

**CITY OF NORTH CHARLESTON
INFORMAL BID
PQ-15-17**

INFORMAL BID REQUEST: **North Charleston Fire Department Breathing Apparatus and Equipment**

REQUESTED BY: **Willie Atienza – Purchasing Department - (843) 740-5890 or watienza@northcharleston.org**

TECHNICAL QUESTIONS PLEASE CONTACT: **Assistant Chief Brad Wade – Fire Department - (843) 740-2616 or wadeb@northcharleston.org**

PRICE QUOTES MUST BE SUBMITTED BY: **Thursday, May 18, 2017 @ 1:30 PM**

Emailed and Faxed bids are encouraged and acceptable.

Submit bids by completing the Bid Form portion of this package and any other required forms and **EMAIL** to Willie Atienza, Buyer, City of North Charleston @ **watienza@northcharleston.org** or **FAX** to the North Charleston Purchasing Department at (843) 745-1083 (PQ-15-17, North Charleston Fire Department Breathing Apparatus and Equipment, Attn: Willie Atienza)

Bids sent by regular mail should be addressed to: City of North Charleston, Purchasing Department, P.O. Box 190016, North Charleston, SC 29419-9016.

Bids hand delivered or sent by courier service should be addressed to: City of North Charleston, Purchasing Department, 2500 City Hall Lane, North Charleston, SC 29406.

Bid Submission Requirements: Several forms provided further on comprise the complete bid submission 'package'. All forms must be completed and submitted to ensure your bid is considered. Failure to submit all required forms may cause your bid to be declared non-responsive and discarded. Forms required when submitting your bid are:

BID FORM

VENDOR PREFERENCE (IF APPLICABLE)

CERTIFICATION OF DRUG FREE WORKPLACE

CERTIFICATION OF NONSEGREGATED FACILITIES

CERTIFICATION REGARDING ILLEGAL IMMIGRATION

BID FORM

Firm: _____

Phone: _____ Fax _____

E-Mail _____

the City of _____ County of _____,

and State of _____, hereinafter called "Bidder".

This Bid shall be signed only by a person legally authorized to bind the Bidder to a Contract.

By: _____
Signature Print or Type Name

Title Date

**PROJECT: NORTH CHARLESTON FIRE DEPARTMENT BREATHING
APPARATUS AND EQUIPMENT**

INFORMAL BID NO: PQ-15-17

**CITY OF NORTH CHARLESTON
INFORMAL BID REQUEST
PQ-15-17**

We propose to furnish equipment as per Bid NC-15-17 delivered to the North Charleston Fire Department, Station #2, 2800 Carner Avenue, North Charleston, SC 29405, at the price stated below. We understand and agree that Bids cannot be withdrawn for a period of sixty (60) days after opening.

| <u>ITEM</u> | <u>QTY</u> | <u>DESCRIPTION</u> | <u>UNIT COST</u> | <u>EXTENDED PRICE</u> |
|--|------------|--|----------------------|---------------------------|
| 1. | 4 - | Scott AP75 SCBA Model X321402120302 | \$ _____ | \$ _____ |
| 2. | 12 - | Scott AV3000HT Facepieces. Part #'s 201215-05, 201215-06 and 201215-07 with quantities of each To be determined at the time of order | \$ _____ | \$ _____ |
| 3. | 4 - | Scott Epic 3 Voice Amplifiers. Part # 201275-01 Model ABD3ST-NX (No Exceptions) | \$ _____ | \$ _____ |
| SHIPPING CHARGES (FOB Destination, North Charleston, SC) | | | | \$ _____ |
| | | | SUBTOTAL | \$ _____ |
| | | | SALES TAX | \$ _____ |
| | | | TOTAL COST | \$ _____ |

**CITY OF NORTH CHARLESTON RESIDENT VENDOR PREFERENCE
AFFIDAVIT**

Personally appeared before me _____ who, being duly sworn, certifies that the vendor identified in this bid/proposal response meets the following qualifications for the resident vendor preference: Has a principal place of business located within the corporate limits of the City of North Charleston. (A post office box or temporary construction or office trailer shall not be considered a place of business). Has a valid City of North Charleston business license and is in compliance with any state requirements or local ordinances regarding the type of business engaged in.

By this written claim bidder/proposer requests that the one percent (1%) resident vendor preference (not to exceed \$3,000.00) be exercised in consideration of contract award of this bid/proposal. Failure to complete and return this affidavit and a copy of your current City of North Charleston business license with your bid/proposal will result in not being eligible to receive the benefits of the resident vendor preference.

BUSINESS NAME: _____

NORTH CHARLESTON STREET ADDRESS: _____

SIGNATURE: _____ TITLE: _____

Sworn to and subscribed before me at _____ State of _____

this _____ day of _____ 20__.

Signature of Notary Public

Commission Expires

CERTIFICATION OF DRUG FREE WORKPLACE

The contractor certifies that he maintains a drug-free workplace and has or will establish a drug-free awareness program that informs employees about the dangers of workplace drug abuse; the contractor's intent to maintain a drug-free workplace; the existence of any available drug counseling, rehabilitation or employee assistance programs; and the penalties that may be imposed upon employees who abuse controlled substances in the workplace.

In the event of the Contractor's noncompliance with the drug free workplace certification of this contract, this contract may be canceled, terminated, or suspended in whole or in part, and the Contractor may be declared ineligible for further contract awards with the City of North Charleston.

By: _____

Title: _____

Date: _____

Official Address (including Zip Code) _____

CERTIFICATION OF NONSEGREGATED FACILITIES

The Bidder certifies that he does not maintain or provide for his employees any segregated facilities at any of his establishments, and that he does not permit his employees to perform their services at any location, under his control where segregated facilities are maintained. The Bidder certifies further that he will not maintain or provide for his employees any segregated facilities at any of his establishments, and that he will not permit his employees to perform their services at any location under his control where segregated facilities are maintained. The Bidder agrees that a breach of this certification will be a violation of the Equal Opportunity clause in any contract resulting from acceptance of this Bid. As used in this certification, the term "segregated facilities" means any waiting rooms, work areas, rest rooms and washrooms, restaurants, and other eating areas, time clocks, locker rooms and other storage or dressing areas, parking lots, drinking fountains, recreation or entertainment areas, transportation, and housing facilities provided for employees which are segregated by explicit directive or are in fact segregated on the basis of race, color, religion, or national origin, because of habit, local custom, or otherwise.

In the event of the Contractor's noncompliance with nondiscrimination clauses of this contract, this contract may be canceled, terminated, or suspended in whole or in part, and the Contractor may be declared ineligible for further contract awards with the City of North Charleston.

NOTE: The penalty for making false statements in offers is prescribed in 18 U.S.C. 1001.

By: _____

Title: _____

Date: _____

Official Address (including Zip Code) _____

CERTIFICATION REGARDING ILLEGAL IMMIGRATION

The contractor certifies that he/she will comply with the applicable requirements of Title 8, Chapter 14 of the South Carolina Code of Laws (originally enacted as Section 3 of The South Carolina Illegal Immigration Reform Act, 2008 S.C. Act no. 280) and agrees to provide to the City upon request any documentation required to establish either: (a) that Title 8, Chapter 14 is inapplicable to you and your subcontractors or sub-subcontractors; or (b) that you and your subcontractors or sub-subcontractors are in compliance with Title 8, Chapter 14. Pursuant to Section 8-14-60, "A person who knowingly makes or files any false, fictitious, or fraudulent document, statement, or report pursuant to this chapter is guilty of a felony and, upon conviction, must be fined within the discretion of the court or imprisoned for not more than five years, or both." You agree to include in any contracts with your subcontractors language requiring your subcontractors to (a) comply with the applicable requirements of Title 8, Chapter 14, and (b) include in their contracts with the sub-subcontractors language requiring the sub-subcontractors to comply with the applicable requirements of Title 8, Chapter 14.

By: _____

Title: _____

Date: _____

Official Address (including Zip Code) _____
