



**OFFICE OF PROCUREMENT
FOOD SERVICES RENOVATION
TAKOMA PARK/SILVER SPRING CAMPUS**

RFP NO.: E621-005

RFP CLOSING DATE AND TIME: FEBRUARY 4, 2021 @ 2:00 PM

ADDENDUM #1

Issued: January 26, 2021

THIS ADDENDUM IS BEING ISSUED TO PROVIDE ANSWERS TO THE FOLLOWING QUESTIONS.

Item 1-1 Question: Are the soap and paper towel dispensers to be provided and installed by the Contractor? If so, can you provide manufacture and model#?

Answer: Soap dispenser and paper towel dispenser are to be provided and installed by the Contractor. Please provide and install Bobrick Contura Series Recessed Soap Dispenser B-4063 and Bobrick Trim Line Series Paper Towel Dispenser B-359033.

Item 1-2 Question: Do the existing windows have any existing film that needs to be removed prior to the installation of the new film?

Answer: Existing windows do not have any existing film.

Item 1-3 Question: How many windowpanes get the Frosted film? Only the 4 marked on the drawings or do the panes on top and to the left also get the Frosted film (totaling 8)?

Answer: The four (4) windowpanes as indicated on the drawings get the Frosted Film. The intent is for the back to the new wall to be obscured from view from the outside. The rest of the windowpanes in both the servery and dining area are to receive the Glare Control film. Refer to specifications on Sheet G-001.

Index of Attachments to Addendum No. 1

Specification sections or portions reissued in entirety:

None

Drawings reissued in entirety:

None

Sketches:

None

Items issued for informational purposes:

None



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A handwritten signature in black ink, appearing to read 'Patrick Johnson', written over a horizontal line.

Patrick Johnson, MBA
Director of Procurement

Please **sign** below to acknowledge receipt of this Addendum and return with the **Technical Proposal submission**, to the following email address, on or prior to the submittal deadline date and time:
vendor.proposals@montgomerycollege.edu.

Failure to return this Acknowledgement of Addendum may deem a proposal nonresponsive.

Company Name

Authorized Signature

Date

Printed/Typed Signature