



Beaufort County School District

Solicitation Number: 22-020
Date Printed: February 16, 2022
Date Issued: February 16, 2022
Procurement Officer: Kaylee Yinger, CPPB
Phone: 843-322-2349
Email: Kaylee.Yinger@beaufort.k12.sc.us

Invitation for Bid (IFB)

DESCRIPTION: **Elkay Drinking Fountains**
SUBMIT OFFER BY (Opening Date & Time): **March 23, 2022; 4:00 PM EST**
QUESTIONS MUST BE RECEIVED BY: **March 16, 2022**
NUMBER OF COPIES TO BE SUBMITTED: Two (2) originals

Offers must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior.

SUBMIT YOUR SEALED OFFER TO EITHER OF THE FOLLOWING ADDRESSES:

MAILING ADDRESS:
Beaufort County School District
Procurement Office
P.O. Drawer 309
Beaufort, SC 29901-0309

PHYSICAL ADDRESS:
Beaufort County School District
Procurement Office
2900 Mink Point Blvd
Beaufort, SC 29902

AWARDS & AMENDMENTS:

Award will be posted at the Physical Address stated above on or after March 23, 2022. The award, this solicitation, and any amendments will be posted at the following web address: www.beaufort.k12.sc.us

You must submit a signed copy of this form with Your Offer. By submitting a bid or proposal, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of ninety (90) calendar days after the Opening Date.

NAME OF OFFEROR: _____ (Full legal name of business submitting the offer) ENTITY TYPE: _____

AUTHORIZED SIGNATURE (Person signing must be authorized to submit binding offer to enter contract on behalf of Offeror named above)

PRINTED NAME _____ TITLE _____

Instructions regarding Offeror's name: Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror above. An offer may be submitted by only one legal entity. The entity named as the Offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.

PAGE TWO
(Return Page Two with Your Offer)

HOME OFFICE ADDRESS (Address for offeror's home office/ Principal place of business): 	NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent):
PHONE NUMBER:	
EMAIL ADDRESS:	

PAYMENT ADDRESS (Address to which payments will be sent): <input type="checkbox"/> Payment Address Same as Home Office Address <input type="checkbox"/> Payment Address Same as Home Notice Address (check one only)	ORDER ADDRESS (Address to which all purchase orders will be sent): <input type="checkbox"/> Payment Address Same as Home Office Address <input type="checkbox"/> Payment Address Same as Notice Address (check one only)
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

ACKNOWLEDGEMENT OF AMENDMENTS:	<u>Amendment Number</u>	<u>Amendment Issue Date</u>
Offerors acknowledges Receipt of amendments by Indicating amendment number and its date of issue		

MINORITY PARTICIPATION- Are you a Minority Business Enterprise: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please include a copy of your certification.

Questions and Answers:

1. Please provide specific part numbers.

ITEM	Elkay Part Number
Elkay – Water Refilling Station, wall mount, single VR Bubbler, SS	LZS8WSVRSK
Elkay – ADA Wall Hung, filtered, SS	LZS8S
Elkay – Legacy Style wall mount, VR bubbler, SS	EHFA8S w/VRB