



DANE COUNTY DEPARTMENT of PUBLIC WORKS, HIGHWAY and TRANSPORTATION

County Executive
Joseph T. Parisi

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Commissioner / Director
Gerald J. Mandli

May 13, 2015

ATTENTION ALL REQUEST FOR PROPOSALS (RFP) HOLDERS

RFP NO. 315010 - ADDENDUM NO. 2

C&D MATERIALS RECOVERY FACILITY EQUIPMENT

DANE COUNTY LANDFILL SITE #2

7102 U.S. HIGHWAY 12 & 18

MADISON, WISCONSIN

BIDS, PROPOSALS DUE: Thursday, May 21, 2015, 2:00 PM.
DUE DATE AND TIME ARE NOT CHANGED BY THIS ADDENDUM

This Addendum is issued to modify, explain or clarify the original Request for Proposals (RFP) and is hereby made a part of the RFP. Proposers must acknowledge this addendum on the proposal form.

PLEASE MAKE THE FOLLOWING CHANGES:

1. Pages PF-1 through PF-3 – Proposal Form

Remove Pages PF-1 through PF-3; replace with new Pages PF-1 through PF-3, issued with this Addendum. These revised pages are marked “**Addendum No. 2**”. The new pages correct Item 3 and Item 9 from Apron Conveyors to Slider Bed Conveyors.

2. Section 01 00 00 – Basic Requirements

Remove all references to “General Conditions” and “Instructions to Bidders”. Those contract documents are **not** being used for this project. The Standard Terms and Conditions provided in Addendum No. 1 will apply.

3. Section 11 90 00 - C&D Waste Processing System Equipment

- a. Part 1.03. Revise fourth bullet in A-Line processing equipment list to: “Slider Bed Conveyor (Picking A-Line) (3)”.
- b. Part 1.03. Revise sixth bullet in B-Line processing equipment list to: “Slider Bed Conveyor (Picking B-Line) (9)”.
- c. Part 2.04 A. Replace text with the following: General Kinematics Model DS-F-60 X 19.5 Vibratory Single Knife De-stoner/Classifier or approved equal.

4. Section 26 05 00 - Common Work Results for Electrical

- a. Part 2.08 B.2. Revise to: “15 HP Slider Bed Conveyor Picking A-Line (3)”.
- b. Part 2.08 B.3. Revise to: “10 HP Slider Bed Conveyor Picking B-Line (9)”.
- c. Part 2.016 B.2. Revise to: “Slider Bed Conveyor (Primary Finger Screen Overs) (2) and Slider Bed Conveyor Picking A-Line (3) set on 2nd potentiometer setting”.
- d. Part 2.016 B.3. Revise to: “Slider Bed Conveyor Picking B-Line (9) set on 3rd potentiometer setting”.

5. Sheet Q100 – General Arrangement

- a. Revise equipment legend descriptions for the following equipment numbers:
 - i. No. 3 – Change description from Apron Conveyor Picking A-Line to Slider Bed Conveyor Picking A-Line
 - ii. No. 9 – Change description from Apron Conveyor Picking B-Line to Slider Bed Conveyor Picking B-Line

6. Sheet Q200 – Equipment Elevations A-C

- a. Revise equipment legend descriptions and elevation callouts for the following equipment numbers:
 - i. No. 3 – Change description from Apron Conveyor Picking A-Line to Slider Bed Conveyor Picking A-Line
 - ii. No. 9 – Change description from Apron Conveyor Picking B-Line to Slider Bed Conveyor Picking B-Line

7. Sheet Q201 – Equipment Elevations D-H

- a. Revise equipment legend descriptions and elevation callouts for the following equipment numbers:
 - i. No. 3 – Change description from Apron Conveyor Picking A-Line to Slider Bed Conveyor Picking A-Line
 - ii. No. 9 – Change description from Apron Conveyor Picking B-Line to Slider Bed Conveyor Picking B-Line

If any additional information about this Addendum is needed, please contact Mike Rupiper at (608) 266-4990, or rupiper.michael@countyofdane.com

Enclosures:

Proposal Form

Name of Proposing Firm: _____

PROPOSAL FORM – ADDENDUM NO. 2

PROPOSAL NO. 315010

**PROJECT: C&D MATERIALS RECOVERY FACILITY EQUIPMENT
DANE COUNTY LANDFILL SITE #2**

**TO: DANE COUNTY DEPARTMENT OF PUBLIC WORKS, HIGHWAY &
TRANSPORTATION PROJECT MANAGER
1919 ALLIANT ENERGY CENTER WAY
MADISON, WISCONSIN 53713**

EQUIPMENT SCHEDULE:

Include a complete list of the individual equipment components with manufacturer and model number (if applicable). Any used, but properly reconditioned “like new” piece of equipment must be indicated. The specifications describe an acceptable unit. Any deviation from the minimum specifications must be identified in detail in the proposal including a description of how the proposed item/s differ from the bid requirements, along with detailed justification for such deviation.

EQUIPMENT SCHEDULE

ITEM	DESCRIPTION	MANUFACTURER	PRICE	COMPLIES WITH SPECS
1	Primary Finger Screen		\$	Yes / No
2	Slider Bed Conveyor (Primary Finger Screen Overs)		\$	Yes / No
3	Slider Bed Conveyor (Picking A-Line)		\$	Yes / No
4	Ferrous Magnet		\$	Yes / No
5	Slider Bed Conveyor (Secondary Finger Screen Infeed)		\$	Yes / No
6	Secondary Finger Screen		\$	Yes / No
7	De-stoner / Air Knife (Single Knife)		\$	Yes / No
8	Slider Bed Conveyor (De-stoner/Air Knife Outfeed)		\$	Yes / No
9	Slider Bed Conveyor (Picking B-Line)		\$	Yes / No
10	Troughing Idler Conveyor (Small Residuals Bunker)		\$	Yes / No
11	Troughing Idler Conveyor (Primary Finger Screen Unders)		\$	Yes / No
12	Slider Bed Conveyor (Fines Bunker Infeed)		\$	Yes / No
13	Dust Collector / Filter		\$	Yes / No

ITEM	DESCRIPTION	MANUFACTURER	PRICE	COMPLIES WITH SPECS
14	Aggregate Conveyor		\$	Yes / No
15	Slider Bed Conveyor (Aggregate on Platform)		\$	Yes / No
16	Elevated Picking Line Platform and Drop Chutes		\$	Yes / No
17	Integrated Electrical Controls, and Safety /Shut-down Features		\$	Yes / No
18	Other:		\$	Yes / No
19	Other:			
20	Other:			
21	Other:			
22	Other:			
23	Other:			
TOTAL PROPOSED COST			\$	

_____ and _____/100 Dollars
 Written Price

ADDENDA:

Receipt of the following addenda and inclusion of their provisions in this Proposal is hereby acknowledged:

Addendum No(s). _____ through _____

Dated _____

COMPLETION:

Dane County Department of Public Works, Highways, & Transportation / Solid Waste Division must have this project completed no later than December 31, 2015. Assuming this Work can be started by June 30, 2015, what dates can you commence and complete this job?

Commencement Date: _____ Completion Date: _____
 (final, not substantial)

I hereby certify that all statements herein are made on behalf of:

(Name of Corporation, Partnership or Person submitting Bid)

Select one of the following:

1. A corporation organized and existing under the laws of the State of _____, or
2. A partnership consisting of _____, or
3. A person conducting business as _____;

Of the City, Village, or Town of _____ of the State of _____.

I have examined and carefully prepared this Proposal from the associated documents and have checked the same in detail before submitting this Proposal; that I have full authority to make such statements and submit this Proposal in (its) (their) (my) behalf; and that the said statements are true and correct. In signing this Proposal, we also certify that we have not, either directly or indirectly, entered into any agreement or participated in any collusion or otherwise taken any action in restraint of free competition; that no attempt has been made to induce any other person or firm to submit or not to submit a Proposal; that this Proposal has been independently arrived at without collusion with any other proposer, competitor, or potential competitor; that this Proposal has not been knowingly disclosed prior to the Proposal Due Date to another proposal or competitor; that the above statement is accurate under penalty of perjury.

The undersigned further agrees to honor the Proposal for ninety (90) days following the proposal due date.

SIGNATURE: _____
(Bid is invalid without signature)

Print Name: _____ Date: _____

Title: _____

Address: _____

Telephone No.: _____ Fax No.: _____

Email Address: _____

Contact Person: _____