



ADDENDUM

PROJECT TITLE: Asset Management System	ADD. NO: 3
RFP NO: 2022-703001P	DATE: March 30, 2022
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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.

Questions and Answers

Q1. P-18 Environments – Why do you need 2x test environments (TEST and UAT) in your solution? Will you accept a response with one TEST environment or 2x test environments is mandatory?

A1. A TEST and UAT environments is preferred but is not a mandatory requirement. The UAT environment is to be used exclusively for User Acceptance Testing.

Q2. Are the 29 vehicles for the Fire Department managed by the Fire Department or by the Fleet Management and Transit Dept?

A2. Fire vehicles are managed jointly by Fire Department and Fleet Management and Transit Dept. Both groups will require access to these assets in the AMS.

Q3. To what extent does the City expect integration with Motorola's CRM, for example, if a service request for a pothole is submitted through the City's website, how does the City envision how that service request is triaged into a work order? Will the City consider replacing the existing CRM system if the proposed AMS can significantly mirror the functionality of existing CRM?

A3. Ideally, a service request from the CRM would result in an automated workflow which would result in a work order in the AMS. Integration with the Motorola CRM is not mandatory. The City is not considering replacement of the CRM at this time.

SIGN AND RETURN THIS ADDENDUM WITH YOUR PROPOSAL

Chris Roberts, SCMP, CPPB
Procurement Manager
Supply Chain Management

Proponent's Signature



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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: _____