



City of Stockbridge Purchasing Division

City of Stockbridge City Hall
4640 North Henry Boulevard
Stockbridge, Ga 30281

ADDENDUM NO. 1

Solicitation No.: Request For Qualifications (RFQ) No. 2019-00027

Solicitation Title: Economic Development Strategic Plan

ATTENTION ALL POTENTIAL BIDDERS:

MUST ADDENDUM. READ CAREFULLY AND FOLLOW ALL INSTRUCTIONS.
This addendum forms a part of the contract documents, modifies the original bidding documents and shall be as binding as if contained therein.

Return Addendum with Bid Submittal. Failure to do so may subject the Bidder to disqualification.

Return Completed Revised Bid Pricing Sheets with Bid Submittal.

TO ALL PROSPECTIVE BIDDERS, PLEASE NOTE THE FOLLOWING CHANGES AND CLARIFICATIONS:

Words in ~~striketrough~~ type are deletions from existing text. Words in **bold, underlined** type are additions to existing text.

I. Please see revised "SCHEDULE OF EVENTS"

EVENT	DATE
Request For Qualification Issued to Public	Wednesday, September 11, 2019
Non-Mandatory Pre-Bid meeting City of Stockbridge City Hall 4640 North Henry Boulevard Stockbridge, GA 30281	Thursday, September 26, 2019 (10:00 AM) EDT <u>Wednesday, October 9, 2019 (10:00 am) EDT</u>
Last Day for Questions to be Submitted	Wednesday, October 2, 2019 (12 Noon) EDT <u>Wednesday, October 16, 2019 (12 Noon) EDT</u>
Due Date	Thursday, October 17, 2019 (12 noon) EDT <u>Wednesday, October 30, 2019 (12 Noon) EDT</u>



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ADDITIONS / CLARIFICATIONS / CORRECTIONS

The City of Stockbridge website is the official location for the posting of all solicitation addenda and contract award results. It is the obligation of each Prospective Provider to frequently monitor the City’s website in order to obtain complete and timely information. The City’s website is located at <https://www.cityofstockbridge.com/default.aspx> and Georgia Procurement Registry website https://ssl.doas.state.ga.us/PRSapp/PR_index.jsp

All other terms, conditions, and specifications of the solicitation remain unchanged.

Name of Company / Firm / Organization

Printed Name of Authorized Rep. / Title

Signature of Authorized Representative / Date