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To: **Plan Holder**

Attn.: **Bidder**

Date: **September 2, 2009**

Project: **Vienna Woods Main Replacement**

CWO No.: **09-107**

**Addendum No. 1**

The contract documents for the **Vienna Woods Main Replacement** project have been changed as follows:

- Existing piping throughout the project area consists of Asbestos Cement (AC) Pipe. A chain cutter shall be required when cutting all AC Pipe. Cut portions of pipe, including AC waste from wet-tapped pipe, shall be thoroughly watered, sealed in heavy-duty black plastic bags, and transported to a land fill accepting commercial AC pipe waste.

The Contractor shall complete a "Generator Waste Profile" similar to the attached sample from the Monterey Regional Waste Management District (see page 2 of this addendum). The Contractor shall be recorded as the Generator of the AC pipe waste. The Contractor shall submit a copy of the "Generator Waste Profile" to the District as evidence the AC pipe waste was properly disposed of before the project will be accepted as complete.

**BID DATE REMAINS: September 8, 2009 AT 2:00 PM**

Please adjust bids accordingly. If you would like a hard copy of this addendum, you may pick one up at the District Office, 5180 Soquel Drive, Soquel, CA 95073.

Bidder acknowledges receipt of this addendum, which shall be attached to and made a part of the proposal.

Contractor Representative

Date

Soquel Creek Water District  
Jeffery N. Gailey, PE  
Engineering Manager/ Chief Engineer

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ADMIN. SERVICES MGR.

ROBERT WELLINGTON  
COUNSEL

# MONTEREY REGIONAL WASTE MANAGEMENT DISTRICT

*Home of the Last Chance Mercantile*

## GENERATOR WASTE PROFILE

### SECTION 1 - GENERATOR (Generator Must Complete)

Name \_\_\_\_\_  
U.S. EPA ID No. \_\_\_\_\_  
Generator Site \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_ E-mail \_\_\_\_\_

**GENERATOR CERTIFICATION:** This is to certify that the waste material described herein are classified as Non-Hazardous and is not subject to Federal and California regulations for reporting proper disposal of hazardous waste. All information provided is true and accurate. Our company hereby agrees to fully indemnify the MRWMD against any damages resulting from this certification being inaccurate or untrue.

Printed Name & Title of Authorized Agent \_\_\_\_\_  
Signature of Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

### SECTION 2 - WASTE DESCRIPTION/PROPERTIES (Generator must Complete)

General Waste Description \_\_\_\_\_  
Estimated Waste Weight or Volume \_\_\_\_\_  Tons  Cubic Yards  Gallons  
Transported By:  Roll of Box  Dump Truck  Vacuum Truck  Drum (type/size) \_\_\_\_\_  Other \_\_\_\_\_

#### Waste Properties: (check all that apply)

Solid  Semi-Solid  Sludge  C & D Debris (mixed) Color(s) \_\_\_\_\_ Sheen: Yes  No   
 Powder  Liquid  Soil  \_\_\_\_\_ Percent Solids \_\_\_\_\_

#### Laboratory Analysis (analysis must be performed by a California State Certified Laboratory)

Waste Analysis Attached (check-all that apply)  CA Title 22 Metals  Volatile Organics  TPH Gas/Diesel  
 BTEX  PCB's  Semi-volatile Organics  Herbicides/Pesticides  Other \_\_\_\_\_

### SECTION 3 - TRANSPORTER (Hauler Must Complete)

Company Name \_\_\_\_\_  
U.S. EPA ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_  
Printed Name & Title of Authorized Agent \_\_\_\_\_  
Signature of Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

**FOR MRWMD USE ONLY (District Weighmaster must complete)**  Landfill  Land Treatment  Recovery or Reuse

Signature of Weighmaster \_\_\_\_\_ Weigh Ticket No. \_\_\_\_\_ Date \_\_\_\_\_