



SOLICITATION ADDENDUM

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CITY OF PHOENIX
Water Services Department
200 W. Washington Street
9th Floor
Phoenix, AZ 85003

Solicitation Number: IFB-2425-WWT-678

Addendum # 1

Solicitation Title: Low/Medium Voltage Electrical Equipment Testing, Calibration and Repair Services

Solicitation Due Date: 02/20/2025, 2:00 p.m., Phoenix Local Time

This addendum incorporates the following changes into the subject solicitation:

I. The following sections of the solicitation are revised as follows:

1. Section 2, Instructions, paragraph 2.16, Minimum Qualifications, sub-section B is replaced with the following:

B. "Contractor shall maintain staffing levels per group requirement as set forth on Section 3, Scope of Work, Paragraph 3.5, Contract Qualifications, tables "Group I" and "Group II" and be available for emergency response as set forth in Section 3, Scope of Work, Paragraph 3.10, Deliverables, sub-section F, Response and Repair Time Requirements, of this agreement."

2. Section 3, Scope of Work, Paragraph 3.5, Contract Qualifications, sub-section B, is replaced with the following:

B. "Contractor shall maintain staffing levels per group requirement and be available for emergency response as set forth in Section 3, Scope of Work, Paragraph 3.10, Deliverables, sub-section F, Response and Repair Time Requirements, of this agreement."

II. This addendum answers the following questions, which the City of Phoenix received (before, during or after) the subject solicitation's pre-proposal conference:

1. **Question:** I have an inquiry about the Minimum Qualifications section of this IFB, part 2.16. Subsections B, E, & E in particular. Would the City be open to modifying these qualifications to include a group requirement throughout the United States?

Answer: Refer to Item "I" of this addendum.



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Calibration and Repair Services
Solicitation Due Date: 02/20/2025, 2:00 p.m., Phoenix Local Time

All other terms and conditions remain unchanged.

Offeror is required to sign and return addendum with their offer.

Name of Company: _____

Address: _____

Print Name and Title: _____

Authorized Signature: _____