

The School Board of Miami-Dade County, Florida SCHOOL BOARD ADMINISTRATION BUILDING Procurement Management Services 1450 N.E. 2 nd Avenue, Room 352 Miami, Fl. 33132

Direct All Inquiries To Procurement Management Services

James Williams PHONE: (305) 995-2305 TDD PHONE: (305) 995-2400

BID/RFP ADDENDUM

Date: August 17, 2006

Addendum No. 1

BID/RFP No.: 127-FF01

BID/RFP TITLE: Auditorium Seating

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

Change Opening date to August 31, 2006. New Bidder Qualification Form Attached.

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

If your bid/proposal has not been mailed, 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 mailed, sign and return this addendum form with the revised pages by the time and date indicated on the revised 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 1.

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

(PLEASE TYPE OR PRINT BELOW)

LEGAI	L NAME OF BIDDER:				
MAILI	NG ADDRESS:				
CITY,	STATE ZIP CODE:				
TELEPHONE NUMBER:		E-MAIL I.D		FAX #	
BY:	SIGNATURE (Manual):				
	OF AUTHORIZED REPRESENTATIVE NAME (Typed)		TITLE:		_

OF AUTHORIZED REPRESENTATIVE

FM-4354 Rev. (07-98)



Name (Typed or Printed)

Of Authorized Representative _____

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA SCHOOL BOARD ADMINISTRATION BUILDING 1450 Northeast Second Avenue

Miami, FL 33132

				Services:			
	•	QUALIFICATION FOR	BUYER NAME: James Williams				
				E-MAIL ADDRESS:.Jwilliams10@dadeschools.net			
RID	IIILE.			PHONE: (305) 995-2305			
				FAX NUMBER 305-523-4997			
				TDD PHONE (305) 995-2400			
Avenu	ue, Miami,		ey will be publicly opened. Bid	room 351, School Board Administration building, 1450 NE 2 ds may not be withdrawn for days after opening.			
MIAM	MI-DADE (ISTITUTE /	COUNTY, FLORIDA, AND	SUBSEQUENT PURCHAS E CONTRACT. UNLESS (AND AWARD OF THE BID BY THE SCHOOL BOARD OF SE ORDERS ISSUED AGAINST SAID AWARD SHA OTHERWISE STIPULATED IN THE BID DOCUMENTS, N			
l.	A.	BIDDER CERTIFICATION	AND IDENTIFICATION				
		I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, o person submitting a bid for the same materials, supplies, or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this bid; and I certify that I am authorized to sign this bid for the bidder.					
	В.	Vendor certifies that it satis Miami-Dade County, Florida		quirements as an entity to do business with the School Board			
II.	INDEMNIFICATION						
	damag court of the per due to of the	ge, injury, liability, cost or expe costs arising out of bodily injur erformance of this Contract (indoor or caused in part by the negli	ense of whatsoever kind or na ury to persons, including death ncluding goods and services p ligence or other culpability of	emnities (as hereinafter defined) against any claim, action, los nature including, but not by way of limitation, attorney's fees a th, or damage to tangible property arising out of or incidental provided thereto) by or on behalf of the Bidder, whether or r f the indemnity, excluding only the sole negligence or culpabilities: The School Board of Miami-Dade County, Florida and			
III.	PERF	PERFORMANCE SECURITY, is required on this bid. YES NO					
		Refer to INSTRUCTIONS TO BIDDERS, para. VII., and VI.					
	IF PERFORMANCE SECURITY IS REQUIRED, PLEASE INDICATE THE TYPE TO BE FURNISHED:						
		Performance Bond Check (Cashier's, Certified, or equal)					
		An original, manual		on the Bidder Qualification Form. o use blue ink)			
Le	enal Nai	me of Vendor					
		ddress					
	•			Zip Code			
	-			-			
	•		E-Maii auuress	:			
_		ature (Original)					
■ UT	f Autnori	ized Representative		Date			

Date ___