

**August 26, 2019**  
**BOARD OF COUNTY COMMISSIONERS**  
**ORANGE COUNTY, FLORIDA**  
**INVITATION FOR BID (IFB) Y20-114-MV; ADDENDUM # 1**

**STAFF AUGMENTATION – UTILITIES ACCOUNTANT**

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. Additions are indicated by **underlining** and deletions via ~~strikethrough~~.

**A. The Bid Opening Date remains September 10, 2019 at 2:00PM**

**B. Questions and Answers**

- a. Question** – Who is the current incumbent on this contract?

**Answer** – The current Contractor is Associate Staffing and Placement, Inc. Below is the link to the current contract Y16-1080.

<http://apps.ocfl.net/OrangeBids/Termcontracts/listtermcontract.asp?ID=137025&CT=application/pdf&FN=Y16-1080.pdf>

- b. Question** – What is the current pricing on the contract?

**Answer** – The hourly billing rate for regular hours is \$21.28. The overtime billing rate per hour is \$26.25.

- c. Question** – What is the budget allocated to this contract?

**Answer** – Estimated budget is \$50,000 annually.

- d. Question** – How many temps are currently working on the existing contract and will they all be transitioned to the new vendor?

**Answer** – There are currently zero (0) temps currently working on the existing contract.

- e. Question** - Is it a multiple award contract?

**Answer** – Per page 20, Section 2 Special Terms and Conditions, item 4. Award. Award shall be made on an all-or-none total estimated bid basis to the lowest responsive and responsible Bidder.

**ACKNOWLEDGEMENT OF ADDENDA**

- a. The bidder shall acknowledge receipt of this addendum by completing that applicable section in the solicitation or by completion of the acknowledgement information on the addendum. Either form of acknowledgement must be completed and returned no later than the date and time for receipt of the bid.
- b. All other terms and conditions of the IFB remain the same.
- c. Receipt acknowledge by:

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of Firm