

ADDENDUM NO. 1

FRENCH HILL WATER TANK REHAB BID TOWN OF YORKTOWN WATER DEPARTMENT

To All Bidders:

The information contained in this Addendum supersedes, replaces, or supplements the Contract Documents and is made an integral part of the Contract. ***This Addendum must be attached to each bidder's contract and submitted along with the bid.***

Please be advised of the following additions/changes to the above-referenced bid document:

- The work to be done is on the tank exterior; interior work is considered to be an alternate.
- Bid Proposal Form should have two lines for costs: one for Total Cost and one for Alternate Total Cost.
- Appointments for site inspections should be made through the Distribution Superintendent, Paul Vasillo, (914)245-6111.

A new Bid Proposal Form is attached incorporating the above information.

**TOWN OF YORKTOWN
PUBLIC WORKS CONTRACTS BID**

PART ONE

BID PROPOSAL FORM

The Town of Yorktown seeks bids from qualified parties:

Your Company

Name: _____

Contact

Name: _____

Contact

Phone: _____

Contact

Email: _____

\$ _____

Total Cost (Exterior)

\$ _____

Alternate Total Cost (Interior)

The price(s) set forth above shall remain valid for sixty (60) days from the date of bid award. All of bidder's costs must be factored into and incorporated in the bid price above. Prices in the bid must cover all of bidder's costs. There shall be no additional charges to the Town for delivery, training, set-up, etc. If the contractor must rent special equipment to perform the work, the contractor shall not bill additional fees for such rental costs.

Bidder represents that the rates set forth herein does not exceed its standard charge to all of its customers.

Prior to bidding, Bidder may inspect the field conditions. Appointments are to be made through Paul Vasillo, Distribution Superintendent (914)245-6111.

Name of person authorized to submit bid for bidder:

Signed: _____

[Signature of authorized person]

TITLE of authorized person: _____

BIDDER'S CORPORATE NAME:

BIDDER CONTACT INFORMATION:

PRINT NAME: _____

TITLE: _____

Address: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____@_____

- END OF BID PROPOSAL FORM -