



STATE OF NORTH CAROLINA
DEPARTMENT OF TRANSPORTATION

JOSH STEIN
GOVERNOR

DANIEL H. JOHNSON
SECRETARY

October 21, 2026

CONTRACT: PR39989
WBS ELEMENT: VARIOUS
COUNTY: BEAUFORT, CARTERET, CRAVEN, GREENE, JONES,
LENOIR, PAMLICO, AND PITT
ROUTE: VARIOUS
DESCRIPTION: STRING TRIM MAINTENANCE IN BEAUFORT, CARTERET,
CRAVEN, GREENE, JONES, LENOIR, PAMLICO, PITT
COUNTIES

ADDENDUM 1

TO: PROSPECTIVE BIDDERS

Please note the following revisions to the proposal.

- Revision of Bid Quantities on page T-1.

Please replace the proposal page T-1 that was included in the original proposal with the attached T-1 pages.

Please make sure to sign the addendum page in the proposal to acknowledge this addendum.

Sincerely,

Signed by:

FED337A8A4074AA...

Mary Voelker Moore, PE
Division Contract Engineer

cc: Mr. Vann Sparrow
Mr. Greg Rayburn
Mr. Marshall Gibbs
Mr. Rhett Gerrald, PE
Mr. Jordan Davenport, PE
Ms. Heather C. Lane, PE
Ms. Melanie Heath

**NORTH CAROLINA DEPARTMENT OF TRANSPORTATION
CONTRACT BID FORM****BID PROPOSAL NO.:** PR39989**WBS ELEMENT NOS.:** VARIOUS**COUNTIES:** BEAUFORT, CARTERET, CRAVEN, GREENE, JONES, LENOIR,
PAMLICO, AND PITT IN DIVISION 2**TYPE OF WORK:** VEGETATION REMOVAL AT STATIONARY OBJECTS

LINE NO.	SEC NO.	ITEM DESCRIPTION	EST. QUANT.	UNIT	UNIT PRICE	AMOUNT BID
1	SP	Vegetation Trimming & Removal at Stationary Objects Beaufort County	382,104	LF	\$	\$
2	SP	Vegetation Trimming & Removal at Stationary Objects Carteret County	147,720	LF	\$	\$
3	SP	Vegetation Trimming & Removal at Stationary Objects Craven County	729,420	LF	\$	\$
4	SP	Vegetation Trimming & Removal at Stationary Objects Greene County	195,840	LF	\$	\$
5	SP	Vegetation Trimming & Removal at Stationary Objects Jones County	264,252	LF	\$	\$
6	SP	Vegetation Trimming & Removal at Stationary Objects Lenoir County	657,678	LF	\$	\$
7	SP	Vegetation Trimming & Removal at Stationary Objects Pamlico County	117,492	LF	\$	\$
8	SP	Vegetation Trimming & Removal at Stationary Objects Pitt County	1,024,518	LF	\$	\$

TOTAL BID FOR PROJECT: \$ _____

Contractor: _____

Address: _____

Phone: _____ Federal ID: _____

Contractor License Number (If Available): _____

Authorized Agent: _____ Title: _____

Signature: _____ Date: _____