



**Central Purchasing
213 South Oliver Drive
Aztec, New Mexico 87410
(505) 334-4551**

**Proposal No. 20-21-07
Architectural Services for ADA Improvements at 22 County Locations**

ADDENDUM #2

January 21, 2021

**CLARIFICATIONS / ADDITIONAL INFORMATION TO THE PROPOSAL SPECIFICATIONS AS
FOLLOWS:**

Proposal Submittal Procedures

- Offerors shall also provide one (1) electronic copy organized in the format requested on a Flash Drive in one of these formats: Adobe PDF (pdf), Microsoft Word (doc), or Microsoft Excel (xls). The electronic copy must be organized and laid out in the same format as outlined on page 3C-5 of the proposal document.
- Offeror shall also include a copy of their current Certificate of Insurance.

Question: Is a Resident Preference Required?

Answer: No these are federal pass-thru awards. The grading criteria was set out by the State to meet those requirements.

Question: Regarding evaluation criteria item 2. under the Construction Services, it references assistance with new facilities. This is not for a new facility. Please advise.

Answer: That is correct they are not new facilities. This criteria will be evaluated as related to new and existing facilities.

Question: Regarding item 4 under Construction Services, isn't this the same criteria as Past Record of Performance listed above under Planning & Design Services?

Answer: The two areas will be evaluated separately. The past performance on the construction grading criteria will be the past performance in construction management of a project once bid to a contractor. The past performance on the planning/design is the past performance of planning/designing of projects.

Attachments:

- **Proposal of Offeror Form (1 page)**
- **Acknowledgement Form (1 page)**

PLEASE ACKNOWLEDGE RECEIPT OF THIS ADDENDUM ON THE PROPOSAL OF OFFEROR FORM.

PROPOSAL OF OFFEROR

THIS FORM MUST BE COMPLETED AND RETURNED BY ALL OFFERORS

**** Do not reference another section within your Proposal Offer as a response.***

The following proposal is made for furnishing the following service for San Juan County, New Mexico.

Proposal No. 20-21-07 Architectural Services for ADA Improvements at 22 County Locations

The undersigned declares that the amount and nature of the service to be furnished is understood and that the nature of this proposal is in strict accordance with the conditions set forth and is a part of this Proposal, and that the undersigned Offeror has read and understands the specifications and conditions of the Proposal.

The undersigned, in submitting this proposal, represents that the Offeror is an equal opportunity employer, and will not discriminate with regard to race, age, religion, color, national origin, ancestry, sex, sexual orientation, gender identity, spousal affiliation, physical or mental handicap or serious medical condition as specified in N.M.S.A. 1978, §§ 28-1-7 (as amended) in the performance of this contract.

The undersigned hereby proposes to perform necessary professional services upon the conditions stated in this proposal after notice of award and execution of a contract.

The rates/fees contained in our proposal are valid for ninety (90) days from the closing of the proposals unless otherwise stated here.

- If applicable, acknowledges receipt of the following Addendum(s):

Addendum No: _____ Date: _____ Addendum No: _____ Date: _____

Addendum No: _____ Date: _____ Addendum No: _____ Date: _____

Respectfully submitted,

By (Individual authorized to contractually bind the Offeror):

(Printed Name)

(Signature)

(Title)

(Date)

(Offeror/Contractor Name)

(Street Address)

(City, State & Zip Code)

(E-Mail Address)

(Phone No.)

(Facsimile No.)

(Federal Tax I.D. No)

ACKNOWLEDGEMENT OF RECEIPT FORM

PROPOSAL NO.: 20-21-07

Architectural Services for ADA Improvements at 22 County Locations

22 PAGES (INCLUDING CAMPAIGN DISCLOSURE FORM).

NOTE: ONLY POTENTIAL OFFERORS WHO COMPLETE AND RETURN THIS FORM WILL RECEIVE COPIES OF ADDENDUMS, IF ISSUED.

PROPOSAL INFORMATION:

In acknowledgement of receipt of the above referenced Proposal Packet, the undersigned agrees that he/she has received a complete copy.

OFFEROR NAME

SIGNATURE OF AUTHORIZED REPRESENTATIVE

PRINTED NAME OF AUTHORIZED REPRESENTATIVE

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NO.: _____ FAX NO.: _____

E-MAIL: _____

RETURN TO:

Jaime Jones
Contracts Analyst
SAN JUAN COUNTY
(505) 334-4548
jjones@sicounty.net

Emailed copies of the Acknowledgement of Receipt Form will be accepted.
Emailed Proposal responses **will not** be accepted.