CITY OF FAIRHOPE ADDENDUM NO. 06

Bid No. 016-18 Inmate Telephone Services

The Alabama Public Service Commission does not require Inmate Calling Service (ICS) providers to be licensed contractors in the state of Alabama. Our current RFP is somewhat unclear as to whether or not this is a requirement of the awarded vendor. This addendum serves as notice that contractors bidding these requirements are not required to obtain a license with the State of Alabama. The Contractor will still be required to obtain a license with the City of Fairhope and any other licenses as required.

Please replace pages 35-36 of the Bid with pages 2-3 of this Addendum and pages 52-53 of the Bid with the pages 4-5 of this addendum.

This addendum also serves as notice that the <u>Bid Opening</u> has been moved to <u>Thursday, June 14, 2018 at 10:00 AM</u> at the City of Fairhope Warehouse located at 555 S. Section St., Fairhope, AL.

Bidders are to print,	sign and include signed Addendum No. 06 with submitted documents.
Acknowledged:	Company
	Ву

Jillian Saffle Purchasing Manager Posted: 6/6/18

Address	
City, State, Zip Code	
Phone Number	Fax Number
Primary E-mail Address	
FCC License No. (Required proof of Certification of Alabama Public Ser	rvice Commission should be attached to this Bid Response)
AL General Contractor License No. (Attach a Copy if Required)	
AL General Contractor License Major Categories (If Required)	
AL General Contractor Specialties (If Required)	
AL Foreign Corporation Entity ID (Required of Out of State Vendors)	
IF CORPORATION, PARTNERSHIP, OR JOINT VENTURE	
Name of Corporation, Partnership, or Joint Venture	State of Incorporation
Company Representative	
Print Name of Representative Authorized to Sign Contracts for the firm	Position or Title
Signature of Representative Authorized to Sign Contracts for the firm	
Print Name(s) of Others if a Partnership	
Address	
Address	
City, State, Zip Code	
Phone Number	Fax Number
Primary F-mail Address	

FCC License No. (Required proof of Certification of Alabama Public	c Service Commission shoul	d be attached to this Bid Response)
AL General Contractor License No. (Attach Copy if Required)		
AL General Contractor License Major Categories (If Required)		
AL General Contractor Specialties (If Required)		
AL Foreign Corporation Entity ID (Required of Out of State Vendor	rs)	
NOTARY FOR INDIVIDUAL, PARTNERSHIP, CORPORA	TION, OR LLC	
STATE OF }		
STATE OF } COUNTY OF }		
I, the undersigned authority in and for said State and	County, hereby certify	thatName of Bid Signer
As respectively of	of	Name of Bid Signer
Title Whose name is signed in the foregoing document and being informed of the contents of the document they date.	d who is known to me,	· · · · · · · · · · · · · · · · · · ·
Given under my hand and Notary Seal on this	day of	, 2018
	NOTARY PUBLIC	
	MY COMMISSION E	XPIRES
Business Organization		
Name of Bidder (exactly as it appears on W-9):		
Doing-Business-As Name of Bidder:		
Principal Office Address:		
<u></u>		

NOTARY FOR OWNER (CITY OF FAIRHOPE)

STATE OF ALABAMA } COUNTY OF BALDWIN}			
I, the undersigned authority in and for said State and of Fairhope whose name is signed to the foregoing do on this day, that, being informed of the contents of the same bears date.	cument and wh	o is known to me, acknowledged bef	ore me
Given under my hand and Notary Seal on this	day of	, 2018	
	NOTARY PUB	LIC	
	MY COMMISS	SION EXPIRES	
IF INDIVIDUAL OR PARTNERSHIP			
Individual or Partnership		Print Name of Partner	
Print Name of Representative Authorized to Sign Contracts for the firm		Print Name of Partner	
Signature of Representative Authorized to Sign Contracts for the firm		Print Name of Partner	
Address			
Address			
City, State, Zip Code			
Phone Number		Fax Number	
Primary E-mail Address			
AL General Contractor License No. (Attach Copy if Required)			
AL General Contractor License Major Categories (If Required)			
AL General Contractor Specialties (If Required)			
AL Foreign Corporation Entity ID (Required of Out of State Vendor			

IF CORPORATION OR LLC

Company	State of Incorporation
Company Representative	
Print Name of Representative Authorized to Sign Contracts for the firm	Signature of Representative Authorized to Sign Contracts for the firm
Address	
Address	······································
City, State, Zip Code	
Phone Number	Fax Number
Primary E-mail Address	
AL General Contractor License No. (Attach Copy if Required)	
AL General Contractor License Major Categories (If Required)	
AL General Contractor Specialties (If Required)	
AL Foreign Corporation Entity ID (Required of Out of State Ven	dors)
NOTARY FOR INDIVIDUAL, PARTNERSHIP, CORPOR	RATION, OR LLC
STATE OF}	
COUNTY OF}	
I, the undersigned authority in and for said State ar	nd County, hereby certify that
As respective	ly ofCompany Name
Whose name is signed in the foregoing document a	Company Name and who is known to me, acknowledged before me on this day, sey executed the same voluntarily on the day the same bears
Given under my hand and Notary Seal on this _	day of, 2018
	NOTARY PUBLIC
	MY COMMISSION EXPIRES