## CITY OF NORTH LITTLE ROCK, ARKANSAS COMMERCE DEPARTMENT

Mary Beth Bowman, Director
Amy Smith, Assistant Director for Procurement
Crystal Willis, Admin. Sect./Assistant Purchasing Agent



120 MAIN STREET, North Little Rock, AR 72114 P.O. BOX 5757, North Little Rock, AR 72119 501-975-8881Phone 501-975-8885 Fax

2020

## **Addendum to Project**

Bid Number:	20-3675	Date Issued: Tuesday, October 27, 2020
Date & Time Bid	Opening:	Thursday, October 29, 2020 @ 10:00am.

## Timber Creek Ct. Drainage Improvements

## Addendum #1

Contractor shall provide a list of similar projects and references as stated in the "Experience of Bidder" section on Page 5 of the Bid Form. Rejection of bid will be considered if failure to provide adequate experience.

- → Please direct technical questions and/or comments to: David Cook at 501-371-8339 or dcook@nlr.ar.gov.
- $\rightarrow$  General questions should be directed to the Commerce Department at 501-975-8881.

Responses to relevant questions will be posted on the Commerce web page at <a href="www.nlr.ar.gov">www.nlr.ar.gov</a>, click on the tab "Business", click on "Bids and Vendors" and then click on "Current Bids".

The City of North Little Rock encourages participation of small, minority, and woman own business enterprises in the procurement of goods, services, professional services, and construction, either as a general contractor or sub-contractor. It is further requested that whenever possible, majority contractors who require sub-contractors, seek qualified small, minority, and woman businesses to partner with them.

If you are obtaining this bid from our website, please be reminded that addendums may occur. It is therefore advisable that you review our listings for attachments including any changes to the bid.

Acknowledgement of Adder	ndum #1
Upon signing this page, the organization certifies that they have read and agree to the requirement information requests.	ents set forth in this bid including conditions set forth and
Name of Firm:	Phone No.:
Tax I.D. #.:	
Business Address:	
Signature of Authorized Person:	

**UNSIGNED COVER SHEETS STATEMENTS WILL BE REJECTED**