OUTSIDE. S	XAGE WI SUBMIT	TH THE SOLIO YOUR SEALEI	CITATION NUMBER AND D OFFER TO THE
OUTSIDE. S	SUBMIT	YOUR SEALE	
PH	VEICAI		
	FORT N 2233 DE		IVE
	-		
e Visit pm	I	22	ort Mill School District Office 233 Deerfield Dr. ort Mill, SC 29715
ed notices v	will be p	posted at the f	
	2024 at 12 ne (1) e Visit pm around Ju ed notices .org/depart ur Offer. By	FORT M 2024 at 12:00 pm 2024 at 12:00 pm ne (1) e Visit pm I around June 3, 20 ed notices will be p .org/departments/p ur Offer. By submittir	e Visit LOCATION: For 22

Opening Date. (See	"Signing Your Offer" and "I	"Electronic Signature" provisions.)			
NAME OF OFFEROR (full legal name of business submitting the offer)		Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.			
AUTHORIZED SIGNATURE		TAXPAYER IDENTIFICATION NO.			
(Person must be authorized to submit binding offer to co	ntract on behalf of Offeror.)	(See "Taxpayer Identification Number" provision)			
TITLE					
(business title of person signing above)					
PRINTED NAME	DATE SIGNED	STATE OF INCORPORATION			
(printed name of person signing above)		(If you are a corporation, identify the state of incorporation.)			
OFFEROR'S TYPE OF ENTITY: (Ch Sole Proprietorship	eck one) Partnership	(See "Signing Your Offer" provision.)			

Corporate entity (not tax-e	exempt) Corporation	(tax-exempt) _	Government entity (federal, state, or local)
Minority Participation: Are you a SC Certified Mi Are you a Non SC Certifie		□No If yes, SO IYes □No	Certification #

PAGE TWO (Return Page Two with Your Offer)

(Return Page Two with Your Offer)								
HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business) NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)								
Area Code - Number - Extension Facsimile						mile		
							E-	
mail Address						L		
PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause) ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)								
	Payment Address same as Home Office Address Payment Address same as Notice Address (check only one)				Order Address same as Home Office Address Order Address same as Notice Address (check only one)			
-			-		diess same as notio	ce Address (check only one)	
	DGMENT OF A			mber and its date o	of issue. (See "Ameno	lments to Solicit	ation" Provision)	
Amendment No.	Amendment Issue	Amendment No.	Amendment Issue	Amendment No.	Amendment Issue	Amendment No		
	Date		Date		Date		Date	
DISCOUNT FOR PROMPT PAYMENT (See "Discount for Prompt Payment" clause) 10 Calendar Days (%) 20 Calendar Days (%) 30 Calendar Days (%) Calendar Days (%)								
PREFERENCES - A NOTICE TO VENDORS (SEP. 2009): On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at www.procurement.sc.gov/preferences. ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT. VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU'VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES. [11-35-1524(E)(4)&(6)] PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE: Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor								
your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C)(1)(i)&(ii)) or the Resident Contractor Preference (11-35-1524(C)(1)(iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)). In-State Office Address same as Home Office Address In-State Office Address same as Notice Address (check only one)								

Addendum #2 is being issued to update specific bid information and answer questions received from bidders.

You must acknowledge this addendum on page #1 and the bid form.

Please note, unless otherwise stated, all stipulations from the original solicitation apply

ATTACHMENTS:

1.1 N/A

GENERAL:

2.1 SUBSTITUTION REQUESTS:

Request #1: Contractor requested ABB Installation Products, Inc be listed as an approved manufacturer of fixture type EM. Specifically Model Number BA-PXN-1/2-R in lieu of the listed Lithonia product.

A: Design Team Approved.

Request #2: Contractor requested ABB Installation Products, Inc be listed as an approved manufacturer of fixture type MH. Specifically Model Number CM-PB-EL in lieu of the listed Lithonia product.

A: Design Team Approved.

Request #3: Contractor requested WATTSTOPPER be listed as an approved manufacturer of Occupancy Sensors. Specifically Model Numbers DSW-301-COLOR and DT-300 Series.

A: Design Team Approved.

Request #4: Contractor requested WATTSTOPPER be listed as an approved manufacturer of dimmer switches. Specifically Model Number RH4FBL3PTC.

A: Design Team Approved.

RFI's:

- **3.1 Q:** Is contractor responsible for pour back of slab for plumbing underground work?
 - A: This is an existing modular unit elevated above grade. There is no existing slab requiring demo.
- **3.2** Who is installing flooring back in existing bathroom, and new bathroom, and if GC what is the new flooring?

A: Plumbing tie-in will be made within the existing crawl space. The existing flooring system is VCT and plywood subflooring. The penetration should be properly sized to accommodate the toilet and miscellaneous penetrations. The Owner will be responsible for the installation of new flooring throughout the renovated spaces.

3.3 Does existing flooring need to be demoed and if so, what is the material?

A: The existing flooring is VCT with plywood subflooring. Demo will not be required and the Owner will be responsible for the installation of the new flooring within the renovated areas.

3.4 What are the casework and counter finishes?

A: Please refer to specification sections 06 41 16 – Plastic-Laminate-Clad Architectural Cabinets for further information regarding the casework. This will be a critical submittal item that will need to be provided as soon as possible so that color selections can be made by the Architect.

3.5 Who pays for permit?

A: It was noted that this project is governed by OSF, and the building permit has been received. No additional permitting will be required. Contractors will only be responsible for obtaining necessary business licenses through the Town of Fort Mill prior to mobilization.

END OF ADDENDUM NO. 2