

### ADDENDUM

PROJECT TITLE: Ice Lights Renewal – TD Station	ADD. NO: 1
RFP NO: 2021-082301P	DATE: April 12, 2021
PAGE 1 of 2 (Including Confirmation Sheet)	

Make the following modifications to the above project. Include in the amount of the Proposal, any additions to or deductions from the cost of the work by reason of these instructions.

Sign and attach this Addendum to the Proposal documents and submit with your Proposal. Failure to do so may result in the rejection of your Proposal.

#### Please note the following:

- 1. The RFP respondent shall not be required to supply Appendix D 2) Bid Submittals: life cycle cost of lighting system.
  - a. The life cycle costing calculation will be completed by the City of Saint John based on the variables indicated under Appendix D-2) Bid Submittals
  - b. RFP respondent shall provide the following criteria:
    - i. Zone 1 standards: total kW draw from lighting system
    - ii. Zone 2 standards: total kW draw from lighting system
    - iii. Maintenance Levels: total kW draw from lighting system
- 2. Add to list of acceptable manufacturers: LED/DEL Innovation Design Inc
- 3. All bid submissions must be complete with shop drawings of proposed luminaires which will be reviewed for compliance with the RFP requirements.
- 4. QMJHL standards shall be achieved within "Zone 1" boundary indicated on drawing E-1.
- 5. The closing date and time remains as Thursday, April 15, 2021, 4:00 pm, ADT. Given the delay of this addendum, proponents are now permitted to submit their proposals electronically by emailing their technical and financial proposals, in pdf format, to: <a href="mailto:supplychainmanagement@saintjohn.ca">supplychainmanagement@saintjohn.ca</a>.

#### SIGN AND RETURN THIS ADDENDUM WITH YOUR PROPOSAL

Chris Roberts, SCMP, CPPB	Proponent's Signature
Supervisor	-
Supply Chain Management	



## ADDENDUM

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# **CONFIRMATION - RECEIPT OF ADDENDUM**

Upon receipt of this document, fax this page to (506) 658-4742 to confirm receipt of this addendum.

CONSULTANT'S NAME:		
ADDRESS:		
PHONE:	FAX:	
RECEIVER NAME (PRINT)		
RECEIVER SIGNATURE:		