

**ADDENDUM NO. 1**  
**UNDERGROUND UTILITY LOCATE CONTRACT**

**ATTENTION: All Bidders**

You are hereby notified that in Addendum No. 1, the Bid Documents are amended as follows:

**A) ATTACHMENT A**

**(1) Proposal Form:**

DELETE this form and REPLACE with the attached revised Proposal Form. This change modifies the quantities for “Normal Locate Rate (Storm and Electrical Only)” and “No Conflict (Storm and Electrical Only) – Cleared Rate.”

**B) PROPOSAL DUE DATE AND TIME**

The proposal due date and time **has not** changed.

All bidders are required to acknowledge receipt of this addendum on page 5 of the Proposal Form. Failure to do so may cause rejection of the bid.

**CITY OF FEDERAL WAY**



Desiree S. Winkler, P.E.  
Deputy Public Works Director

**ATTACHMENT A – Revised 2/19/19**

**PROPOSAL FORM**

**UNDERGROUND UTILITY LOCATE CONTRACT**

This proposal shall include all material, equipment, labor, license and permit fees, taxes and any other associated costs. Unit prices for all items, all extensions, and the Total Base Bid amount must be shown. Definitions to Item Descriptions are in Attachment B.

**BASE PROPOSAL**

ITEM NO.	ITEM DESCRIPTION	UNIT	2017 QTY*	UNIT PRICE	EXTENDED PRICE	WSST**	TOTAL
1	Normal Locate Rate (Storm and Electrical Only)	EA	<del>800</del> 2,200				
2	No Conflict (Storm and Electrical Only) – Cleared Rate	EA	<del>1,900</del> 2,700				
3	Hourly Rate	Hour	40				
4	Callout / Overtime (OT) Hourly Rate	Hour	20				
5	City Fiber Optic Cable Locate	Hour	40				
Total:							

\*2017 quantities are provided for estimating and bid evaluation purposes only. All work is to be invoiced on an incurred basis. Approximately 900 “no conflict” tickets were from real estate sign installations on private property.

\*\* Only include WA State Sales Tax for applicable portion of scope of work.

List all Addendum(s) received: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The undersigned has read these specifications and is familiar with the site and requirements of this RFP.

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name & Title: \_\_\_\_\_