



To: Prospective Bidders  
Date: July 7, 2022

RE: Addendum No. 1  
Valley Native Primary Care Center  
(VNPCC) Expansion – Design  
RFP # SCF22-1078

Issue Date: July 7, 2022

This document forms a part of the Contract Documents and modifies the original Procurement Documents dated June 29, 2022. Acknowledge receipt of this Addendum in the provided on the Bid Form. Failure to acknowledge receipt of this addendum may subject Proposers to disqualification.

This Addendum consists of 2 pages.

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## 1. Changes to RFP Schedule:

A Site Visit is scheduled for Friday, July 15 at 10AM. (See updated RFP schedule below.) To participate meet the group in the current Valley Native Primary Care Center main lobby located at 1001 S Knik Goose Bay Road, Wasilla, AK 99654:

RFP Release Date	June 29, 2022
Deadline for registration	July 13, 2022, by 3 pm AKST
Site Visit and Pre-Proposal Meeting	Friday, July 15 at 10 am AKST
Deadline for Questions	July 27, 2022, by 3 pm AKST
Proposal Due Date	August 5, 2022, by 3 pm AKST
Anticipated Notice of Award	August 12, 2022



**EXHIBIT B: Proposal Offer and Signature Page**

RFP Number: SCF22-1078

RFP Name: "Valley Native Primary Care Center (VNPCC) Expansion – Design"

Proposal Due Date: August 5, 2022

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**PROPOSERS MUST COMPLETE THE SECTION BELOW**

A. Firm Fixed Price Contract value \$ \_\_\_\_\_

B. Overhead and Profit on approved change orders \_\_\_\_\_%

Is an Alaska Native / American Indian Business Owner Preference being claimed? **YES**  or **NO**

(Must include proof of AN/AI Ownership in section 4 of Proposal)

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
*Address City State Zip Code*

Acknowledgement of receipt of addenda:

Addendum No. \_\_\_\_\_ Date Received \_\_\_\_\_ Signature \_\_\_\_\_

Addendum No. \_\_\_\_\_ Date Received \_\_\_\_\_ Signature \_\_\_\_\_

Addendum No. \_\_\_\_\_ Date Received \_\_\_\_\_ Signature \_\_\_\_\_

Addendum No. \_\_\_\_\_ Date Received \_\_\_\_\_ Signature \_\_\_\_\_

By signing below Proposer agrees to all terms and conditions as listed within this Request for Proposal issued by SCF.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_