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ADDENDUM NO. 1

April 14, 2022

Title: A/E Services: Demolition Design Services for the Cook County Health Administration Building

RFP # H22-0030

1. General

This addendum revises RFP documents. This addendum is issued to respondents of record prior to execution of contract and forms a part of contract documents and modifies previously issued documents. Insofar as previously issued contract documents are inconsistent with modifications indicated by this addendum, modifications indicated by this addendum shall govern. Where any part of the contract documents are modified by this addendum, all unaltered provisions shall remain in effect.

2. Addendum Acknowledgement Form

Acknowledge receipt of this addendum in the space provided on the Addendum Acknowledgement Form. Proposers must include the signed form with their response. Failure to do so will subject Proposers to disqualification.

3. Changes and Clarifications

a. Revised Attachment T -Scope of Work dated 3/28/2022 detailing the addition of the Heketon and Durand Buildings of the CCH Campus.

b. Pre-Submittal Conference:

Change: Mandatory Pre-Submittal Conference changes as follows: REVISED CONFERENCE DATE AND TIME. New date and time: **Tuesday, April 26, 2022 @ 3 pm CST**. Changed from Tuesday, April 26, 2022 @ 3 pm CST.

c. Vendor Questions Due Date:

Change: Vendor Questions Due Date as follows: Vendor Questions due date changed from **04/22/2022 (2PM CT)** to **04/27/2022 by 2:00 P.M C.T.**

4. Attachments

a. Revised Attachment T, Dated 3/28/2022.

All questions regarding this RFP should be directed to purchasing@cookcountyhhs.org
Addenda will be posted at the <http://www.cookcountyhealth.org> website under the
"Doing Business Cook County Health tab.

ADDENDUM ACKNOWLEDGEMENT FORM

As required by the RFP, Proposers must submit this acknowledgement form with their response. One acknowledgement form per response, listing all addenda, is appropriate.

Addendum No.: _____

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Addendum No.: _____

Addendum No.: _____

Addendum No.: _____

Company Name: _____

Representative's Name: _____

Signature: _____

Date: _____

END OF ADDENDUM