



Fulton County, GA

Department of Purchasing & Contract Compliance

November 1, 2012

Re: 13RFP85271YA- AP, Drop-In Day Care Services

Dear Proposers:

Attached is one (1) copy of Addendum 1, hereby made a part of the above referenced RFP No. 13RFP85271YA-AP, Drop-In Day Care Services.

Except as provided herein, all terms and conditions in the RFP referenced above remain unchanged and in full force and effect.

Sincerely,

Cheryl Cochran

Chief Assistant Purchasing Agent

Winner 2000 - 2009 Achievement of Excellence in Procurement Award • National Purchasing Institute



13RFP85271YA-AP Drop-In Day Care Services
Addendum No. 1
Page Two

This Addendum forms a part of the contract documents and **modifies** the original RFP documents as noted below:

The due date and time for receipt of proposals remains at Thursday, November 29, 2012 11:00 A.M. legal prevailing time.

The following changes are hereby made:

1. Table of Content is deleted in its entirety and replaced with the revised Table of Content, Attachment I
2. Attachment II, Clause No. 2.29 titled "Special Conditions" is hereby added to Section 2 "Instructions To Proposers," and deleted in its entirety from Section 3.3, Scope Of Work, page 22.
3. Under Section 8 titled "Professional Services Sample Contract", Article 34. NOTICES, Email cecil.moore@fultoncountyga.gov is deleted in its entirety.
4. Section 9 Exhibits, Exhibit I titled "Request to Proposal (RFP) Submittal Check List" is deleted in its entirety and replaced by Attachment III, Exhibit I titled, "Request to Proposal (RFP) Submittal Check List."
5. Attachment IV titled "Cost Proposal" is hereby added to Section 9 Exhibits, as Exhibit II.

ACKNOWLEDGEMENT OF ADDENDUM NO. 1

The undersigned proposer acknowledges receipt of this addendum by returning one (1) copy of this form with the proposal package to the Department of Purchasing & Contract Compliance, Fulton County Public Safety Building, 130 Peachtree Street, SW, Suite 1168, Atlanta, Georgia 30303 by the RFP due date and time, **Thursday, November 29, 2012, 11:00 A.M. legal prevailing time.**

This is to acknowledge receipt of Addendum No. 1, _____ day of _____, 2012.

Legal Name of Proposer

Signature of Authorized Representative

Title

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Appendix 1: Policy 800-6, Procedures for Handling Change Orders

2.29 SPECIAL CONDITIONS

The County will provide:

- Utilities, computer system, internet access and telecommunication system. Telecommunications will be provided consistent with Fulton County's specified telecommunication system and made available for all Proposer clinic staff.
- Necessary furniture, fixtures and equipment to properly provide the above listed services in the space provided for under this agreement.
- Janitorial services and facility maintenance including pest control and landscaping.

Fulton County Holidays are as follows:

New Year's Day
Rev. Dr. Martin Luther King
Memorial Day
Independence Day
Labor Day
Veterans Day
Thanksgiving Day
The Day after Thanksgiving
Christmas Eve
Christmas Day

ATTACHMENT III

The following submittals shall be completed and submitted with each proposal (see table below "Required Proposal Submittal Check List."). Please check to make sure that the required submittals are in the envelope before it is sealed. Failure to submit all required submittals may deem your proposal non-responsive.

Submit one (1) Original proposal and five (5) CD's as required in Section 3.1.2 of the RFP.

Item #	Required Proposal Submittal Check List	Check (√)
1	One (1) Proposal marked " Original ", five (5) CD's	
2	*Form E: Georgia Security and Immigration Contractor Affidavit(s) and Agreements <i>Note: If prime contractor is a joint venture, partnership, LLC, each member of the entity must submit an affidavit</i>	
3	*Form F: Georgia Security and Immigration Subcontractor Affidavit (s)	
4	Technical Proposal	
5	Cost Proposal (submitted in a separate sealed envelope)	
6	Financial Information (submitted in a separate sealed envelope)	
7	Acknowledgement of each Addendum	
8	<i>PURCHASING Items below should match information requested in the Technical Proposal Format and Content of Section 3 of the RFP</i> Executive Summary Technical Approach/Detailed Work Plan Project Team Qualifications/Qualifications of Key Personnel Relevant Project Experience Proposer Financial Information Availability of Key Personnel Local Preference Disclosure Form and Questionnaire	
9	Purchasing Forms Form A: Certificate Regarding Debarment Form B: Non-Collusion Affidavit of Bidder/Offer or Form C: Certificate of Acceptance of Request Proposal requirements Form D: Disclosure Form & Questionnaire Form G: Professional License Form H: Local Preference Affidavit of Bidder/Offeror	
10	Office of Contract Compliance Requirements (separate envelope) Exhibit A: Promise of Non-Discrimination Exhibit B: Employment Record Exhibit C: Schedule of Intended Subcontractor Utilization Exhibit D: Letter of Intent to Perform as Subcontractor Exhibit E: Declaration Regarding Subcontractor Practices Exhibit F: Joint Venture Disclosure Affidavit Exhibit G: Prime Contractor/Subcontractor Utilization Report Equal Business Opportunity Plan (EBO Plan) Exhibit H – First Source Jobs Program Information Form 1 Exhibit H – First Source Jobs Program Agreement Form 2	

	Evidence of Insurability, proposer must submit one (1) of the following: Letter from insurance carrier Certificate of Insurance An umbrella policy in excess of required limits for this project	
	Verify that Bidder/Proposer is registered w/Georgia Secretary of State and attach a copy of print out for each	
	Verify Georgia Utility License Number and attach a copy of print out for each Bidder/Proposer (If applicable)	
	Verify Professional License and attach a copy of the print out for each Bidder/Proposer (If applicable)	

COST PROPOSAL FORM

(SUBMIT IN A SEPARATE SEALED ENVELOPE FROM TECHNICAL PROPOSAL)

ADAMSVILLE REGIONAL HEALTH CENTER

Item No.	Labor category	Estimated hours/year	Hourly labor rate
1	Director	520	
2	Assistant Director	1040	
3	Lead Teacher	2080	
4	Teacher	2080	
5	Assistant Teacher Part time	1040	

ATTACHMENT IV

EXHIBIT 2

COST PROPOSAL FORM

(SUBMIT IN A SEPARATE SEALED ENVELOPE FROM TECHNICAL PROPOSAL)

NORTH ANNEX SERVICE CENTER

Item No.	Labor category	Estimated hours/year	Hourly labor rate
1	Director	520	
2	Assistant Director	1040	
3	Lead Teacher	2080	
4	Teacher	2080	
5	Assistant Teacher Part time	1040	

ATTACHMENT IV

EXHIBIT 2

COST PROPOSAL FORM

(SUBMIT IN A SEPARATE SEALED ENVELOPE FROM TECHNICAL PROPOSAL)

OAK HILL CHILD ADOLESCENT AND FAMILY HEALTH CENTERS

Item No.	Labor category	Estimated hours/year	Hourly labor rate
1	Director	520	
2	Assistant Director	1040	
3	Lead Teacher	2080	
4	Teacher	2080	
5	Assistant Teacher Part time	1040	