

## Elizabeth Unger Purchasing Agent

# City of Cambridge

#### PURCHASING DEPARTMENT

#### SHUO WANG

Assistant Purchasing Agent for Goods & Services

#### NATALIE SULLIVAN

Assistant Purchasing Agent for Design & Construction

TO:

All Bidders

FROM:

City of Cambridge

DATE:

October 5, 2023

RE:

File No. 11211 Towing of Motor Vehicles for the City of Cambridge FY24-26 -

Addendum No. 2

#### This addendum is comprised of:

- Questions & Answers
- Revised Qualification form

### **QUESTIONS & ANSWERS**

- 1. **Q:** I see the addendum no.1 stating that the bis has been postponed until further notice, also noticed that the opening bid has changed until October 15, 2023 instead of the 12 of October 2023. Is it postponed or is the opening on October 19,2023
  - A: The bid opening date is October 12, 2023.
- 2. Q: Page 3, there is a set of requirements, and on page 15, there is a different set of requirements. Can you clarify which set do we need

**A:** Please refer to Page 3 for general insurance requirements. Please also see revised Qualification form attached.

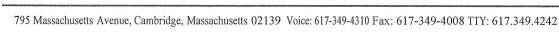
#### **REVISED QUALIFICATION FORM**

Please see attached.

All other details remain the same.

Elizabeth Unger Purchasing Agent

Addendum No. 2



# **REVISED QUALIFICATION FORM**



### **QUALIFICATION FORM**

Name of company:	Tel.	No				
2. Mailing address:						
City		zip code				
3. Business form: sole proprieto	Business form: sole proprietor ( ) partnership ( ) corporation ( )					
. Ownership: (1) for sole proprietors, please enter name and address of owner here:						
Name						
Street						
City		zip code				
For partnerships and corporation owning more than 1% interest in		names and address of each stockholder				
5. Business address (if different	from mailing address)					
Street	city	zip code				
6. Address where tow trucks are	housed (if different from maili	ng address).				
Street	city	zip code				
7. Address where towed vehicles	s will be stored (if different fror	n mailing address				
Street	city	zip code				
8. How long has company been	in the towing business?					
9. Name of supervisor(s) who wi	ll be in charge of company's d	ay to day activities in this towing program:				
Name:		business tel				
Name:		business tel				
10. Massachusetts D.P.U. Certi (please attach a photocopy						
11. Has certification of the comp	pany by the Massachusetts D. Yes ( ) No ( )	P.U. ever been suspended or revoked?				

If yes, please submit a brief account of citing dates, reasons for this action by the D.P.U. and any corrective actions taken by your company.



12	Ջ. Please	indicate	all addition	al equipment	t owned by	y the cor	npany to	be used	for openir	າg and/	or to	wingכ
(i.	e., dollie	s.) locked	d vehicles.							_		

13. If the company is able to offer other storage facilities during periods when their lots are filled to capaci	ity,
please indicate so by completing the following description. If the company plans to use more than one	
storage facility, describe each one on a separate attached sheet.	

Street	city	zip code

14. Employees of the company must be under bond to cover theft of property contained on or within the towed vehicle. Please attach a photocopy of the bonding agreement.

Please attach photocopies of the appropriate insurance policies.

