

May 31, 2013

To: Planholders of SAP 42-607-26 and SAP 42-607-27

**ADDENDUM #2**

Please find attached an amended back sheet for the above mentioned project. The original sheet requested the Proposal Guaranty be made payable to Jackson County Treasurer and was corrected to specify that the Proposal Guaranty be made payable to LYON COUNTY TREASURER.

**PLEASE CONFIRM RECEIPT OF THE FAX TRANSMISSION FOR THIS ADDENDUM BY FAXING THE ATTACHED "CONFIRMATION OF RECEIPT" FORM BACK TO LYON COUNTY AT FAX NUMBER 507-532-8216 OR 507-532-8217.**

Please call our office if you have any question concerning this Addendum.

Sincerely,



Aaron VanMoer  
Interim Lyon County Hwy. Engineer

Form 21126D (Rev. 2-90)

State Project No. SAP 42-609-31 and SAP 42-609-32

GRAND TOTAL \$ \_\_\_\_\_

PROPOSAL GUARANTY required by 1208 of the Specifications: "A (certified check) (bond), prepared as required by 1208 of the Specifications and payable to the Lyon County Treasurer, in an amount equal to at least 5% of the total amount of the bid is submitted herewith as a proposal guaranty.

DISADVANTAGED BUSINESS ENTERPRISE CERTIFICATION: Our firm will meet a minimum goal of \_\_\_\_\_% of this contract to Disadvantaged Business Enterprises. A bidder who fails to indicate a specific goal above must fulfill the total goals indicated in the proposal.

NON-COLLUSION AFFIDAVIT: A Non-Collusion Affidavit is found in this proposal which must be signed by each bidder.

RECEIPT OF ADDENDA as required by 1210 of the Specifications:

The undersigned hereby acknowledges receipt of and has considered:

Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_ Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_  
Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_ Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_

Signed

EXECUTION OF PROPOSAL as required by 1206 of the Specifications:

This proposal dated the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signed: \_\_\_\_\_, P.O. Address \_\_\_\_\_ as an individual.

Signed: \_\_\_\_\_, P.O. Address \_\_\_\_\_ as an individual.

doing business under the name and style of

Signed: \_\_\_\_\_, for \_\_\_\_\_ a partnership.

NAME BUSINESS ADDRESS

Signed: \_\_\_\_\_, for \_\_\_\_\_ a corporation,

incorporated under the laws of the State of Minnesota

Name of President \_\_\_\_\_ Business Address \_\_\_\_\_

Name of Vice-President \_\_\_\_\_ Business Address \_\_\_\_\_

Name of Secretary \_\_\_\_\_ Business Address \_\_\_\_\_

Name of Treasurer \_\_\_\_\_ Business Address \_\_\_\_\_

(NOTE: Signatures shall comply with 1206 of the Specifications.)