

**ADDENDUM 1 – INSTITUTIONAL FACILITIES MASTER PLAN 2030**  
**Re: Prebid Meeting Sign-In Sheets, HUB Tip Sheet, Change to RFQ Paragraph 1.6.2**

Bid Closing: **2/21/19** at **2:00 PM** (Local Time)

Bid Number: **MP2030/JSW**

Date: **2/7/19**

**BID MUST BE SUBMITTED ON OR ATTACHED TO THIS SIGNED FORM**

**RETURN BIDS AS SHOWN BELOW**

**Copies of bid, descriptive literature or supplemental materials required:**

**10 (Number) Copies**

**U.S. Mail /Hand Delivery/Express Mail/Courier Service**  
**Address:** (Including Federal Express, UPS, etc.)

**The University of Texas MD Anderson Cancer Center**  
**Attn: John Wroth**  
**6900 Fannin, Suite 10.1000**  
**Houston, Texas 77030**

**BIDS MUST BE SUBMITTED IN A SEALED ENVELOPE IDENTIFIED BY THE COMPANY NAME. BID NUMBER MUST BE SHOWN ON THE LOWER LEFT HAND CORNER OF THE ENVELOPE.**

**BIDS MAY BE SUBMITTED AT ANY TIME UNTIL BID CLOSING DATE.**

**THE UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER RESERVES THE RIGHT TO REJECT ANY AND ALL BIDS OR ANY PART THEREOF.**

**BIDDER MUST COMPLETE AND SIGN BELOW**

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

Mailing Address: \_\_\_\_\_  
 (STREET OR BOX #)

\_\_\_\_\_  
 (CITY) (STATE) (ZIP)

Telephone No.: \_\_\_\_\_ / \_\_\_\_\_  
 AC

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

\_\_\_\_\_  
 (Authorized Signature) (DATE)

\_\_\_\_\_  
 (Typed or Printed Name and Title)

**THIS ITB IS A SOLICITATION FOR BID AND IS NOT A CONTRACT OR OFFER TO CONTRACT.**

**GENERAL**

By signature hereon, Respondent acknowledges and agrees that this ITB is a solicitation for bid and is NOT a contract or an offer for a contract and Respondent shall bear any costs that arise to submit this proposal. MD Anderson makes no representation or warranty, written or oral, that one or more contracts will be awarded resulting from this Invitation to Bid.

The University of Texas MD Anderson Cancer Center is accepting bids in accordance with this ITB, identified specifications and/or requirements and cited terms and conditions. This ITB, as identified above, is issued to acquire the following:

**Prebid Sign-In Sheets and HUB Tip Sheet are attached.**

**Paragraph 1.6.2 is changed to require ten (10) copies of the hardcopy response.**

**DIRECT QUESTIONS TO: John Wroth 713-792-8550 jswroth@mdanderson.org**

## Pre-Bid Meeting Sign-In

**RFQ NUMBER:** MP2030/JSW

**PROJECT NAME:** Master Plan 2030

**DATE:** 2/7/2019

**TIME:** 2:00 pm

**LOCATION:** 6900 Fannin, Conference Room 9.1085 Houston, TX 77030

ATTENDEE NAME	COMPANY NAME	TELEPHONE NUMBER
Jillane Shadlock	EMG	800733-0660
Erik Pillar	EMG	800.733.0660
RICHARD RICKSDAHEL	HKS	713 730 4001
MARK BASFORD	CB TECHNOLOGY	832 249 9379
YVONNE NAGY	HOK	413.623.7996
JOE NILLES	HDR	832.291.9133
Dan DeBaer	GRILL	214 693 3049
Megan Thibodeaux	Shepley Bulfinch	713 634 3714
MICHAEL POSCOVSKY	SHEPLEY BULFINCH	713.634.3724
John Wroth	MDACC	713-792-8550
Barbara Cornington	MDACC	713 593 2020

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ATTENDEE NAME	COMPANY NAME	TELEPHONE NUMBER
TARIK CLARK	MD ANDERSON	(713) 745-1749
RENE VITAL	HUITT-ZOLLARS	713.622.1180
JOEL COLWELL	HUITT-ZOLLARS	713-594-2923
MUHAMMAD CHEEN	WALTER P MOORE	713-630-7300
MARIA GONZALEZ	MOODY NOLAN	713. 816. 3299
DON NYE	K&C	713. 580. 8800

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[illegible]

University of Texas MD Anderson Cancer Center  
Supply Chain Management  
HUB & Federal Small Business Program

HUB Subcontract Plan (HSP) Required Documents

**Two-Step Non-Construction Solicitations**

(Does not include Construction, A & E, Design Build & CMR)

**I. Request For Qualifications Step (RFQ)**

Respondent must submit a completed and signed Letter of HUB Commitment with the Qualifications Submittal. The letter can be found on page 8 of the Rider-104A HUB Subcontracting Plan (HSP). **Failure to submit the Letter of HUB Commitment will result in a rejection of your RFQ submittal.**

a) Please ensure that the letter has been signed, references the appropriate bid number and due date and is placed on company letterhead. Please do not change the content of the letter.

**II. Request For Proposal Step (RFP)**

Only the successful respondent(s) awarded the contract will be required to submit a full HSP.

*\*Please contact Barbara Howard for all questions regarding the HUB Requirement\**

**HUB & Federal Small Business Program**      Fax 713-745-5814

**Barbara Howard, Sr. HUB Coordinator**      713-794-3211      [bhoward@mdanderson.org](mailto:bhoward@mdanderson.org)

**Marian Nimon, Associate Director**      713-745-8352      [mnimon@mdanderson.org](mailto:mnimon@mdanderson.org)