CITY OF ATLANTA

Kasim Reed
Mayor

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DEPARTMENT OF PROCUREMENT
Adam L. Smith, Esq., CPPO, CPPB, CPPM, CPP, CIPC, CISCC, CIGPM, CPPC
Chief Procurement Officer
asmith@atlantaga.gov

April 1, 2016

Dear Potential Proponents:

Re: FC-8806, Large Diameter Waterline Condition Assessment

Attached is one (1) copy of **Addendum Number 1,** which is hereby made a part of the above-referenced project.

For additional information, please contact Mr. Karl Walbrook, Contracting Officer, at (404) 330-6517 or by email at kwalbrook@atlantaga.gov.

Sincerely,

Adam L. Smith

ALS/kw

ADDENDUM NO. 1

This Addendum No. 1 forms a part of the Request for Proposals ("RFP") and modifies the original solicitation package and any prior Addenda as noted below and is issued to incorporate the following:

- **Revised Deadline Due Date: Thursday, April 14, 2016 @ 2:00 P.M. EDT.**

All questions and inquiries concerning this project should be directed in writing to Karl Walbrook, Contracting Officer, Department of Procurement, 55 Trinity Avenue, S.W., City Hall South, Suite 1900, Atlanta, Georgia 30303 or questions may be e-mailed to kwalbrook@atlantaga.gov .

The Proposal due date has not been modified and Proposals are due on Thursday, April 14, 2016 and should be time stamped in no later than 2:00 P.M. EDT and delivered to the address listed below:

Adam L. Smith, Esq., CPPO, CPPB, CPPM, CPP,
CIPC, CISCC, CIGPM
Chief Procurement Officer
Department of Procurement
55 Trinity Avenue, S. W.
City Hall South, Suite 1900
Atlanta, Georgia 30303

****All other pertinent information is to remain unchanged****

Acknowledgment of Addendum No. 1

Proponents must sign below and return this form with Proposal to the Department of Procurement, 55 Trinity Avenue, City Hall South, Suite 1900, Atlanta, Georgia 30303 as acknowledgment of receipt of this Addendum.

This is to acknowledge receipt of Addendum No. 1 for **FC-8806, Large Diameter Waterline Condition Assessment** on this the _____ day of _____, 20___.

_____
Legal Company Name of Proponent

_____
Signature of Authorized Representative

_____
Printed Name

_____
Title

_____
Date