



THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA  
 SCHOOL BOARD ADMINISTRATION BUILDING  
 Procurement Management Services  
 1450 N.E. 2nd Avenue, Room 650  
 Miami, FL 33132

Direct All Inquiries To Procurement Management Services Buyer's Name: _____ PHONE: (305) 995-_____ Email: _____ TDD PHONE: (305) 995-2400
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**BID/RFP ADDENDUM**

Date: \_\_\_\_\_

Addendum No. \_\_\_\_\_

BID/RFP No. \_\_\_\_\_ BID/RFP TITLE: \_\_\_\_\_

**This addendum modifies the conditions of the above-referenced BID/RFP as follows:**

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*All information, specifications terms, and conditions for the above-referenced BID/RFP, are included on the document posted on the Procurement Management website at <http://procurement.dadeschools.net>*

*The attached pages containing clarifications, additional information and requirements constitute an integral part of the referenced bid.*

1. If your bid/proposal has not been submitted, substitute the pages marked REVISED and mail your entire bid/proposal package. **REMEMBER TO SIGN THE BIDDER QUALIFICATION FORM.**

OR

2. If your bid/proposal has been submitted, sign and return this addendum form with the revised pages by the time and date indicated on the Bidder Qualification Form. BY SIGNING THIS ADDENDUM, THE VENDOR AGREES TO THE TERMS AND CONDITIONS CONTAINED IN THE BIDDER QUALIFICATION FORM AND ALL RELATED BID DOCUMENTS.

**I acknowledge receipt of Addendum Number \_\_\_\_\_**

PLEASE NOTE: If your firm has forwarded a copy of this bid/proposal to another vendor, it is your responsibility to forward him/her a copy of this addendum.

**(PLEASE TYPE OR PRINT BELOW)**

LEGAL NAME OF BIDDER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE ZIP CODE: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ E-MAIL I.D. \_\_\_\_\_ FAX # \_\_\_\_\_

BY: SIGNATURE (Manual): \_\_\_\_\_  
 OF AUTHORIZED REPRESENTATIVE

NAME (Typed): \_\_\_\_\_ TITLE: \_\_\_\_\_  
 OF AUTHORIZED REPRESENTATIVE

**Addendum #1 – ITB15-011-MT, Student Travel Services.**

Section 2.3 shall be deleted and replaced with the following:

**2.3 REQUIRED INFORMATION TO BE SUBMITTED BY THE PROPOSER**

The proposal submitted must clearly indicate the name of the responding firm, as well as the name, address, and telephone number of the primary contact at proposer’s organization.

In no more than five (5) pages, the Proposer must include the following information within the submitted proposal:

<b>REQUIREMENT</b>	<b>YES</b>	<b>NO</b>
a. Provide a Local Business Tax Receipt. Any person, firm, corporation or joint venture, with a business location in Miami-Dade County, Florida, which is submitting a bid, shall meet the County’s Local Business Tax Receipt requirements in accordance with Miami-Dade County, Florida, code. Bidders with a location outside Miami-Dade County shall meet their local Occupational Tax requirements. A copy of the license must be submitted. Noncompliance with this condition may cause the bidder not to be considered for award.		
b. Provide a plan to cover all aspects of Student Travel Services, as noted in Section 2.2.1.		
c. Demonstrate no less than three (3) years of travel management experience for education tours, grad night, and grad bash.		