

**SOLICITATION AMENDMENT  
RFQ # 2020006  
CITY OF BUCKEYE  
CONSTRUCTION & CONTRACTING DIVISION**

**AMENDMENT #3**

**NOTE:** Attach to Original Request for Qualifications. However, if the Statement of Qualifications (SOQ) has already been returned, complete this amendment and return for attachment to your SOQ no later than 9:00 AM, June 8, 2020.

City of Buckeye  
530 East Monroe Avenue  
Buckeye, Arizona 85326  
Attn: Debby Fasano

**SOLICITATION: RFQ #2020006 Construction Manager at Risk Sundance Park Phase II**

**NOTICE TO CONTRACTORS:**

**This Amendment forms a part of the Contract and clarifies, corrects, or modifies the original Request for Qualifications documents prepared by the City of Buckeye.**

**Bid Due Date and Time: June 8, 2020 no later than 9:00 AM**

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**THE FOLLOWING CHANGE HAVE BEEN MADE TO THE RFQ:**

1. The Due Date and Time for the Statement of Qualifications has been changed to June 8, 2020 not later than 9:00 AM.
2. On Page 7 – Section A. Project experience and qualification of the firm. Change the third sentence to read “Each project identified shall be at least \$5M.”

**The balance of the specifications and instructions remain the same. Offerors must acknowledge receipt and acceptance of this amendment by returning the entire amendment with the Proposal.**

**PLEASE ACKNOWLEDGE YOUR FIRM’S RECEIPT OF THIS AMENDMENT BY SIGNING THE ATTACHED SOLICITATION AMENDMENT ACKNOWLEDGEMENT.**

**SOLICITATION AMENDMENT ACKNOWLEDGEMENT**

**RFQ# 2020006 – Construction Manager at Risk Sundance Park Phase II**

**AMENDMENT NUMBER 3**

**AMENDMENT ISSUE DATE: June 8, 2020, no later than 9:00 AM.**

Offeror certifies that Offeror has read, understands, and will fully and faithfully comply with this Request for Qualifications, its attachments and any referenced documents. Offeror also certifies that this offer was independently developed without consultation with any of the other Offerors or potential Offerors.

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

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

Print Name and Title: \_\_\_\_\_

Date: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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