Horry County Schools	**Office of Procurement Services** **REQUEST FOR QUOTE**	Solicitation Type: Solicitation Number: Date Issued: Procurement Specialist: Physical Address: Phone/Fax: Email:	Request for Quote 2021-36MJ 12/17/2020 B. Maurice Jackson 335 Four Mile Road, Conway, SC 29526 (843) 488 - 6929 mjackson@horrycountyschools.net

Offer should be submitted to Procurement Specialist

SUBMIT OFFER BY (Opening Date/Time): **January 7, 2020 / 12:00 PM (EST)**

Please quote your lowest delivered price of the below listed item(s). The Procurement Office reserves the right to reject any or all quotes and to waive any or all technicalities.

1. If an item cannot be furnished, indicate by **NO QUOTE**
2. All quotes must be signed by the Offeror's representative and terms noted, failure to comply with this instruction may result in disqualification of the quote.
3. No South Carolina sales tax will be paid on freight or labor.
4. *Do not include any sales or use taxes* in your price that the District may be required to pay.
5. The attached *Terms and Conditions* apply to all quotes and supersedes Vendor's Terms and Conditions.
6. Offers may be submitted to the Procurement Specialist *via email: mjackson@horrycountyschools.net or https://vrapp.vendorregistry.com/Bids/View/BidsList?BuyerId=2f302e8a-69b0-407b-a21a-3368d004365e*

BIDDING SCHEDULE

Item No.	Description	Qty.	U/M	Unit Price	Total Extended Price
1.	**DeltaWASP 60100 3D PRINTER or equivalent**	1	Each	$	$
	*OMIT TAXES FROM TOTAL BID				$

INFORMATION FOR OFFERORS TO SUBMIT

By signing this quote, offeror certifies under penalties of perjury that they have complied with section 12-54-120(B) of the S.C. code of Laws 1976 as amended pertaining to payment of taxes.

Authorized Signature: _____ Printed Name: _____ Date: _____

Company Name:_____ Federal Tax Payer ID /SSN: _____

Phone Number: _____ Fax Number: _____ Email Address: _____

Mailing Address: _____ City:_____ State: _____ Zip: _____

SC Minority Certification Number (if applicable) _____

Vendor's Best Delivery Date _____ Days ARO (after receipt of order) Vendor's Discount Terms: _____% _____Days

Do you collect SC Sales Tax? ☐ Yes ☐ No SC Tax Registration # (if applicable) _____

ACKNOWLEDGMENT OF AMENDMENTS Offeror acknowledges receipt of amendments by indicating amendment number and its date of issue. See "Amendments to Solicitation" Provision	Amend. #	Amend. Issue Date	Amend. #	Amend. Issue Date

GENERAL CONDITIONS

DEFAULT: In case or default by the Contractor, Horry County Schools reserves the right to purchase any or all items in default in the open market, charging the Contractor with any additional costs. The defaulting Contractor shall not be considered a responsible Contractor until the assessed charge has been satisfied.

All amendments to and interpretation of this RFQ shall be in writing. The procurement officer shall not be legally bound by any amendment or interpretation that is not in writing.

Any contract entered into by Horry County Schools resulting from this quotation shall be subject to cancellation at the end of any fiscal or appropriated year unless otherwise provided by law.

Payment will be made in accordance with Section 11-35-45 of the South Carolina Consolidated Procurement Code and Disbursement Regulations. Delay in receiving invoices, as well as errors and omissions on the invoices, will be considered just cause for withholding payment without losing discount privileges. The District reserves the right to withhold payment or make such deductions as may be necessary to protect the District from loss or damage because of defective work, claims, damages or to pay for repair of correction of materials furnished hereunder.

Quoted prices must remain firm for a period of thirty (30) days beyond the Request for Quotation deadline.

Unit prices will govern over extended prices unless otherwise stated.

Horry County Schools shall not consider payment discounts in the award of this contract when such discounts are for thirty (30) days or more after final inspection and acceptance of contract requirements. Payment discounts for less than thirty days are encouraged but shall not be a factor in award determination. Please state your discount terms using the above referenced information as the District's position on the matter.

All materials and products offered must be guaranteed to meet and comply with the requirements all the specifications, terms and conditions indicated or referred to.

The award will be made in accordance with Section 11-35-1550 (b)of the South Carolina Consolidated Procurement Code.

The District reserves the right to reject any and all quotations and to cancel the solicitation; waive any and all technicalities; the District reserves the right to reject any quotation in which the delivery tine indicated to be of substantial length to cause disruption and/or delay in operation for which the item(s) is/are intended; ambiguous quotations which are uncertain as to terms, delivery, quantity or compliance with specifications may be rejected.

The contractor assumes sole responsibility and shall hold harmless Horry County Schools, its Board of Education, employees and agents from and against any and all claims, actions or liabilities of any nature which may be asserted against them by third parties in connection with the performance of the successful Contractor, its Boars, employees and agents under this agreement. Horry County Schools agrees to accept responsibility for claims, actions or liabilities resulting from negligent acts of its employees occurring within the scope of their employment which may be asserted against them by third parties in connection with the performance of Horry County Schools, its Board, employees and agents under this agreement.

Contractor agrees not to refer to award of this contract in commercial advertising in such a manner to state or imply that the products or service provided are endorsed or preferred by the user.

Upon award of a contract under this quotation, the person, partnership, association or corporation to whom the award is made must comply with the laws of South Carolina that require such person or entity to be authorized and/or licensed to do business in this State. Notwithstanding the fact that applicable statutes may be exempt or exclude the successful Contractor from requirements that it be authorized and/or licensed to do business in this State, by submission of this signed quote, the Contractor agrees to subject itself to the jurisdiction and process of the courts of the State of South Carolina as to all matters and disputes arising or to arise under the contract and the performance thereof, including any questions as to the liability for taxes, licenses or fees levied by the State.

Termination: Subject to the provisions below, the contract may be terminated for any reason by the District providing a thirty-day advance notice in writing is given to the contractor.

Termination for Convenience: In the event that this contract is terminated or cancelled upon request and for the convenience of the District may negotiate reasonable termination costs, if applicable.

Termination for Cause: Termination by the District for cause, default, or negligence on the part of the Contractor shall be excluded from the foregoing provisions; termination costs, if any, shall not apply. The thirty day advance notice requirement is waived and the default provision in this bid shall apply.

HIPAA Law: The Contractor agrees that to the extent that some or all of the activities within the scope of this Contract are subject to the Health Insurance Portability Accountability Act of 1996, P.L. 104-91, as amended ("HIPAA"), or its implementing regulations, it will comply with the HIPAA requirements and will execute such agreements and practices as the Horry County Schools may require to ensure compliance.

SPECIAL CONDITIONS

LICENSES, PERMITS, INSURANCE: All costs for required licenses, permits and insurance shall be borne by the Contractor.

Horry County Schools requires all contractual activities to be performed in a manner that is consistent with all applicable federal, state and local laws, regulations, rules, rulings and ordinances. These include, but are not limited to: the Occupational safety and Health Act, The Environmental Protection Act, The South Carolina Hazardous Waste Management Act.

IMPORTANT– Please Note - Contractors, we MUST have your Federal ID # (company) or Social Security # (individual) before processing any invoices for payment. Failure to provide this information will result in delay of payments until this information is received. Please include this information with your quote.

INFORMATION FOR OFFEROR'S TO SUBMIT

MINORITY PARTICIPATION (JAN 2006)

Is the bidder a South Carolina Certified Minority Business? Yes NO

Is the bidder a Minority Business certified by another governmental entity? Yes NO

If so, please list the certifying governmental entity:

Will any of the work under this contract be performed by a SC certified Minority Business as a subcontractor? Yes NO

If so, what percentage of the total value of the contract will be performed by a SC certified Minority Business as a subcontractor? Yes NO

Will any of the work under this contract be performed by a minority business certified by another governmental entity as a subcontractor? Yes NO

If so, what percentage of the total value of the contract will be performed by a minority business certified by another governmental entity as a subcontractor? Yes NO

If a certified Minority Business is participating in this contract, please indicate all categories for which the Business is certified:

☐ Traditional minority ☐ Traditional minority, but female ☐ Women (Caucasian females)
☐ Hispanic minorities ☐ DOT referral (Traditional minority) ☐ DOT referral (Caucasian female)
☐ Temporary certification ☐ SBA 8 (a) certification referral ☐ Other minorities (Native American, Asian, etc.)

(If more than one minority contractor will be utilized in the performance of this contract, please provide the information above for each minority business.)

HCS VENDOR APPLICATION

PROCUREMENT OFFICE USE ONLY		
VENDOR ID#	INITIALS	DATE

BUSINESS FULL LEGAL NAME & ADDRESS:

REMITTANCE ADDRESS ***(Attach a blank copy of your invoice.):***

PHONE: _____ FAX: _____ PHONE: _____ FAX: _____

TOLL: _____ CELL: _____ TOLL: _____ CELL: _____

➔ WEBSITE ADDRESS: _____

➔ **EMAIL ADDRESS FOR ELECTRONIC PURCHASE ORDER TRANSMITTALS TO BE EMAILED:** _____

NAMES OF OWNERS, OFFICERS, PARTNERS AUTHORIZED TO BIND THE COMPANY:

OWNER / PRESIDENT: _____ PHONE: _____ FAX: _____

➔ EMAIL ADDRESS FOR OWNER / PRESIDENT: _____

PARTNER : _____ PHONE: _____ FAX: _____

SALES REPRESENTATIVE: _____ PHONE: _____ FAX: _____

➔ EMAIL ADDRESS FOR MAIN SALES CONTACT:

INFORMATION ABOUT TYPE OF BUSINESS:

TYPE: (Check all that apply)

- ☐ Attorney
- ☐ Construction (Inc.)
- ☐ Construction (not Inc.)
- ☐ Corporation (Inc.)
- ☐ Distributor / Dealer
- ☐ Governmental
- ☐ Individual
- ☐ Manufacturer
- ☐ Medical Services
- ☐ Partnership (LLP)
- ☐ Partnership (not Inc.)
- ☐ Research & Dev
- ☐ Sales & Service
- ☐ Sales (only)
- ☐ Service Provider
- ☐ Small Business
- ☐ Wholesaler / Retailer
- ☐ Other _____

Are you subject to IRS 1099 reporting for income tax purposes?

☐ Yes ☐ No ☐ I don't know

STATUS: ☐ Minority Owned * ☐ Woman Owned *

* Must be at least 51% owned/controlled by minorities (non-whites) or women. Check all that apply even if not State certified.

SC Certification #: _____

INFORMATION ABOUT PRODUCTS / SERVICES:

(Find "best fit" category(ies). Check all that apply.)

- ☐ Books & Similar Materials
- ☐ Computer Hdw / Software
- ☐ Construction (Specify Below)
  - ☐ Electrical
  - ☐ Masonry
  - ☐ Mechanical / HVAC
  - ☐ Painting
  - ☐ Plumbing
  - ☐ Roofing
  - ☐ Other (specify) _____
- ☐ Equipment
- ☐ Food Products
- ☐ Furniture
- ☐ Other (specify) _____
- ☐ Other (specify) _____
- ☐ Landscaping / Lawn Maint.
- ☐ Printing
- ☐ Rentals (specify) _____
- ☐ Repairs (specify) _____
- ☐ Services (specify) _____
- ☐ Supplies (specify) _____
- ☐ _____
- ☐ Telecommunications
- ☐ Vehicles / Trucks

IDENTIFICATION AND CERTIFICATION:

In compliance with Internal Revenue Service and State of South Carolina regulations, please provide us with the following taxpayer identification information. We are required by law to obtain this information when making a reportable payment to you. Failure to provide the information may subject future payments to a 31% backup withholding and $50 penalty. ** This serves as a substitute Federal W-9.**

➔**For individuals, enter social security number (SSN)** :	
➔**For sole proprietors, enter owner's SSN or Federal Employer's Identification Number (FEIN):**	
➔**For partnerships, corporations or others, enter FEIN:**	
➔**For verification of sales tax collection authority, enter State of SC Sales Tax License Number:**	

Under penalties of perjury, I certify that the numbers provided above are true and correct and I am not subject to backup withholding because: (a) I am exempt, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding. I further certify that all information supplied herein is correct and the applicant nor anyone in connection with the applicant as a principal or officer, so far as is known, is now debarred, suspended or otherwise declared ineligible to do business with any agency of the State of South Carolina, the Federal government or Horry County Schools.

Authorized Signatory _____ Print Name & Title _____ Date Completed _____