



LAKE COUNTY

FLORIDA

OFFICE OF PROCUREMENT SERVICES
315 WEST MAIN STREET, SUITE 441
PO BOX 7800
TAVARES FL 32778-7800

PHONE: (352) 343-9839
FAX: (352) 343-9473

www.lakegovernment.com

ADDENDUM NO. 1

Date: September 25, 2015

Request for Proposal 16-0204

COMPLETION OF COMPENSATION STUDY

It is the vendor's responsibility to ensure their receipt of all addenda, and to clearly acknowledge all addenda within their initial bid response. Acknowledgement may be confirmed either by inclusion of a signed copy of this addendum with the initial bid response, or by completion and return of the addendum acknowledgement section of the solicitation. Failure to acknowledge each addendum may prevent the bid from being considered for award.

This addendum DOES NOT change the date for receipt of bids or proposals.

The purpose of this addendum is to provide answers to various vendor questions regarding this solicitation as follows:

Question 1: Included with the RFP is a copy of the Pay & Classification Plan. We tallied approximately 252 classes. Are all of these to be included in the study? (YES) If not, what are the number of classes to be included in the scope of work? (N/A)

Answer 1: Lake County has approximately 360 classifications and EMS has an additional 20. All Classifications for which there is available survey data will be included in the study

Question 2: How many employees are to be included in the study?

Answer 2: Lake County has approximately 750 employees. Lake EMS has about 200, 185 of which are either paramedics or EMTs. To be clear, we are not interested in making determinations about individual employees. We are only interested in how our pay ranges for existing classifications compare to market data.

Question 3: When do you anticipate that the project will begin?

Answer 3: November 2015

Question 4: The RFP states a 90 day completion of the study. Is there a reason behind the timeframe? Is there any flexibility to completion?

Answer 4: Some flexibility. However, we want the report presented to the Commission in first quarter of calendar year 2016 so any recommendations can be considered for the FY 2015-2016 budget.

Question 5: On page 9, Section 1.14.1 Proposal Submittal, Tab H, Proof of Insurance, it states to “provide either a completed Accord form or a signed letter from your insurance agency.” Please define the term “Accord form.”

Answer 5: The “Accord” form is a standard certificate of insurance form.

Question 6: When was the last outside study performed? By whom?

Answer 6: Completed in 2006/2007 by Management Advisory Group International, Inc.

Question 7: Has the County established a budget for the project? If so, are you able to identify the amount?

Answer 7: The County has not established a firm budget for this effort.

Acknowledgement of Addendum:

Firm Name: _____ Date: _____

Signature: _____ Title: _____

Typed/Printed Name: _ _____