

# FRANKLIN COUNTY PURCHASING DEPARTMENT REQUEST FOR BID (RFB) COVER PAGE

RFB NO: 202417

TITLE: Light Duty Truck for Franklin County Health Department

<u>Solicitation Schedule & Deadlines:</u>

January 10, 2024 Solicitation Release/Advertising Date

January 17, 2024 10:00AM Deadline for Submitting Questions

January 19, 2024 4:30PM Deadline to post Addendum

January 30, 2024 2:00PM Deadline to Submit Response

January 30, 2024 2:30 PM Opening Date I Time

Responses must be received no later than "Deadline to Submit Response"

January 30, 2024 2:00 PM

Shakara Bray, Purchasing Agent

Meagan Johnson, Assistant Purchasing Agent

Phone: 636-584-6274 Email: purchasing@franklinmo.gov

Submittal Instructions: Print this Packet in its entirety and complete all pages per instructions. Print the SEALED RESPONSE LABEL found in Attachment 1 of this packet and attach to the front of your envelope.

Company Name:	

## **SUBMISSION CHECKLIST**

I have reviewed the bid schedule and deadlines, located on the solicitation cover pageI have read ALL Terms and Conditions and Bid documents closely
(Located at www.franklinmo.org)
THE ITEMS LISTED BELOW ARE THE REQUIRED DOCUMENTATION FOR SUBMITTING A RESPONSE
USE THESE FORMS ONLY
Solicitation Cover page
Contractual Terms and Conditions Acknowledgement
Pricing Form (all pages) completed and signed
I have one original and two copies that are labeled accordingly
I have included contact information
COI (Certificate of Insurance)
Envelope is sealed and label attached
Affidavit for Work Authorization is completed and Notarized
Current, signed W-9 is included in solicitation packet
If you have already submitted W-9 information through Vendor Registry, you do not have to resubmit with response. Just reference Vendor Registry.

#### **PURPOSE**

Franklin County, Mo (Health Dept.) is seeking bids from qualified vendors to provide a 2021 or newer Light Duty Truck for our Health Dept. for basic utility purposes that meets or exceeds the specific requirements listed below.

## **SPECIFIC REQUIREMENTS**

- 1. The vendor shall provide Model year 2021 or newer Light Duty Truck with manufacturers' standard equipment.
- 2. All items of standard equipment which are normally provided with each vehicle by the manufacturer shall be furnished unless such items are specifically omitted by the request for bid specifications.
- 3. All options and/or accessories must be manufacturers' original equipment. No aftermarket options and/or accessories shall be acceptable.
- 4. All options must be factory installed.
- 5. The manufacturers' standard warranty shall apply to this vehicle.
- 6. All warranty service must be performed within a 70mile radius from the Franklin County Highway Dept. physical location: 400 E. Locust Union, Mo. 63084
- 7. Vehicle shall come with owner's manual.
- 8. Vehicle shall come with proper form to apply for Missouri title and license including the Manufacturer's Statement of Origin and invoice.
- 9. Vehicle shall be delivered and/or picked up within one week from award date of this bid.
- 10. Delivery and/or pick up specifications of the vehicle will be one of the following:
  - a) Vehicle delivered to the Franklin County Health Dept. 414 E Main St. Union, Mo. 63084
  - b) Vehicle picked up at awarded vendor's location no more than 70 miles from the Franklin County Health Department 414 E Main St. Union, Mo. 63084
- 11. In the event that the awarded vendor cannot deliver and/or accommodate pick up for the Franklin County Health Dept. within one week of the award date, The Franklin County Health Dept. reserves the right to find the same or similar vehicle from another source.
- 12. Payment will be a check from Franklin County, Mo which will be processed and sent after vehicle is in hands of Franklin County Health Dept. and after invoice is received by Franklin County Health Dept. Invoice can be mailed or emailed it the following:

Franklin County Health Dept.
Attn: Tony Buel
414 E. Main St. Union, Mo. 63084

Or Purchasing@franklinmo.gov

- 13. Invoice will have the awarded vendor's remittance address, Legal Business name, Franklin County's Purchase order number, and pricing broke down by specifications.
- 14. The awarded vendor shall be responsible for repairing any item or components received in damaged condition at no cost to Franklin County, Mo.
- 15. All prices shall be firm, fixed as indicated in the pricing pages within this bid.
- 16. Color of vehicle shall not be red or black. Red vehicles are associated with the fire departments in the area. Black vehicles are costly to repair. (Black absorbs all visible parts of the light spectrum, turning that light energy into heat, the more energy it absorbs, the more heat it omits. And the extra amount of heat causing interior plastic to buckle or crack, because they are not good conductors of heat.) White color is preferable.

The contents of this section include mandatory requirements that will be required of the successful bidder and subsequent contractor. The offeror is requested to provide responses to the requirements/desired attributes in this section pursuant to the directions identified herein. The offeror's response, whether responding to a mandatory requirement or a desired attribute, shall be binding in the event the bid is accepted by Franklin County. The offeror must provide all costs necessary to meet the mandatory requirements and the fulfillment of any desirable attributes in the appropriate section titled Pricing.

## **CONTRACTUAL TERMS AND CONDITIONS ACKNOWLEDGEMENT**

The undersigned Vendor/Contractor has read, understood, and accepted the Terms and Conditions as published on the Franklin County Official Website located at:

http://www.franklinmo.org

of contract. Vendor/Contractor enters into	e adhered to by Vendor/Contractor upon acceptance to this agreement voluntarily, with full knowledge of its effect.
Vendor/Contractor Sign	gnature Date
Vendor/Cont	ntractor Name and Title

## **AFFIDAVIT OF WORK AUTHORIZATION**

The grantee, sub grantee, contractor or subcontractor who meets the section 285.525, RSMo definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now		(Name of Business En	tity Authorized Representative)	
as				
first being duly sworn on my oath, affirm_			(Business Entity Name) is	
enrolled and will continue to participate i	n the E-Verify	Federal Work Aut	horization program with respect to	
employees hired after enrollment in the p	rogram who	are proposed to w	ork in connection with the services	
related to(I	Bid/Grant/Subgi	rant/Contract/Subcont	tract) for the duration of the grant,	
subgrant, contractor, or subcontractor, if				
also affirm that			(Business Entity Name)	
does not and will not knowingly employ a contracted services related to	· 			
$\label{lem:contract} \mbox{(Bid/Grant/Subgrant/Contract/Subcontract)} \mbox{ for } \mbox{t}$	he duration o	of the grant, subgra	ant, contract, or subcontract, if	
awarded.				
Authorized Representative's Signature	Pri	nted Name		
Title	Da	te		
Subscribed and sworn to before me this	of		I am	
	Day	Month, Year		
commissioned as a notary public within the	ne County of		, State of	
and my commis	ssion expires	on Date		
Signature of Notary	Da	te		

#### AFFIDAVIT OF WORK AUTHORIZATION

(Continued)

#### **CURRENT BUSINESS ENTITY STATUS**

I certify that defined in section 285.525,	(Business Entity Name) <u>MEETS</u> the definition of a business entity as RSMo pertaining to section 285.530, RSMo as stated above.
Authorized Business Entity Representative's Name (Please Print)	Authorized Business Entity Representative's Signature
Business Entity Name	Date
,, , , , ,	rantee, contractor, or subcontractor must perform/provide the ntractor, or subcontractor shall check each to verify

Enroll and participate in the E-Verify Federal Work Authorization Program
 (Website: <a href="http://www.dhs.gov/e-verify">http://www.dhs.gov/e-verify</a>; Phone: 888-464-4218
 Email: <a href="mailto:e-verify@dhs.gov">e-verify@dhs.gov</a>) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

AND

Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify Federal Work Authorization Program. Documentation shall include a page from the E-Verify Memorandum of Understanding (MOU) listing the grantee's, subgrantee's, contractor's. or subcontractor's name and the MOU signature page completed and signed, at minimum, by the grantee, subgrantee, contractor, or subcontractor and the Department of Homeland Security – Verification Division; (if the signature page of the MOU lists the grantee's, subgrantee's, contractor's, or subcontractor's name, then no additional pages of the MOU must be submitted).

## **PRICING FORM**

## **2021** or newer Light Duty Truck

## **REQUIRED PRICING**

The bidder shall complete the following pricing form and provide firm, fixed pricing necessary to meet the mandatory requirements of the solicitation.

Check list for 2021 or newer Light Duty Truck					
2021 or newer LIGHT DUTY TRUCK EQUIPMENT SPECIFICATIONS	Yes	No	COMMENTS (IF NOT EXACTLY AS SPECIFIED, EXPLAIN ANY DEVIATION.)		
			,		
Year: 2021 or newer					
Exterior Color: White (preferable)					
Passenger: 4 Person Minimum					
Doors: Crew Cab or 4- full doors					
Bed lenghth: 5-6 1/2 ft					
GVW Rating: 6800					
Tires: All Season M&S Radial					
Tire Tools and Jack					
Brakes: Four Wheel Anti Lock (ABS)					
Full Size Spare Tire					
Engine: 6cyl-8cyl					
Transmission: Automatic					
Four Wheel Drive					
Axle Ratio: 3.73 MIN					
Rear Axle: Locking rear differential					
Air Conditioning and Heating					
Radio: AM/FM with Blue Tooth					
Power Brakes & Power Stering					
Cruise Control					
Tilt Wheel					
Seats: Vinyl or cloth					
Air Bags: Drivers Side and passanger					
Mirrors: Right and Left, Power					
Intermittent Wipers					
Step Bumper					
Tow Package with Brake Assist/Control					
Two(2) sets of keys or key FOBS					

Pricing Cont.

## Model Year 2021 or newer Light Duty Truck

Make:			
Firm, Fixed Base Price Equipped as S	Specified within the	"Check List" Per Light Duty	Truck
	\$		
Company Name			
Authorized Signature			
Printed name and title			

Franklin County reserves the right to request supporting documentation for the proposed pricing. In addition, it may be necessary to evaluate the bidder's expertise and experience in order to award a bid. Franklin County reserves the right to request reference information and/or proof of expertise if necessary.

# **VENDOR INFORMATION**

Company Name		
Mailing Address		
Phone number		
Contact Name	 	
Contact Name Title		
Email Address		

## **ATTACHMENT 1**

#### **SEALED RESPONSE LABEL**

PLEASE ATTACH LABEL TO OUTSIDE OF PACKAGE	

## **SEALED BID RESPONSE ENCLOSED**

DELIVER TO:
Purchasing Department
400 East Locust St, Rm 004
Union, MO 63084

SOLICITATION # 202417 DATE: January 30, 2024 2:00PM DESCRIPTION: Light Duty Truck for Franklin County Health Department

Vendor Name:	 	 	
Vendor Address:			