

**APRON REHABILITATION PHASE 4  
HENRY E. ROHLSEN AIRPORT  
ST. CROIX, U.S. VIRGIN ISLANDS**

FAA AIP No.: 3-78-0002-037-2018

This addendum modifies or interprets the proposal documents by additions, deletions, clarifications, corrections, or other type of modifications. Addenda will become part of the Contract Documents.

It is required that all bidders acknowledge receipt of Addenda on Page BF-2 of the Bid Form.

**I. CHANGES TO PROJECT MANUAL**

1. **Page INV-1: Non-Mandatory Pre-Bid Conference** shall be held at **1:00PM in the Main Conference Room** of the Henry E. Rohlsen Terminal Building (Second Floor) on **June 6<sup>th</sup>, 2018.**

*Note: This is a time change from what was listed originally in the Bidding Documents.*

2. **Page INV-2: Change** the fourth paragraph **to Read** “The disadvantaged Business Enterprise Goal is **4.60%**...”
3. **Page ITB-13: Change** paragraph 4.7.1.1 **to read** “...The Goal for firms owned and controlled by DBE’s is a minimum of **4.60%** of the total dollar value of this contract including ***all Bid Schedules***, alternates, and change orders.”
4. **Page BF-16: Remove and Replace** page BF-16 – “Disadvantaged Business Enterprise Assurance Form” with the Attached (Revised) page ***BF-16\_Addendum 1***

**ATTACHMENTS**

- Bid Form Page BF-16\_Addendum 1

**END OF ADDENDUM # 1.**

**DISADVANTAGED BUSINESS ENTERPRISE ASSURANCE FORM**

Project Name: **APRON REHABILITATION – PHASE 4  
HENRY E. ROHLSEN AIRPORT**

The Bidder shall complete the following statement by inserting a checkmark (✓) or the letter “X” the appropriate blank (check one only). Failure to complete this statement shall be grounds for rejection of Bid.

\_\_\_\_\_ The Bidder is able to assure meeting the requirements of the DBE Provisions, included under the DISADVANTAGED BUSINESS ENTERPRISE PROGRAM, and shall utilize not less than the prescribed **Contract Goal of 4.60 %** DBE participation.

\_\_\_\_\_ The Bidder is unable to assure DBE participation of **4.60 %** in this Contract, but shall provide for a minimum of \_\_\_\_\_% ( \_\_\_\_\_ ) percent DBE participation. (If this box is checked, Bidder shall fill-in the percentage blank and document on a separate attachment to this Assurance the Good Faith Efforts undertaken in attempting to meet the Contract Goals as instructed under the DISADVANTAGED BUSINESS ENTERPRISE PROGRAM.)

\_\_\_\_\_  
(Company Name of Bidder)  
(Printed or Typed)

\_\_\_\_\_  
IRS FEI Number

\_\_\_\_\_  
(Printed Name of Person Signing)

By: \_\_\_\_\_  
(Signature)\*

Title: \_\_\_\_\_

Date: \_\_\_\_\_

\* Must be same signature of Bid Proposal.