

# City of Waycross

Purchasing Department

Linda E. Jones  
Purchasing Director

**TO: ALL VENDORS**  
**FROM: LINDA E. JONES, CPPB, PURCHASING DIRECTOR**  
**DATE: May 14, 2018**  
**RE: Request for Proposals**

The City of Waycross, Georgia will receive sealed proposals until, 11:00 a.m., Wednesday, May 30, 2018.

For : 2018/2019 New Model Portable Air Compressor

As specified in the attached specifications.

The city reserves the right to accept or reject any or all proposals, to waive formalities and technicalities, to make an award in the best interest of the City. All bidders must comply with all Federal, State and Local Laws.

Factors to be considered in making this award, if awarded, will be equipment, price, and ease of use. . The City will be the sole judge of the weights given these factors.

Proposals will be opened conference room at City Hall, on the second floor – 417 Pendleton Street, Waycross, Georgia, on the hour and date specified above. No proposals will be accepted after bid opening time. No faxed or email proposals will be accepted.

**PROPOSALS SHOULD BE MAILED TO:** CITY OF WAYCROSS, PURCHASING DIRECTOR  
P. O. DRAWER 99  
WAYCROSS, GEORGIA 31502-0099

**OR HAND DELIVERED TO:** CITY HALL – PURCHASING DEPARTMENT  
**(PRIOR TO OPENING)** 417 PENDLETON STREET, ROOM 201  
WAYCROSS, GEORGIA 31501

**BID ENVELOPE SHOULD BE MARKED:** Bid # FY18-25 Air Compressor

Prices quoted shall be firm prices and remain firm until delivery is made. If awarded, the City will place an order with the successful bidder within thirty (30) days after bid opening.

P. O. Drawer 99  
Waycross, Georgia 31502-0099  
(912) 287-2956



**CITY OF WAYCROSS  
REQUEST FOR PROPOSAL  
185 CFM/49 HP PORTABLE AIR COMPRESSOR  
FY18-25  
MAY 14, 2018**

**GENERAL**

The City of Waycross will be accepting sealed proposals from Equipment Vendors for the purchase of a new Portable Air Compressor. Proposals will be accepted until, **11:00 a.m., Wednesday, May 30, 2018**. Envelope must be sealed and marked Bid # FY18-25. Proposals may be mailed to the City of Waycross Purchasing Department, PO Drawer 99 Waycross, GA 31502 or hand delivered to City of Waycross, Purchasing Department, 417 Pendleton Street. The City of Waycross does not accept late, faxed or emailed bids.

**DESIRED EQUIPMENT**

The Portable Air Compressor shall be a new model Sullair 185 Tier 4 or Doosan P185WDO-T4F or an Acceptable Alternate.

**MINIMUM SPECIFICATIONS:**

- 49 hp
- 185 cfm
- 100 psi Working Pressure
- 4 Tier Engine
- Low Oil Protection

**STANDARD INSTRUCTIONS:**

1. All warranties must be listed and included with bid.
2. List any accessories that are standard to the unit.
3. Complete specifications and pictures of unit must be included in bid.
4. Price shall include delivery.
5. Request for Quote sheet has been included and must be completed and returned with bid.
6. One or more proposals from your company will be accepted and reviewed.

**EVALUATION CRITERIA:**

- |                                |     |
|--------------------------------|-----|
| 1. Price of Equipment          | 40% |
| 2. Quality of Equipment        | 40% |
| 3. Ease of Equipment Operation | 20% |

**TERMS AND CONDITION**

The City reserves the right to accept or reject any or all proposals, to waive formalities and technicalities, to make an award in the best interest of the City. City shall be the sole judge as to which proposal is best and will make an award that is the absolute best value for the City, which may or may not be the lowest bid.

This is a request for proposal, no prices will be divulged during opening. Proposals will be reviewed, evaluated and a recommendation will be made to the City Commission for approval.

**City of Waycross  
P.O. Drawer 99  
Waycross, GA 31502**

REQUEST FOR QUOTATION	
BID #:	FY18-25 Air Compressor
DATE:	May 15, 2018
THE ABOVE NUMBER MUST APPEAR ON ALL QUOTATIONS AND RELATED CORRESPONDENCE.	
<b>THIS IS NOT AN ORDER</b>	

QUOTE NOT LATER THAN 11:00 am, May 30, 2018	REQUISITION NO.	DATE OF REQUISITION

CHARGEABLE ACCOUNT NUMBER
PLEASE QUOTE ON THIS SHEET IN SPACES INDICATED BELOW FOR THE ARTICLES DESCRIBED. NOTE DELIVERY REQUIRED AND IN QUOTING, ADVISE DEFINITE DELIVERY. BASE YOUR QUOTATION ON THE TERMS AND CONDITIONS PRINTED AND/OR TYPED HEREON.

**This is not an order**

WE QUOTE YOU AS BELOW	
NAME OF COMPANY	
BY (SIGNATURE)	
OFFICIAL TITLE	DATE

DELIVERY REQUIREMENT		DELIVERY PROMISED	TERMS	F.O.B. 516 Alice Street Waycross, GA 31501	
ASAP ARO		Days	% Days		
ITEM	QUANTITY	DESCRIPTION		UNIT PRICE	AMOUNT
1.	1 each	New Portable Air Compressor			\$
		Make:			
		Model:			
		Warranty:			
		Shipping			\$
		Total Purchase Cost			\$

<p>This quote sheet is provided for your convenience. Please return completed form with your bid.</p>	<p><b>LINDA E. JONES, CPPB PURCHASING DIRECTOR</b></p>
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**QUOTATION REQUEST**