Invitation to Bid

20180621-1-CO

#### HVAC COMPREHENSIVE MAINTENANCE AGREEMENT SUMNER COUNTY

Responses to an Invitation to Bid will be received by the Purchasing Supervisor, Sumner County Board of Education, 1500 Airport Road, Gallatin, TN 37066 for June 21

, 2018. Bid responses will be opened at that time, taken under advisement and evaluated. Should you have any questions please contact Kim Ark at (615) 452-3604. All proposals are subject to the Board of Education's conditions and specifications which are available from Chris Harrison, Purchasing Supervisor (615) 451-6560. All bids can be viewed online at www.sumnerschools.org

# PROPOSAL REQUEST

# Comprehensive HVACMaster Maintenance Agreement



SUMNER COUNTY GOVERNENT SUMNER COUNTY, TENNESSEE

Advertisement Date: June 3rd, 2018

Deadline: June 21st, 2018 at 10:00 am

# Introduction

Sumner County Government is the reby requesting a proposal for Comprehensive Maintenance Master Agreement for the HVAC systems at the following Sumner County items:

1)

# General Information

# I. Proposal Package

All sealed proposal packages mut include all of the following. Any sealed proposals shall be rejected as a non-conforming bid if any applicable item is missing.

- x Three (3) complete copies of proposal
- x Evidence of a valid State of Tennessee Business License and/or Sumner County Businleisenseis required to be eligible to bid

Χ

2. To comply with the Tennessee Lawful Employment Act, non-employees (individuals hired as independent contractors) must have on file anywo (2) of the following documents.

Valid Tennessee driver license or photo ID issued by department of safety Valid out-of-state driver license U.S. birth certificate Valid U.S. passport U.S. certificate of birth abroad Report of birth abroad of a US. citizen Certificate of citizenship Certificate of naturalization U.S. citizen identification card Valid alien registration documentation or proof of current immigration registration

In addition, for all vendors with annual purchases in excess \$50,000 (if a business license is required), a business license must be on file in the finance department, or the requisitioner must submit a copy with the purchase order requisition form or the payment requisition form, as applicable.

#### II. Responses

- x Proposal must include point by-point responses to the RFP.
- x Proposal must include a list of any exceptions to the requirements.
- x Proposal must include the legal name of the vendor and must be signed by a person or persons legally authorized to bind the vendor to a contract.
- x If applicable, proposal must include a copy of the contract(s) the vendor will submit to be signed.
- x Any and all proposal requirements must be met prior to submission.
- x The bidder understands and accepts the noneppropriation of funds provision of the Sumner County Government.
- x  $\hat{}$  '-‡†  $\langle \bullet \check{S} \ddagger \bullet \ddagger \dots \langle ' \bullet \hat{O} \rangle$ '" '' '•  $f \check{Z}$ " ‡ "  $\langle " \ddagger \bullet \ddagger \bullet \bullet \hat{O} \rangle$  "  $\check{Z} f \ddagger$ " " ‡ "  $\ddagger \bullet \ddagger \uparrow \hat{A} a$  reference list of clients that have a current contract for services with their company.

#### III. Clarification a

#### XIII. Procedures for Evaluating Proposals and Awarding Contract

In comparing the responses to this RFP and making awards, Sumner County may consider such factors as quality and thoroughness of a proposal, the record of experience, the references of the respondents, and the integrity, performance, and assurances in the proposal in addition to that of the proposal price.

- x Proposals will be examined for compliance with all requirements set forth herein.
- x Proposals that do not comply shall be rejected without further evaluation.
- x Proposals will be subjected to a technical analysis and evaluation.
- x Oral presentations and written questions for further clarifications may be required of some or all vendors.

#### XIV. Discussions

Discussions may be conducted with the vendors which have submitted proposalætermined to be reasonably likely of being considered for selection to assure a full understanding of and responsiveness to the RFP requirements. Every effort shall be afforded to assure fair and equal treatment with respect to the opportunity for discussion and/or revision of their respective proposals. Revisions may be permitted after the submission and prior to the award for the purpose of obtaining the best offers.

XV.

# XXII. Specific Proposal Requirement Details

Sumner County is requesting proposals for a Comprehensive HVAC (full) coverage maintenance agreement for each of the following locations. The coverage shall include all/every components of the HVAC system including, but not limited to, the control system lts, filters, lubricants, parts, electrical, valves, piping, labor, travel expenses, and any miscellaneous expenses. The expectation is that each HVAC systems, including components shall operate at, or better than, the factory specification Newaldditional charges shall be accepted by the County, while this agreement is in effect, notwithstanding, due to unforeseen failure, ent unit replacements, overtime, or acts of God. (Overtime shall be defined as any call for intentional businessurs)

Note: To ensure that pricing is accurate for each location, each bidder will be required to make a site visit each location to identify the HVAC equipment to be covered. Site visiauiat

Quarterly:

1)

Annually at start of contract in July:

- 1) All condenser coils to be cleane8hall be cleaned ##ast three times a year beginning in July. Preferable July, October, and April Proof of cleaning must be provided.
- 2) All evaporator coils to be cleaned as needshall be cleaned at least three times a year beginning in July. Preferable July, Octobernd April. Proof of cleaning must be provided.
- 3) All belts to be replaced in July at start of contract.
- 4) Cleaning of all boiler burners and fire box.
- 5) Pan Pads will be placed in all condensate drain pans to help prevent clogged drain lines.
- 6) All duct work shall be inspected repair or clean if necestarraroper operation

\*If it is determined by contractor that the tasks above need to be performed the system, tasks will be covered under the system. \*

This agreement includes all parts, supplies, travel expenses, labor and any costs associated with this full coverage maintenance agreement. Any building automation systems and controls is included in this full coverage maintenance agreement. All service requests: eived during normal business hours (MonBaiglay, 7:00am to 5:00pm) will not incur overtime charges regardless as to the time taken to complete the request.

Not included in this coverage is unforeseen failure due to Acts of God and entire lambement. Any call initiated by Sumner County personnel after normal business hours shall be defined as overtime; an exception to this overtime rule WKH 6XPQHU &RXQW\ 6KHULII¶V RIILFH - DLO &-& EXLO Called for self-vice at ORF any time, contractor will be required to respond and the service visit will be covered under the contract and not consider as overtime. Contractor shall provide overtime rate and times considered to be overtime.

Billing shall be on a quarterly basis in July, October, January, and April, prorated from the date of the signed agreement Invoices shall be paid within thirty days of repteby Sumner County Government.

The agreement is subject to the rappropriation of funds atute, and the acceptance of a cancellation provision that either party to the agreement may enappn a written thirty (30) day noticet any time during the contract period. If a cancellation of the agreement occurs, the County shall be responsible billed charges up to the date and nothing additional.

Interested bidder is required to complete a site visit with County Maintenance staff. Please contact Captain Doug & D Q W H U D W 6 X P Q H U & R X Q W \ 6-1845and CQ wity ExecutivH DW R I I L F H D604 to set up time to review scope of work. Site visit is mandatory to review scopet is the responsibility of each respondent to this request, to verify the scope of work as a basis of the proposal. All respondents to this request shall be responsible for any errors or omissions. Each respondent is required to conduct a site visit w@ounty Maintenance to validate their proposal. Each respondent will be required to list dates of county maintenance site visits with County and Jail maintenance staff.

Respondent shall provide a list of job references for similar project agreementetedring past five years, see form in

#### List of Job References:

\*\* Note: also include resumes of proposed staff whoill be working at county buildings\*\* Project Name/Location: Agency/Department:\_\_\_\_\_ Dates of Project: Dollar Value: Project Manager/Contact at Agency:\_\_\_\_\_ Phone: \_\_\_\_\_\_ <u>Em</u>ail: \_\_\_\_\_ Project Name/Location: Agency/Department: Project Manager/Contact at Agency: Phone: \_\_\_\_\_\_ <u>Em</u>ail: \_\_\_\_\_ Project Name/Location: Agency/Department:\_\_\_\_\_ Project Manager/Contact at Agency: Phone: \_\_\_\_\_\_ Email: \_\_\_\_\_ Project Name/Location: Agency/Department:\_\_\_\_\_ Project Manager/Contact at Agency:\_\_\_\_\_

Phone: \_\_\_\_\_\_ <u>Em</u>ail: \_\_\_\_\_

# HVAC MAINTENANCE AGREEMENT BID FORM

Date Submitted			
TO: Sumner County, TN			
I, 5 H S U H V H Q W D W L Y H ¶ V Of	V 1D₽#HSUHVHC	QWDWLYH¶V	_ 6LJQDWXUH
Name of Company	AddressCity	Zip	<del></del>
Hereby su	ubmit our bid for the		
(Phone) HVAC Maintenance Agreeme <b>pt</b> ojec	tin accordance with the	pecifications and ins	strf 1 e2(ic)ect

Sumner CountyTennessee	1019 Union School Roa@allatin 37066		
Rehabilitation Center			
			-
Total Cost for Contract	t for all locations for One (1) Year Period		
Description of theovertime rate			
Submitted By:			
Authorized Signature	Date:		
&DSWDLQ 'RXJ &DQWHU D ([HFXWLYH $\P$ (6157) 452376644. $\square$ is the	ite visit with County Maintenance staff. Site visit is male W 6 X P Q H (615) 474 2 1345 to 64 Liputime! To VevRe responsibility of each respondent to this request, to vall be responsible for any errors or omissions. Each reoposal.	wlsc <del>bpe</del> oDworkAl verify the scope of v	so contact County work as a basis of the
Please list date of Site Visit wißumner C	County Maintenance Staff		
Please list date of Site Visit withumner C	County Jail/C.IC Maintenance Staff		

### XXII. Termination of Agreement

Either party to this agreement shall have the right to terminate this agreement upon a 30 day written notice. Both parties shall be liable for payments or services due prior to the date of termination, but no further fees shall be due or payable after the notice of termination is received

### ATTACHMENT1

#### STATEMENT OF NONCOLLUSION

The undersigned affirms that they are dully authorized to execute this contract, that this company, corporation, firm, partnership or individual has not prepared this proposal in collusion with any other respondent, and that the contents of this proposal as to prices, terms or conditions of said proposal have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this proposal.

Company		
Address		
-		
_		
Phone		-
Fax		-
Respondent (S	Signatur <del>)</del>	_
Respondent(Pr	rint Name and Title)	
Authorized Cor	mpanyOfficial (Print Name)	

# DRUGFREE WORKPLACE AFFIDAVI(page 2)

STATE OF		
COUNTY OF		
The undersigned, principal officer of contracting with Sumner County, TN to provide good	, an employer of ds or services, hereby states under	f five (5) or more employ oath as follows
1. The undersigned is a principal office of $\dot{o}$ '•' $f$ • $\dot{o}$ $\dot{f}$ • $\dot{f}$ $\dot{o}$ $\dot{f}$ • $\dot{f}$ $\dot{o}$ $\dot{o}$ $\dot{f}$ $\dot{o}$ $\dot{o}$ $\dot{f}$ $\dot{o}$ $$	e‡† – 'baþlstattf of the Copmpasnys	(hereinafter referre
2. The Company submits this Affidavit because it sl or any local government to provide goods or service		contract with the state
<ol><li>The Company is in compliance with all State an free workplace program. Further affiant saith not.</li></ol>	nd Federal Laws,les and Regulation	s requiring a drug
Principal Officer.		
STATE OF		
COUNTY OF		
Before me personally appeared to me on the basis of satisfactory evidence) and whaffidavit for the purposes therein contained.	, with whom I am persona no acknowledged that such person	Illy acquainted (or prove executed the foregoing
Witness my hand and seal at office this	day of	, 20
Notary Public		
My commission expires:		

#### **ATTACHMENT 3**

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS The prospective participant certifies, to the best of its knowledge and belief, that it and its principals:

Are not presently debarred, suspended, proposed for debarent, declared ineligible or voluntarily excluded from participation in transactions under federal non-procurement programs by any federal department or agency;

Have not, within the three year period preceding the proposal, had one or more public transactions deral, state, or local) terminated for cause or default; and

Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) and have not, within the three year period preceding the bid, been convict or had a civil judgment rendered against it

A. For the commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public transaction (federal, state, or local) or a procurement contractioner such a public transaction;

B. For the violation of federal or state antitrust statutes, including hose proscribing price fixing between competitors, the allocation of customers between competitors, or bid rigging or

C. For the commission of embezzlement, theftorgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

I understand that a false statement on this certification may be grounds for the rejection of this proposal or the termination of the award. In addition, under 18 U.S.C. § 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to five years, or both.

Nameof Participant Agency:		
Name and Title of Authorized Representative: _		
Signature of Authorized Penrocentative	Data:	
Signature of Authorized Representative	Date:	
I am unable to certify to the above state	ement. Attached is my explanation	

# ATTACHMENT4

# CERTIFICATION BY CONTRACTOR

I, the undersigned, certify that on behalf of Contractor, I am authorized to attest and obligate the above certification and to legally bind Contractor to these terms, conditions and obligations.
Title
Name
Date
Witness

