %
5. _____ _____	_____	_____	_____	_____ %
6. _____ _____	_____	_____	_____	_____ %
7. _____ _____	_____	_____	_____	_____ %

Use additional pages if necessary - Total Percentage must equal 100%

LOCATION (continued)

AFFIDAVIT

Under penalties of perjury, I swear affirm that the preceding location information is true and correct. I also acknowledge that any material misrepresentation will be grounds for terminating for default any contract, which may have been awarded due in whole or part to such misrepresentation. I also understand that false statements may result in criminal prosecution for a felony of the third degree per Section 92.525(3), Florida Statutes.

_____ Authorized Signatory	_____ Name of Proposer
_____ Typed or Printed Full Name	_____ Date
_____ Title	

On this ____ day of _____, 20__, before me appeared (name) _____
_____, to me personally known, who being duly sworn, did execute the
foregoing affidavit, and did state that he or she was properly authorized by (name of firm)
_____ to execute the affidavit and did so as his or her
free act and deed.

Notary Public _____
Commission Expires _____

(seal)
Date _____
State of _____
County of _____