

**STATE OF ALASKA ITB NUMBER
AMENDMENT NUMBER 1**

2517N015



Department of Transportation &
Public Facilities
2301 Peger Road
Fairbanks, AK 99709

THIS IS NOT AN ORDER

DATE AMENDMENT ISSUED: February 8, 2017

ITB TITLE: Ground Transportation of E-1 Aggregate to the Bettles Airport (Federally Funded)

ITB OPENING DATE AND TIME: February 10, 2017 at 10:00 AM

This amendment is a mandatory return amendment. If this is not acknowledged and returned your bid will be declared non-responsive and not evaluated.

1. This amendment changes the bid opening to Wednesday, February 15th at 10:00 AM.
2. Remove (Page 11) and Replace Specifications with the Revised Specifications dated 2/9/2017.
3. Remove current bid schedule and replace with Revised Bid Schedule that is dated 2/9/2017.

Contractor Signature and Date

A handwritten signature in black ink, appearing to read "Eric Johnson".

Eric Johnson
Procurement Officer
Phone: (907) 451-5102
TDD: (907) 451-2363
FAX: (907) 451-5238

REVISED SPECIFICATIONS

1. Transport 3,000 CY of E-1 aggregate from the DOT& PF Maintenance Station located at approximately MP 138 Dalton Highway (Jim River) to the Airport Apron in Bettles Alaska via the Ice Road.
2. It is recommended that Contractors review the conditions of the ice road prior to bidding as this route is not a State-maintained road.
3. Standard 15-20 CY Side Dump haul trucks are required, with a maximum loaded weight of 100,000 lb. Other types of equipment and load configurations can be used if approved in advance by the Project Manager. Approval of alternate equipment and loads must be done in writing, and will only be given in consideration of safe vehicle, axle and tire loadings.
4. The DOT&PF shall provide a loader and operator at the Jim River Maintenance Station to assist in loading material during normal business hours only. If the Contractor elects to have trucks loaded by DOT&PF, the Contractor and his operators retain full responsibility for the load in each truck, including identifying the maximum safe load for each truck.
5. The DOT&PF shall additionally provide a loader and operator at Bettles to stack the delivered material.
6. DOT&PF equipment will not be available for use at temperatures below -30; if the temperature is close it is not recommended to send trucks to the maintenance station.
7. Trucks will not receive Stand-by time for delays caused by the weather. Stand-by time will be allowed only if delays are caused by the DOT&PF.
8. If a truck is being loaded, and trucks are waiting to be loaded, they will not be eligible for Standby time. Staggered arrival at the Maintenance Station is recommended.
9. The contractor is responsible for coordinating traffic on the Ice Road, as well as posting signage with contact info and hauling time details.
10. Bid price per cubic yard will be considered full compensation for all costs including but not limited to mobilization, demobilization, meal, lodging, labor, and equipment costs including fuel and repairs.
11. Basis of payment for this material shall be a measurement of the as-delivered pile. Total volume to be delivered shall not exceed the surveyed size of 3,200 CY.

REVISED BID SCHEDULE:

<u>Lot Number</u>	<u>Description</u>	<u>Unit of Measurement</u>	<u>Estimated Quantity</u>	<u>Unit Cost</u>	<u>Extended Price</u>
1	Transport E-1 from Jim River, (MP 138 Dalton Highway) to the apron of the Bettles Airport via Ice Road.	Cubic Yard		\$_____	\$_____

Total Bid Price: \$_____

Equipment being offered: _____

Quantity of equipment being offered: _____

Stand-by time: \$_____

Price listed for Stand-by time will not be used in evaluating submitted bids. Submitted bid prices must include all incidentals. No additional charges will be accepted unless approved via a written change order.

Quantity of equipment will also not be evaluated and is for informational purposes only. This information will help the department determine estimated length of time to complete the project.

BIDDERS MUST COMPLETE THE FOLLOWING:**BIDDER'S ADDRESS & COMPANY NAME:**_____
Company Name_____
Authorized Signature_____
Mailing Address_____
Printed Name of Authorized Signature_____
City, State, Zip_____
Phone Number_____
Fax Number_____
Email