



**We Are Columbia**

## **RFQu010-20-21-CE Addendum 1**

### **Wastewater Collection System Hydraulic Modeling**

Issue Date: 6/17/2021

Questions Deadline: 6/24/2021 05:00 PM (ET)

Response Deadline: 7/20/2021 02:00 PM (ET)

#### **Contact Information**

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## Event Information

Number: RFQu010-20-21-CE Addendum 1  
Title: Wastewater Collection System Hydraulic Modeling  
Type: Request for Qualifications  
Issue Date: 6/17/2021  
Question Deadline: 6/24/2021 05:00 PM (ET)  
Response Deadline: 7/20/2021 02:00 PM (ET)  
Notes:

Non-Mandatory (Highly Recommended) Pre- Submittal Meeting:

June 23, 2021 at 9:30 A.M. (ET)

Join Zoom Meeting

[https://us02web.zoom.us/j/84092170303?  
pwd=WIBxS2U2Z2RvdmZpbytZTEorY0JKZz09](https://us02web.zoom.us/j/84092170303?pwd=WIBxS2U2Z2RvdmZpbytZTEorY0JKZz09)

Meeting ID: 840 9217 0303  
Passcode: 873171

One tap mobile

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+12532158782,,84092170303#,,,,\*873171# US (Tacoma)

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+1 253 215 8782 US (Tacoma)  
+1 301 715 8592 US (Washington DC)  
+1 312 626 6799 US (Chicago)  
+1 346 248 7799 US (Houston)  
+1 669 900 6833 US (San Jose)

Meeting ID: 840 9217 0303  
Passcode: 873171

Find your local number: <https://us02web.zoom.us/j/84092170303?pwd=WIBxS2U2Z2RvdmZpbytZTEorY0JKZz09>

At a minimum, 30 minutes before the scheduled pre-submittal meeting, each participant shall provide their Name, Business/Organization represented, Telephone Number, Fax Number, and Email address. Information shall be provided to [procurement@columbiasc.gov](mailto:procurement@columbiasc.gov).

## Bid Attachments

Addendum 1 with Sign-In Sheet.pdf

Download

RFQu010-20-21-CE Addendum 1

## Requested Attachments

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### Qualification Submittals

*(Attachment required)*

## Bid Attributes

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### 1 Acknowledge RFQu

Indicate by checking the box that you have received the listed RFQu.

RFQu Acknowledged

*(Required: Check if applicable)*

### 2 Acknowledge Addendum 1

Indicate by checking the box that you have received the listed addendum

Addendum Acknowledged

*(Required: Check if applicable)*

## Supplier Information

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

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

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Fax: \_\_\_\_\_

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

## Supplier Notes

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By submitting your response, you certify that you are authorized to represent and bind your company.

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Signature*