

**Johnson County Commission**

**Troy A. Matthews**  
Presiding Commissioner

**John L. Marr**  
Commissioner, Eastern District

**Charles Kavanaugh**  
Commissioner, Western District

**Diane Thompson**  
County Clerk



Johnson County Courthouse  
300 N. Holden Street, Suite 203  
Warrensburg MO 64093  
660-747-2112  
www.JoCoCourthouse.com  
CountyCommissioners@jocomo.gov

Posted: February 8, 2024 at 5:25 p.m.

**ADDENDUM #1: REQUEST FOR BIDS – Shamrock Business Park Haying Operations**

QUESTIONS AND CLARIFICATIONS SUBMISSION DEADLINE: 1:30 p.m. (CST) on Thursday, February 8, 2024

BID SUBMITTAL DEADLINE: 1:30 p.m. (CST) on Tuesday, February 20, 2024

This Addendum 1 to the RFQ addresses changes and questions received. The Bidder shall indicate receipt of this Addendum and any previously issued Addenda by signing the form(s) for inclusion with the proposal response. Revisions to pre-existing language are indicated by strike-through for deletions or underlining for insertions. Responses are notated in **red**.

**CHANGES**

Revisions to pre-existing language in, are indicated either by strike-through for deletions and underlining for insertions.

Page 6 – STANDARD TERMS AND CONDITIONS

~~3.3 Include an updated W-9 form with company information and signature, with formal, legal, company name.~~

3.6 Bidders must procure and maintain, at a minimum, the following policies of insurance against all claims for injuries against persons or damage to property which may arise from or in connection with the performance of the subject matter of the request for bid: (1) workers’ compensation insurance for all employees as required by state law; (2) comprehensive general liability insurance in an amount not less than \$500,000 per occurrence and \$3,000,000 in aggregate, covering both bodily injury and property damage, including accidental death; ~~(3) automobile liability insurance during the term of the Agreement not less than \$500,000 per occurrence and \$3,000,000 in aggregate, covering both bodily injury, including accidental death, and property damage to protect themselves from any and all claims; and (4) insurance for loss of materials, supplies, tools and equipment during the term of the Agreement in an amount which will adequately cover the potential loss or damage to such items.~~ The bidder shall furnish the County with Certificates of Insurance establishing the insurance requirements as set forth in this section. Each policy of insurance must contain a thirty (30) day mandatory cancellation notice. Once the Contractor has been selected, the Contractor will provide copies of the above insurance requirements.

Page 6 – FINAL COMPLIANCE CHECKLIST

~~4.8 W-9 Form: Include a current/signed W-9 form with your company information. Johnson County Accounts Payable Department cannot process payment(s) without a current W-9. The name and address on your W-9 will be used as the formal name/address on any subsequent post-award Agreement.~~

**QUESTIONS**

Responses are notated in **red**.

- Item 3.6. As owner/operator partnership we have no employees with health insurance to cover anything that happens to us. And as far as property insurance the only thing we’ve had problems with is breakdown of equipment in which we fix at our cost. Do we still have to provide proof of insurance?  
**If you are not required by state law to have (1) Workers Compensation Insurance, then it is not required. If you are awarded the bid, proof of insurance will be required for the applicable insurances.**
- Page 7 – Do we fill the upper part and contractor part?  
**Yes, please complete the business name and town in the top portion, the rate per acre on Item #3, and the Contractor section at the bottom.**
- Is there a plan holder list available for this project?  
**Requests for Bids were sent to Bob Wagoner, Lawrence Quick, and Terry Wagoner.**

END OF ADDENDUM 1

This addendum shall become a part of the RFB and should be returned with any submitted proposal with handwritten signature.

\_\_\_\_\_  
Company

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title