

CAPE MAY COUNTY
DEPARTMENT of PUBLIC WORKS
Office of the COUNTY ENGINEER



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Freelholder

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DALE M. FOSTER
Engineer

December 8, 2010

Memo To: Prospective Bidders

From: Dale M. Foster, PE, County Engineer

Re: **OCEAN DRIVE (CR619) BRIDGE OVER GREAT CHANNEL
PIER 9 CONCRETE REPAIRS
IN THE BOROUGH OF STONE HARBOR AND TOWNSHIP OF MIDDLE
CAPE MAY COUNTY, NJ
ADDENDUM NO. 2**

Addendum No. 2 has been issued to the Contract Documents for the referenced project. The revision listed shall be made to the Contract Documents issued for the receipt of bids. This addendum shall become part of the total contract.

The Bidder shall acknowledge receipt of this Addendum by signing and returning the attached acknowledgement sheet with the Bidder's Proposal.

The County regrets any inconvenience that this Addendum causes.

DMF/df
Enclosures

Cc: Stephen O'Connor, Clerk/Administrator
Purchasing Department

120820108

ADDENDUM NO. 2

The revisions listed below shall become part of the contract, due consideration to these revisions shall be made by the Contractor in preparing his bid for the project. The Contractor shall acknowledge receipt of this Addendum by signing and returning the attached sheet with the Contractor's Proposal. Proposals not including a signed copy of the attached sheet will not be considered.

THE FOLLOWING CHANGES SHALL BE MADE TO THE PLANS

Sheet 2, General Notes, Note 5B is revised to read as follows:

"Wire Mesh Plain Steel shall meet ASTM A 185, Grade 70, either epoxy coated according to ASTM A884, Class A or galvanized according to ASTM A641, Class C."

Note 11 is revised to read as follows:

"The Contractor shall be permitted to close the structure to motor vehicles for a period of 12 calendar days to perform the work and permit concrete curing. Concrete shall attain a minimum compressive strength of $F'c = 3,000$ PSI, as verified by field cast cylinders, prior to placing the bascule girder upon the base plate (i.e. loading the base plate)."

Sheet 4, View C – C, East Col. Reinforcing N. Elevation: The upper left annotation pointing to base plate "Install Base PL. 10"x 1-1/2"x 1'-8"..." is revised to read as follows: *"Install Base PL. 10" x 2" x 1'-8"..."*

Sheet 4, Notes: In Note 3, the correct telephone number for Hilti is: (800-879-8000)

Sheet 5, Sign Table: The following sign quantities and areas are revised:

- Sign 1 Required Quantity decrease from 4 to "3", total area = "37.5 SF"
- Sign 2 Required Quantity decrease from 8 to "6", total area = "96.0 SF"
- Sign 4 Required Quantity increase from 8 to "9", total area = "18.0 SF"
- Sign 10 Required Quantity increase from 2 to "7", total area = "70.0 SF"
- Sign 15 Required Quantity increase from 10 to "11", total area = "55.0 SF"

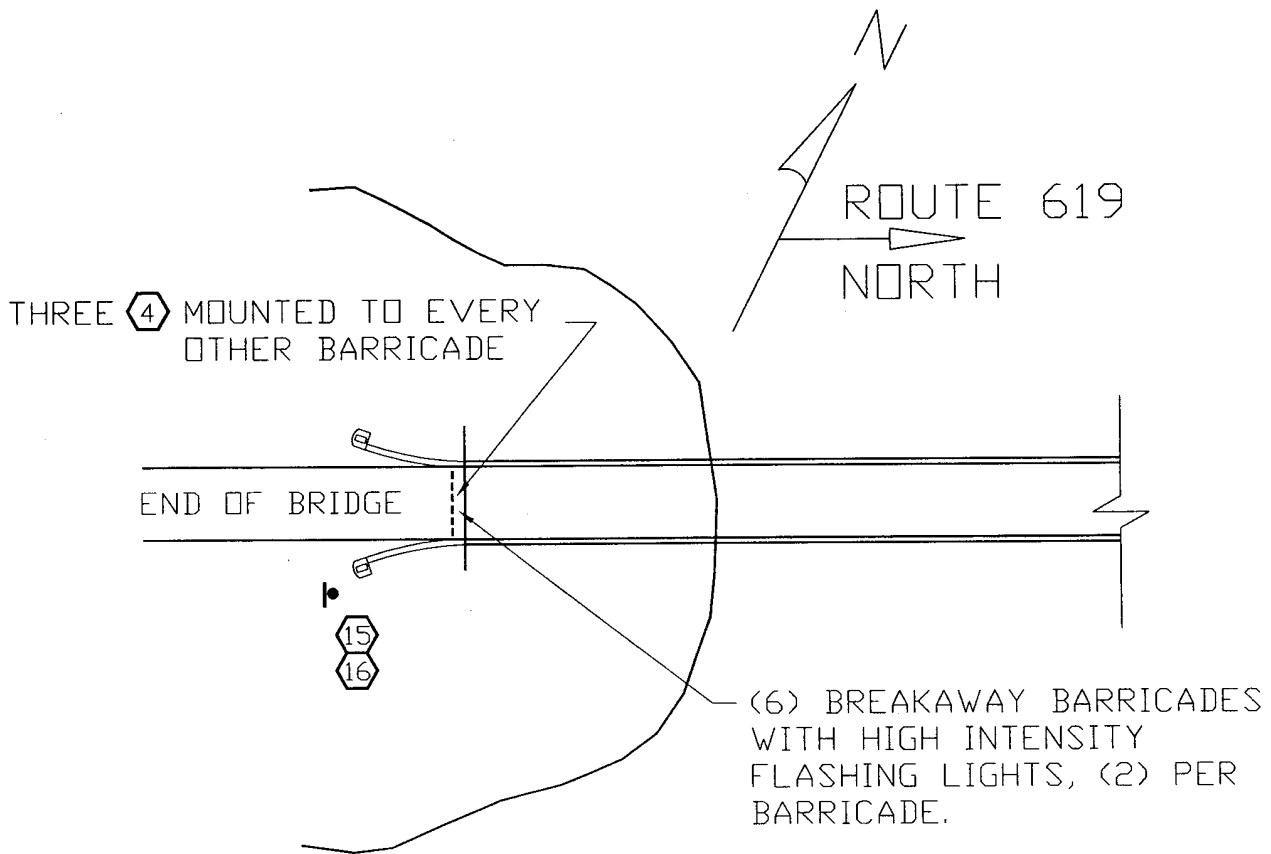
GREAT CHANNEL BRIDGE – PLAN is revised as follows:

- At the south approach of the bridge, Sign 15 and 16 have been eliminated from this location.
- At the north approach of the bridge, three (3) breakaway barricades are to have Sign 4 attached to them and one (1) breakaway barricade is to have Sign attached to it.

Sketch SK-1 is attached herewith and shall become a part of the Plans. Sketch SK-1 shall be worked in conjunction with Sheet 5.

STEPHEN O'CONNOR,
CLERK/ADMINISTRATOR

DANIEL BEYEL,
FREEHOLDER DIRECTOR



PLAN-GRASSY SOUND BRIDGE
SOUND END

NTS

NOTE: SEE CONTRACT SHEET 5 FOR SIGN LEGEND & ADDITIONAL REQUIREMENTS.

Sketch sk-1

CAPE MAY COUNTY



JOB:

OCEAN DRIVE (CR619) BRIDGE
OVER GREAT CHANNEL-STRUCTURE NO. 0500-028
PIER 9 CONCRETE REPAIRS

DETAILS:

MAINTENANCE & PROTECTION OF TRAFFIC - ADDENDUM NO. 2 (12-7-10)

BOROUGH OF STONE HARBOR & MIDDLE TOWNSHIP

CAPE MAY COUNTY, NEW JERSEY

ADDENDUM NO. 2 ACKNOWLEDGEMENT

Acknowledgement is hereby made of Addendum No. 2, issued on December 8, 2010, received since the issuance of the Contract Documents for **OCEAN DRIVE (CR619) BRIDGE OVER GREAT CHANNEL PIER 9 CONCRETE REPAIRS IN THE BOROUGH OF STONE HARBOR AND TOWNSHIP OF MIDDLE, CAPE MAY COUNTY, NJ**. The Contractor shall include this signed sheet with his bid package.

Signature of Bidder: _____

Title: _____

Name of Firm: _____

Address: _____

Date: _____