
INVITATION FOR BIDS

June 25, 2008

IFB #2008-83713-2205

City of Newport News
OFFICE OF THE PURCHASING DIRECTOR
2400 Washington Avenue
Newport News, VA 23607



Phone: (757) 926-8721/ Fax: (757) 926-8038

Jones Road Drainage Improvements

ADDENDUM 2

BID DUE: June 30, 2008 at 2:00 P.M.

Contract Officer:

Bill Lindsey, CPPO, C.P.M., Purchasing Administrator, blindsey@nngov.com

Be Advised of the following changes and information regarding the subject solicitation.

- **Page B-27, second paragraph:** Change the completion period for all work to be completed from ninety (90) calendar days from the Notice to Proceed to two-hundred seventy (270) calendar days from the Notice to Proceed.
- **Page C-2, last paragraph:** Change the completion period for all work to be completed from ninety (90) calendar days from the Notice to Proceed to two-hundred seventy (270) calendar days from the Notice to Proceed.

Question: The drawings indicate a requirement for sheet piles to be driven and left in place along the edge of the trench bordering the existing sanitary sewer line (drawing sheet 6 of 6 – plate 4212). At the Warwick Blvd end of the new storm drain piping, the RCP pipe trench is relatively close to the existing sanitary sewer line, but as we move toward structure SS # 8, the two lines diverge until they are 10 feet or more apart. Are we required to install the sheeting for the entire length or only where some minimum separation occurs?

Response: The Engineer has responded that the contractor shall utilize trench boxes to install the proposed drainage pipe on Jones Road where the horizontal separation between the sanitary sewer system exceeds ten (10) feet or more. The contractor shall utilize the left in place sheet piling (see Plate 4212 on Sheet 6 of 6) where the horizontal separation between the proposed drainage system and the proposed/existing sanitary sewer system is less than ten (10) feet. The length of horizontal separation shall be considered as measurement from centerline of pipe to centerline of pipe.

Company Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____ Fax No.: _____ E-Mail: _____

Fed. Tax ID (or Social Security #): _____

Print Name: _____ Title: _____

Signature: _____ Date: _____