



BIBB COUNTY SCHOOL DISTRICT

## SUPPLIER QUOTE SOLICITATION

**(This is NOT a purchase order.)**

REQUESTING DEPARTMENT		SUPPLIER INFORMATION	
Company	Bibb County School District	Company	
Dept.	School Nutrition Department	Dept.	
Address	2011 Riverside Drive	Address	
City	Macon, GA 31204	City	
Contact	Cleta J. Long	Contact	
Phone	(478)779-2612	Phone	
Fax	(478)779-2613	Fax	
E-mail	<a href="mailto:elaine.wilson@bcsdk12.net">elaine.wilson@bcsdk12.net</a>	E-mail	
Issue Date			

### GENERAL INSTRUCTIONS & CONDITIONS

1. This quote must be signed by an authorized agent of the Supplier or it will be rejected.
2. Where a "brand name" is indicated, no substitutions shall be considered unless the term "or equivalent" appears beside the "brand name."
3. All items must meet applicable standards.
4. A new vendor packet must be completed if your company is not already established as an approved vendor with the district.
5. The Bibb County School District reserves the right to reject any or all quotes.
6. LATE QUOTES WILL BE REJECTED.

**DESCRIPTION: 1.2 gal Counter-top Shake or Slush Free**

Provide one (1) Stoelting E112 counter machine which is gravity fed. The machine is fully automatic controls to provide a uniform product. It will operate with almost any frozen beverage mix. Electrical specifications: Single phase, 115 VAC, 60Hz, approx (running), Connection type: NEMA-20P power cord included, Compressor 6,000 Btu/1/3 hp, Air FLOW: Air cooled units require 3" air space on both side or 4" air space in Volume: 3.625 gallons, Freezing Cylinder Volume: 1.25 gallons. UL Listed, NSF. Must for start-up and at 1 month. \*Option to purchase additional machines within the n

**QUOTE SUBMISSION DEADLINE**

Quotes must be submitted by 3:00 p.m. on or before **Friday, October 28, 2016** to School Procurement Department, 4580 Cavalier Drive, Macon, GA 31211. All electronic be done via electronic portal. [www.bcsdk12.net](http://www.bcsdk12.net), procurement-vendor r

**QUOTE: \_\_\_\_\_**

**Company Name**

**Brand**

**Model**

**Electrical**

**Capacity: Barrel**

**Hopper**

**Voltage**

**Warranty**

**Training**

<b>Proposed Delivery Date</b>	
<b>Prices valid through</b>	
<b>TOTAL AMOUNT OF QUOTE</b>	
	<b>GRAND TOTAL</b>

<b>ADDITIONAL REQUIRED INFORMATION</b>	
<b>Estimated delivery date</b>	
<b>Prices shall remain valid until</b>	
<b>Authorized signature</b>	
<b>Date submitted</b>	

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**ezzer**

**equipped with  
type of shake or  
matelt 16A  
hr, Drive Motor  
back. Hopper  
provide training  
next 48 months.**

**the Bibb County  
onic submittals will  
registry.**

