

COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government



FINANCE DEPARTMENT PURCHASING DIVISION

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COLUMBUS, GEORGIA 31902-1340
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February 6, 2012

ADDENDUM NUMBER ONE

Pine Grove Municipal Solid Waste Landfill
Phase 4 - Cells 4A, 4B, 4C, 4D, 4E, 4F, 4G and 4H
RFB No. 12-0035

Acknowledgment of receipt of each Addendum must be included with sealed Bid. Include an initialed copy of each Addendum or initial the appropriate area on the Bid Form.

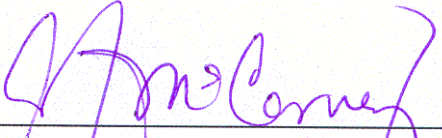
INITIALS: _____ COMPANY: _____

Vendors are informed that the referenced Request for Bids (RFB) is hereby modified, corrected or supplemented as specified, described and set forth in this Addendum.

NON-MANDATORY PRE-BID CONFERENCE/SITE VISIT

A Non-Mandatory Pre-Bid Conference/Site Visit is scheduled for Thursday, February 16, 2012 at 10:30 AM (Eastern). Vendors shall convene in the Scale House at Pine Grove Landfill, which is located at 7160 Sacerdote Lane. Directions are posted on the web page of Columbus Consolidated Government, Department of Public Services, Waste Disposal Division – Pine Grove Landfill (<http://www.columbusga.org/publicservices/landfill.htm#PGL>).

Attendance is not required; however, contractors are requested to notify Columbus Consolidated Government of their intent to participate. Please refer to the attached attendance confirmation form on page 2.


Andrea J. McCorvey, CPPB
Purchasing Division Manager

PRE-BID CONFERENCE/SITE VISIT ATTENDANCE CONFIRMATION

Date: _____

To: Della A. Lewis, Buyer Specialist, CPPB
Email: dlewis@columbusga.org
Fax No. (706) 653-4109

Re: Pine Grove Municipal Solid Waste Landfill Phase 4 – Cells 4A, 4B, 4C, 4D, 4E, 4F, 4G and 4H, RFB No. 12-0035

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The purpose of the conference is to discuss any questions or concerns vendors may have regarding the specifications and to allow vendors to view the work area. Attendance is not required; however, contractors are requested to notify Columbus Consolidated Government of their intent to participate.

If you plan to attend, please return this completed form to the above listed email address or fax number.

FROM: _____

Company Name	Number of Attendees		

Contact Person	Email Address		

Mailing Address	City	State	Zip

Telephone Number	Fax Number		
