CORPORATION of the TOWN of SMITHS FALLS
PUBLIC WORKS AND UTILITIES

ADDENDUM #1 to

RFQ #19-PW-006

Sent by: Vanessa Bernicky, Engineering Technologist,
P.O. Box 695, 77 Beckwith Street North
Smiths Falls, Ontario K7A 4T6
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Date of Closing: May 2, 2019

Date of Addendum: April 18, 2019

Number of Pages: 3

ADDENDUM #1

Please be advised of the following:

This Addendum shall form an integral part of the tender specifications for
the above mentioned contract. This Addendum shall, however, take
precedence over the requirements of the original document.

Additional Wide C-ack repair required at the Arena Parking lot. The quantity
within Smiths Falls has increased by 60m to 600m.
New RFQ bid sheet to be used. The map has been updated. See attached.

All RFQ holders shall acknowledge receipt and acceptance of this Addendum #1 by
signing within the space provided and submitting the signed Addendum with the final
proposal. Proposals submitted without this addendum may be considered incomplete.

Receipt acknowledged and conditions agreed to this___day of May, 2019

CONTRACTOR (PRINT NAME) __________________________ SIGNATURE __________________________
TOWN OF SMITHS FALLS
Wide Crack Asphalt Repair

To the Town of Smiths Falls:

I/We, the undersigned, hereby tender to Asphalt crack clean and repair the following repair areas in accordance with the attached specifications, F.O.B. Smiths Falls, Ontario for the following prices:

<table>
<thead>
<tr>
<th>ITEM #</th>
<th>DESCRIPTION</th>
<th>LENGTH</th>
<th>UNIT PRICE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1</td>
<td>Asphalt Crack Cleaning and Repair Brockville and Queen street Arena Parking Lot and Various intersections, Smiths Falls</td>
<td>600 m</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A2</td>
<td>Asphalt Crack Cleaning and Repair Montague/Smiths Falls Airport</td>
<td>850 m</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>HST (13%)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>TOTAL Cost</td>
<td></td>
</tr>
</tbody>
</table>

SUBMITTED BY: ________________________________

ADDRESS: ________________________________

SIGNED BY: ________________________________

(Authorized person must sign)

DATE: ________________________________