DEPARTMENT of PUBLIC WORKS

County of Lassen

Pete Heimbigner, Director
Public Works/Transportation

707 Nevada Street, Suite 4
Susanville, CA 96130

☎ **530) 251-8288**
FAX: (530) 251-2675

November 7, 2022

Addendum No. 1 for: LASSEN COUNTY SUSANVILLE VETERAN'S MEMORIAL BUILDING

ROOF REPLACEMENT PROJECT.

Dear Plan Holder:

This addendum is being issued to the contract for the LASSEN COUNTY SUSANVILLE VETERAN'S MEMORIAL BUILDING ROOF REPLACEMENT PROJECT.

Submit bids for this work with the understanding and full consideration of this addendum. The revisions declared in this addendum are an essential part of the contract.

A pre-bid meeting (non-mandatory) will be held at the Project Site, on ~~November 8, 2022 at 9:00 PM~~

The pre-bid meeting (non-mandatory) will be postponed due to weather. The new pre-bid meeting (non-mandatory) will be held at the Project Site on **November 16, 2022 at 2:00 PM.**

This addendum is also being issued to extend the bid opening date.

To Bid Package holders: The information that follows is part of this addendum.

1) The bid opening date is extended to **December 8, 2022 at 4:00 PM.**
2) The last day to submit Contractor Clarification Requests shall be extended to **December 1, 2022 at 5:00 PM.**
3) The last day that and further Addendums are to be issued shall be extended to **December 2, 2022 at 5:00 PM.**

Indicate receipt of this addendum by filling out the Certificate of Addendum Received and faxing to Lassen County Public Works at Fax number 530-251-2675 or email to sstehrenberger@co.lassen.ca.us. This office is sending this addendum by confirmed facsimile or email to all plan holders to ensure that each receives it.

CERIFICATE OF ADDENDUM RECEIVED

The undersigned has received and included Addendum No. 1 in above mentioned contract. All contract prices for the bid that are in this Addendum No. 1 reflect the terms of Addendum No.1.

SIGN HERE _____ Date_____
                                    Signature of Bidder

Print Name_____

Business Name_____

Business Address_____

                            _____

License Number_____