

### ADDENDUM NO. 2

#### ITB #19-008 CITY OF KEY WEST -COMPREHENSIVE CCTV SECURITY SYSTEM – ROAD SURVEILLANCE AND MONITORING – DUVAL STREET, MALLORY SQUARE AND OUTER MOLE

The information contained in this Addendum adds information to be included in the Bid and is hereby made a part of the Contract Documents. The referenced bid package is hereby addended in accordance with the following items:

### **QUESTIONS and CLARIFICATIONS**

- 1. Addendum No. 1 did not include the attachments that were listed. They are included with this addendum:
  - Sign-in sheet.
  - Local Vendor Form
  - Diagram from Keys Energy

All other elements of the Contract and Bid documents, including the bid date shall remain unchanged.

All Bidders shall acknowledge receipt and acceptance of this **Addendum No. 2** by submitting the addendum with their proposal. Proposals submitted without acknowledgement or without this Addendum may be considered non-responsive.

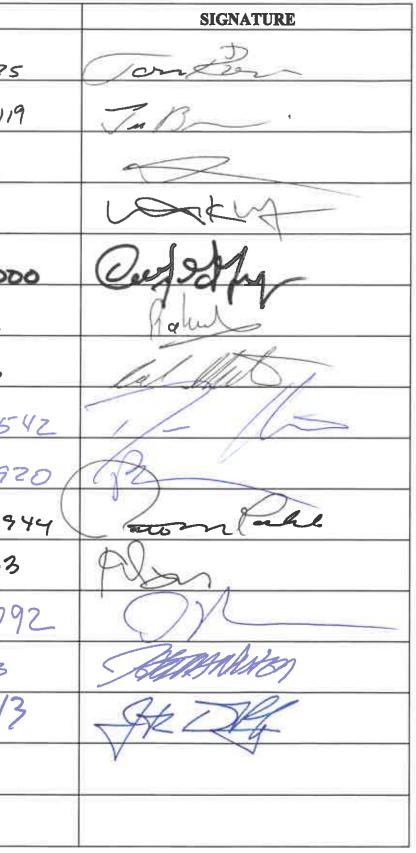
Signature

Name of Business

## SIGN-IN SHEET PRE-BID MEETING

# ITB #19-008 CITY OF KEY WEST -COMPREHENSIVE CCTV SECURITY SYSTEM – ROAD SURVEILLANCE AND MONITORING – DUVAL STREET, MALLORY SQUARE AND OUTER MOLE

SIREET, MALLORY SQUARE AND OUTER MOLE			XIVIOLE
PRINT NAME	COMPANY	EMAIL	PHONE
Tom Ronch / Scott slough	14- Tech Solutions	SSLough @ My-techsolutions. Con	305-296-6675
Theodore Bellow-	Johnson Controls	Theodore. Bello sel JeI. com	(395)834-941
Nicholas Ele	BREADCAST SYSTEMS	Nich @ BROADCASTEYSTEMSINC. COM	(541)262-5694
Kyle McAfee	BREADEAST Systems McAfee Electric /GC	Nich@BROADCASTE/STEMSINC. COM GleOMcAfeeElectric.com	561 722 1318
DAVID GODFREY	VETTED SECURITY FOUNTONE	dgodfrey@vothedsolution.com	678-899-107
RAHUL DANIYA	CELPLAN TECMNOLOGIES		571-443-9382
CARL SHYMATE	THE PLARM CO & F OFFECTOR	EF ALARM CO CARL O GARATL, SOMA	863-484-0707
Dual Webster	Broadwave	dwebster @ Sroadwave. Com	305-570-95
Dave Monroe	City of Keylings		305-809-39
Vatti melanchio	Chat Kywest	emclauchlisecity of tywood - FI. gos	305 -809 -39
KOREN OLSON	10 4	KOLSONE CITYOF KEYWEST - FL. GOV	305 - 809 - 380?
DOCK BRIDSHOW	K L)	DBRIDSHANE." "	305-809-37
- BAN WESTON	UNIFIED NETWOR CONST.	TING JOHN. WESTON O UNIFRED. VS. COM	214, 384, 3463
Jonathan Phelps	Integrated Fire & Security	JPhelps@IFSSI.com	365 340 924



#### LOCAL VENDOR CERTIFICATION PURSUANT TO CITY OF KEY WEST ORDINANCE 09-22 SECTION 2-798

The undersigned, as a duly authorized representative of the VENDOR listed herein, certifies to the best of his/her knowledge and belief, that the VENDOR meets the definition of a "Local Business." For purposes of this section, "local business" shall mean a business which:

- a. Principle address as registered with the FL Department of State located within 30 miles of the boundaries of the city, listed with the chief licensing official as having a business tax receipt with its principle address within 30 miles of the boundaries of the city for at least one year immediately prior to the issuance of the solicitation.
- b. Maintains a workforce of at least 50 percent of its employees from the city or within 30 miles of its boundaries.
- c. Having paid all current license taxes and any other fees due the city at least 24 hours prior to the publication of the call for bids or request for proposals.
  - Not a local VENDOR pursuant to Ordinance 09-22 Section 2-798
  - Qualifies as a local VENDOR pursuant to Ordinance 09-22 Section 2-798

If you qualify, please complete the following in support of the self-certification & submit copies of your County and City business licenses. Failure to provide the information requested will result in denial of certification as a local business.

Business Name	Phone:
Current Local Address:(P.O Box numbers may not be used to establish status)	Fax:
Length of time at this address:	
	Date:
Signature of Authorized Representative	
STATE OF	COUNTY OF
The foregoing instrument was acknowledged before me this 2015. By, of	-
By, of (Name of officer or agent, title of officer or agent) (Na	me of corporation acknowledging)
or has produced identification(Type of identification)	as identification
	Signature of Notary
Return Completed form with Supporting documents to: City of Key West Purchasing	Print, Type or Stamp Name of Notary
	Title or Rank

LOCAL VENDORS FORM

# CUSTOMER RISER ATTACHMENT TO KEYS POLE

