
**CAMINO REAL REGIONAL MOBILITY AUTHORITY
REQUEST FOR INFORMATION/INDUSTRY REVIEW
REGARDING THE DEVELOPMENT OF AND PROCUREMENT PROCESS FOR THE
WYLER AERIAL TRAMWAY PROJECT**

ADDENDUM NO. 1

The Camino Real Regional Mobility Authority (CRRMA) hereby amends the procurement identified above, through this Addendum No. 1. The original Request for Information (RFI) document included an incorrect date in **Section F - Current Anticipated Schedule**. This error was also included in **APPENDIX C – Request for One-On-One Industry Review Meeting**. This Addendum No. 1 corrects these errors by replacing Section F and APPENDIX C with the corrected Section F and Appendix C provided below. Corrections are redlined for ease of use. No other amendments to the RFI are being made at this time.

F. Current Anticipated Schedule

The CRRMA currently anticipates the RFI process to follow the milestones outlined below:

| Milestone | Anticipated Date |
|--|---|
| 1. RFI Issuance | January 12, 2022 |
| 2. RFI Questions Due | January 26, 2022 |
| 3. Requests for One-on-One Meetings Due | January 26, 2022 |
| 4. CRRMA Responses to RFI Questions Expected | February 2, 2022 |
| 5. Responses to RFI Due | February 16, 2022 |
| 6. Industry Review One-on-one Meetings | February 23 ²⁶ , 2022 |
| 7. Issue RFQ | Summer 2022 |

The anticipated milestone dates noted above are preliminary and subject to change.

APPENDIX C – Request for One-On-One Industry Review Meeting

Please submit this information to: wylerttramway@atkinsglobal.com with a subject line of: “Meeting Request: Wyler Tramway RFI – [NAME OF SUBMITTING ENTITY]”.

Role Your Company Anticipates Providing to the CRRMA (e.g., Prime, Specialty Area, etc.):

Our company, or the firms on our team, intend to provide the following services:

Reason to Request a meeting time:

The reason we would like to request a meeting is to:

Appointment Preference:

Our preferred meeting time would be_____.
(Meetings will be held on February ~~2326~~, 2022).

Contact:

My contact information is:

Firm: _____

Name: _____

Address: _____

City, State ZIP: _____

Phone: _____

Fax: _____

E-mail: _____

[END OF APPENDIX]