

PROCUREMENT DIVISION

Public Services Building 2051 Kaen Road | Oregon City, OR 97045

REQUEST FOR QUOTES #2017-12 SAFE ROUTES TO SCHOOL PROJECT RESPONSE TO CLARIFYING QUESTIONS April 11, 2017

Note that these are questions submitted by interested firms to the above referenced solicitation. The below answers are for clarification purposes only and in no way alter or amend the RFQ as published.

- 1. Clarification: The Reports and Claims Due Dates is posted for quoters use and information.
- 2. How many schools in total are expected to be completed this year?

Answer: Approximately four (4); however, we would like to do more.

End of Clarifying Questions



OREGON DEPARTMENT OF TRANSPORTATION Transportation Safety Division

Reports And Claims Due Dates

Project No.: HU-17-10-13

Project Title: CLACKAMAS CO. DEPT. OF TRANSPORTATION & DEVELOPMENT SRTS

Calendar: FEDERAL FISCAL YEAR 2017 Grant Year: 2017

Reports/Claims Due Dates

| First Quarter (October 01 - December 31) | |
|--|---------------------------|
| Quarterly Reports | Tuesday, January 10, 2017 |
| Claims for Reimbursement | Sunday, February 5, 2017 |
| Second Quarter (January 01 - March 31) | |
| Quarterly Reports | Monday, April 10, 2017 |
| Claims for Reimbursement | Friday, May 5, 2017 |
| Third Quarter (April 01 - June 30) | |
| Quarterly Reports | Monday, July 10, 2017 |
| Claims for Reimbursement | Saturday, August 5, 2017 |
| Fourth Quarter (July 01 - September 30) | |
| Quarterly Reports | Tuesday, October 10, 2017 |
| Claims for Reimbursement | Sunday, November 5, 2017 |
| Project Evaluation Report | |
| Evaluation Report Due | Sunday, November 5, 2017 |
| Claims for Reimbursement | |
| Final Claims | Sunday, November 5, 2017 |

Note: Claim reimbursement for any quarter will not be processed until the quarterly report has been received and signed by the TSD Program Manager.

If you file monthly claims, the last monthly claim for the quarter will not be paid unless the quarterly report has been received and signed by the TSD Program Manager.

The undersigned agree that the information included above has been reviewed and the required due dates and final deadlines are understood.

| Project Director's Name: | Barbara Cartmill | |
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| Project Director's Signature: | | Date: |

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