

## REQUEST FOR QUALIFICATIONS CITY OF NORTH LITTLE ROCK, ARKANSAS

## MARY BETH BOWMAN DEPARTMENT OF COMMERCE 120 MAIN STREET - P.O. BOX 5757 (72119) NORTH LITTLE ROCK, ARKANSAS 72114 501-975-8881

RFQ NO. <u>\_18-3558</u> DATE ISSUED: <u>SATURDAY, NOVEMBER 24, 2018</u>

DATE & TIME OF RFQ OPENING: MONDAY, DECEMBER 3, 2018 @ 10:00 A.M.

## Addendum #1

A. *Questions*. All questions regarding this RFQ shall be submitted in writing and directed to: Mary Beth Bowman, Director of Commerce at <a href="mbowman@nlr.ar.gov">mbowman@nlr.ar.gov</a>. Questions must be received by <a href="mbowman@nlr.ar.gov">Thursday</a>, <a href="mbowman@nlr.ar.gov">November 29, 2018</a> no later than 2:00 p.m. CST. <a href="mailto:Questions initiated after November 29, 2018 will not be considered">Considered</a>.

B. Additional Information. Any additional information and/or clarification regarding this RFQ will be issued in the form of an addendum to this RFQ no later than November 29, 2018, and be posted at the following website: nlr.ar.gov [Click on Government, then click on Commerce under the Department List and go to Current Bids and Bid Summaries for addendums.] Respondents must keep abreast of the addenda as they are posted. All such addenda shall become a part of the RFQ and all Respondents shall be bound by such, whether or not received by the Respondent. In order that the selection process is as objective as possible, please **do not** contact North Little Rock staff or officials other than as noted above.

Any questions regarding this RFQ should be directed in writing to:

Mary Beth Bowman, Director
Department of Commerce
120 Main Street – North Little Rock, AR 72114

OR

Email Mary Beth Bowman at: <a href="mbowman@nlr.ar.gov">mbowman@nlr.ar.gov</a>

Upon signing this addendum acknowledgement, the organization certifies that they have read and agree to the requirements set forth in this Request for Qualifications, including conditions set forth, pertinent information requests, Scope of Work and Addendums.

NAME OF FIRM:	_ PHONE NO.:
BUSINESS ADDRESS:	
SIGNATURE OF AUTHORIZED PERSON:	
TITLE:	DATE:

Return this addendum acknowledgement with your bid submittals.