

**January 8, 2019**  
**BID NO. 330-18/JO PAVEMENT MANAGEMENT SYSTEM**  
**ADDENDUM #3**

The following addendum is hereby made a part of the specifications and shall be considered a part thereof for all purposes, superseding and replacing anything to the contrary in the original specifications.

**QUESTION:**

In the Scope of Work starting on page 62 of 65, the City has outlined Tasks A through I (9 Tasks). However there are only 7 line items in the Bid Schedule form. For example, Task H is a particularly large task having 10 sub-tasks. This one item could be a substantial portion of the overall costs, but I do not see an associated line item in the Bid Schedule. Please advise which Bid Schedule line items correspond to which Scope Tasks.

**ANSWER:**

See attached Revised Bid Schedule

All addenda must be signed by the bidder and included with the bidding documents, in order for bid to be considered.

Handwritten Signature of Authorized Principal(s):

NAME (print): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_

NAME OF FIRM: \_\_\_\_\_

DATE: \_\_\_\_\_

**CITY OF VERO BEACH**  
**REVISED BID SCHEDULE**  
**BID NO. 330-18/JO PAVEMENT MANAGEMENT SYSTEM**

Furnish all equipment, labor, supervision, materials, transportation and services for Leisure Square Pool Resurfacing per the specifications provided.

ITEM#	DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL
1	Initial Pavement Inspection	105	Miles		
2	Inventory Data Input	105	Miles		
3	Digital Video/Photos	105	Miles		
4	GIS Linking	105	Miles		
5	Parking Lot Inspection Including Data Input, Digital Photos, GPS Location and GIS Linking.	1,696,982	SF		
6	Curb ID and Condition Analysis (Block by Block Inspection)	58	Miles		
7	Full Technical Support "MicroPaver software and reports" for 1 Year	1	EA		
8	Develop five (5) year Pavement Restoration Plan (per 2.H in the scope of services)	1	EA		

**NOTE:** Any additional services required by the City e.g. sidewalk condition analysis the City shall negotiate a fee with the Contractor, if required.

**TIME OF COMPLETION:** Total number of calendar days from and including Commencement Date through Completion. Date required to complete the Work in accordance with the Contract Documents. Number of days \_\_\_\_\_. The Time of Completion, however, shall not exceed \_\_\_\_\_ calendar days.

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

Address: \_\_\_\_\_

City \_\_\_\_\_ & State \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name, Typed or Printed: \_\_\_\_\_

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

Title: \_\_\_\_\_