The following items take precedence over referenced portions of the documents for the above-named project and in executing a contract, will become a part thereof. Where any item in the documents is supplemented hereby, the original requirements will remain in effect. All supplemental conditions will be considered as added thereto. Where any original item is amended, voided or superseded hereby, the provisions of such items not so specifically amended, voided or superseded will remain in effect.

**Questions and Answers**

1. **Question:** Will the county share the traffic study performed by GDOT, referenced on sheet 13 of the RFP under “General Services”, with firms that are pursuing this project?
   **Answer:** The Traffic Study will be provided to the selected firm.

2. **Question:** Can the County specify which Georgia Prequalification work categories are required?
   **Answer:** Area Class 3.02, 3.03, 3.07, 3.09, 3.12, 3.13, 3.15, 5.01, 5.02, 6.1, 9.01

3. **Question:** Can you confirm that this RFP will not require a cost proposal? There appears to be conflicting information on cost submittal on Page 20 of 28, just after the RFP Evaluation Criteria Table, stating “b. The cost submitted by all proposers is too high.”
   **Answer:** Cost proposal will not be required at this time. The cost will be negotiated with the consultant with the highest score.

4. **Question:** Please clarify if a fee proposal is required on RFP #20-29 SR 20 and Turner Church Rd. Intersection Improvements? If so, is there a specific Henry Co. form/format vendors are to utilize and how it is to be submitted (i.e. by separate envelope or within the qualification proposal)?
   **Answer:** Please see response for Question #3.

This Addendum #1 must be signed and attached to proposal to acknowledge receipt of Addendum. **Failure to acknowledge any addenda will result in a non-responsive bid.**

______________________________  __________________________
Company’s Name                    Date

______________________________  __________________________
Authorized Representative’s Name  Authorized Representative’s Signature