



State of West Virginia  
 Department of Administration  
 Purchasing Division  
 2019 Washington Street East  
 Post Office Box 50130  
 Charleston, WV 25305-0130

**Solicitation**

NUMBER
LBS14091

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
BOB KILPATRICK 304-558-0067

RFQ COPY

TYPE NAME/ADDRESS HERE

VENDOR

SHIP TO

HEALTH AND HUMAN RESOURCES  
 BPH - LABORATORY SERVICES  
  
 167-ELEVENTH AVENUE  
 SOUTH CHARLESTON, WV  
 25303 304-558-3530

DATE PRINTED
02/20/2014

BID OPENING DATE: 02/25/2014

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 1						
ADDENDUM ISSUED TO:						
1. PROVIDE RESPONSES TO QUESTIONS SUBMITTED REGARDING THE ORIGINAL SOLICITATION. QUESTIONS AND ANSWERS ARE ATTACHED.						
2. TO PROVIDE ADDENDUM ACKNOWLEDGEMENT. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN THE DISQUALIFICATION OF YOUR BID.						
***** END OF ADDENDUM NO.1 *****						

SIGNATURE		TELEPHONE	DATE
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE	

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

SOLICITATION NUMBER: LBS14091

Addendum Number: 1

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The purpose of this addendum is to modify the solicitation identified as (“Solicitation”) to reflect the change(s) identified and described below.

**Applicable Addendum Category:**

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

**Description of Modification to Solicitation:**

Addendum #1 issued to provide answers to submitted Technical Questions (on Attachment A), which serve to modify Specification Section 3.1.1.1.

Bid Opening Date and Time remain February 25, 2014 at 1:30pm EST

NO OTHER CHANGES

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

**Terms and Conditions:**

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

# ATTACHMENT A

**Addendum #1 – LBS14091**

**Addendum #1 to respond to the following Vendor questions and revise the language of Section 3.1.1.1 of the RFQ Specifications:**

**Vendor Question #1:**

On page 14, would it be possible to change the wording of section 35(b) from: "... (b) be merchantable and fit for the purposes intended..." to: "... (b) perform to published specifications..."?

**Response to Vendor Question #1:**

No, the wording of Section 35(b) on Page 14 cannot be changed.

**Vendor Question #2:**

On page 20, would it be possible to change the wording of section 3.1.1.1 from: "Replacement part(s) and/or on-site service must be provided within 48 hours..." to: "Replacement part(s) and/or on-site service must be provided within 72 hours..."?

**Vendor Question #3:**

On page 21, would it be possible to change the wording of section 3.1.1.1 from: "...cannot be resolved via telephone by the end of the work day..." to: "...cannot be resolved via telephone within one work day..."?

**Responses to Vendor Questions #2 and #3:**

Yes, the wording of Section 3.1.1.1 is hereby revised as follows:

**From:**

Testing system must be furnished at no cost to the Office of Laboratory Services. The instrumentation provided by the vendor remains the property of the successful vendor and must be maintained at the vendor's expense during the term of this contract which shall include two (2) annual preventive maintenance service visits. Replacement part(s) and/or on-site service must be provided within 48 hours if equipment has problems that cannot be resolved via telephone by the end of the work day in which the problem has been reported.

**To:**

Testing system must be furnished at no cost to the Office of Laboratory Services. The instrumentation provided by the vendor remains the property of the successful vendor and must be maintained at the vendor's expense during the term of this contract which shall include two (2) annual preventive maintenance service visits. Replacement part(s) and/or on-site service must be provided within 72 hours if equipment has problems that cannot be resolved via telephone within one work day in which the problem has been reported.

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: LBS14091**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**

(Check the box next to each addendum received)

- |   |  |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

\_\_\_\_\_  
Company

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date