Pee Dee Regional Transportation Authority
Purchasing Department
Amendment of Solicitation /Modification-Purchase Order

AMENDMENT/MODIFICATION NO. EFFECTIVE DATE AGENCY/LOCATION
1 7/24/14 PDRTA/Florence, SC

ISSUED BY: Pee Dee Regional Transportation Authority ADMINISTERED BY: Sandy Garris
Purchasing Department Purchasing Manager
313 Stadium Road
Florence, SC 29506

CONTRACTOR NAME & ADDRESS: Amendment of:
Amendment of:
IFB# 0814-01 Parking Lot Paving Project

THIS BLOCK APPLIES ONLY TO AMENDMENTS OF SOLICITATIONS:
The above numbered solicitation is amended as set forth below. The hour and date specified for receipt of
offers () is extended. (X) is not extended.

Offerors must acknowledge receipt of this amendment prior to the hour and date specified in the
solicitation, or as amended, by one of the following methods: (a) by signing and returning one copy of
this amendment, (b) by acknowledging receipt of this amendment on each copy of the offer submitted or
(c) by separate letter or email which includes a reference to the solicitation & amendment numbers.
FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE ISSUING OFFICE
PRIOR TO THE HOUR & DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If,
by virtue of this amendment you desire to change an offer already submitted, such change may be made by
email or letter, provided such email or letter makes reference to the solicitation & this amendment, & is
received prior to the opening hour & date specified. The changes set below are made to the above numbered
order.

DESCRIPTION OF AMENDMENT/MODIFICATION:

THIS AMENDMENT IS TO CLARIFY THE DATE OF THE HIGHLY RECOMMENDED
PRE-BID MEETING:

The date of the Pre-Bid is August 7, 2014 at 10:00 AM.
On page 13, Part VII- Timeline – there is a typo. It reads 8/17/2014 but the correct date is
8/7/2014.

( ) CONTRACTOR/OFFEROR IS NOT REQUIRED
SIGN THIS DOCUMENT

( X ) CONTRACTOR/OFFEROR
IS REQUIRED TO SIGN THIS DOCUMENT &
RETURN TO PDRTA AT
ADDDRESS SHOWN ABOVE

CONTRACTOR’S SIGNATURE

BY_________________________________ DATE:______________________
(Signature of Authorized Rep.)

BY_________________________________ DATE:______________________
(Signature of PDRTA’s Authorized Rep.)