



WINNEBAGO COUNTY

— ILLINOIS —

County Administration Building
404 Elm Street
Rockford, Illinois 61101

Ann Johns
Director of Purchasing
Phone: 815-319-4380
Fax: 815-319-4381

October 27, 2021

ADDENDUM TWO

WCHD DEMOLITION AND DEBRIS REMOVAL

RFQ 21Q-2233- 1511 N. SPRINGFIELD AVE.

Bidders are required to indicate on their Quote Forms that they have received and acknowledged this addendum.

Any questions should be directed to the Purchasing Department, 404 Elm Street, Room 202, Rockford, IL 61101 or by telephone 815-319-4380, or email Ann Johns at purchasing@wincoil.us.

THE QUOTE OPENING DATE HAS BEEN CHANGED TO NOVEMBER 3, AT 2:00 P.M.

PLEASE NOTE- THE QUOTE FORM HAS BEEN CHANGED TO ALLOW FOR QUOTES ON THREE LINE ITEMS, INSTEAD OF ONE- PLEASE USE NEW QUOTE FORM BELOW

QUOTE FORM
QUOTE # 21Q-2233

Legal Name of Contractor			
Contact Person			
Business Address			
City, State, ZIP			
Telephone		FEIN No.	
Email			

Contractor's State License No. (if applicable) _____

Contractor Information

Woman Business Enterprise (WBE)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Small Business Enterprise (SBE)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Minority Business Enterprise (MBE)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Veteran Owned Business (VOB)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

IF YES, CHECK THE FOLLOWING BOXES THAT APPLY:

BLACK/AFRICAN AMERICAN	<input type="checkbox"/>	HISPANIC	<input type="checkbox"/>
NATIVE AMERICAN OR ALASKA NATIVE	<input type="checkbox"/>	ASIAN AMERICAN	<input type="checkbox"/>

TO: Winnebago County Purchasing Department

The undersigned, being duly sworn, certifies that he is:

- THE OWNER/SOLE PROPRIETOR
 A MEMBER OF THE PARTNERSHIP
 AN OFFICER OF THE CORPORATION
 MEMBER OF THE JOINT VENTURE

Further, as Contractor, declares that the only person or parties interested in this quote as principals are those named herein; that this quote is made without collusion with any other person, firm or corporation; that he has fully examined the proposed forms of agreement and the contract specifications for the above designated purchase, all of which are on file in the office of the Director of Purchasing, 404 Elm Street, Rockford, Illinois 61101 and all other documents referred to or mentioned in the contract documents, specifications and attached exhibits, including Addenda

No(s): 1, 2 and _____ **issued thereto;**

Further, the Contractor proposes and agrees, if this quote is accepted, to provide all necessary machinery, tools, apparatus and other means of construction, including transportation services necessary to furnish all the materials and equipment specified or referred to in the contract documents in the manner and time therein prescribed.

Further, the undersigned certifies and warrants that he/she is duly authorized to execute this certification/affidavit on behalf of the Contractor and in accordance with the Partnership Agreement or By-laws of the Corporation, and the laws of the State of Illinois and that this Certification is binding upon the Contractor and is true and accurate.

The Affiant deposes and says that he/she has examined and carefully prepared this quote and has checked the same in detail before submitting this quote, and that the statements contained herein are true and correct. Further, the Contractor certifies that he has provided equipment, supplies or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option. Finally, the Contractor, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the quoting schedule.

Signature of Contractor authorizes the County of Winnebago to verify business references.

Having examined the place of work and all matters referred to in the Quote Specifications and Scope of Work, we the undersigned hereby provide a quote to perform the work for each property as shown below AND a total cost of:

Please provide quotes on any or all below;

1511 N SPRINGFIELD AVENUE

REMOVAL OF STRUCTURE A (GARAGE) \$ _____

REMOVAL OF STRUCTURE B (SECONDARY HOUSE) \$ _____

TOTAL CLEANUP OF ALL STRUCTURES AND REMOVAL OF ALL DEBRIS ON PROPERTY

\$ _____

If this quote is accepted by the Winnebago County Health Department as stated above, Contractor agrees to:

1. Commence work within five (5) days of County's Notice to Proceed or Purchase Order
2. Complete work by no earlier than December 1st and later than December 11th and this includes all reports filed.
3. Submit certified copy of payroll as required by payment.

SIGNATURE _____

Name and Title of Signer _____

Dated this _____ day of _____ 20 _____

END OF ADDENDUM TWO