REQUEST FOR QUOTATION
"PROVIDE AND INSTALL CARPET AT THE CHATHAM COUNTY TAG OFFICE"
QUOTE NUMBER: 17-0052-7

The Number Must Appear On All Quotations and Related Correspondence.

A **PRE-QUOTE CONFERENCE AND SITE VISIT** has been scheduled to be conducted **at the Chatham County Tag Office located at 1145 Eisenhower Drive, Savannah, Georgia at 10:00 a.m. June 6, 2017,** to discuss the specifications and resolve any questions and/or misunderstanding that may arise. **Attendance is encouraged. Opportunity to measure the areas will be provided at that time.**

Quotation must be received NOT LATER THAN 2:00 PM, on June 8, 2017 at the office of the Purchasing Director. Quote may be faxed, emailed, mailed or hand delivered.

Address Reply To: Robin Maurer , Asst. Purchasing Director
Mail to: 1117 Eisenhower Drive Suite C Savannah Georgia 31406
Phone: 912-790-1623
Fax to: 912 -790-1627
Email to: rlmaurer@chathamcounty.org

NAME OF BIDDER: _____

STREET ADDRESS: _____

CITY, STATE, ZIP CODE: _____

PHONE: _____ **FAX:** _____

EMAIL: _____ **FED TAX ID #:** _____

INDICATE MINORITY OWNERSHIP STATUS OF BIDDER (FOR STATISTICAL PURPOSES ONLY):
CHECK ONE:

_____ NON-MINORITY OWNED
_____ AFRICAN AMERICAN
_____ HISPANIC
_____ ASIAN AMERICAN
_____ AMERICAN INDIAN
_____ WOMAN

The undersigned proposes to furnish the following items in strict conformance to the specifications and Request for Quote issued by Chatham County for this quote.

SCOPE OF WORK:

GENERAL INFORMATION: Chatham County is soliciting quotes for the removal of the existing carpet and cove base and install new carpet tiles and cove base. It is the Contractor's responsibility to measure all areas prior to ordering carpet.

PRELIMINARY REQUIREMENTS:

A. It will be the Contractor's responsibility to measure all areas prior to the carpet being ordered. Contractor will be solely responsible for accuracy of all measurements and the fit of the carpet.
B. Chatham County will box drawers and shelf contents, personal belonging and breakable items. Drawers shall be taped, boxes, furniture and cabinets will be tagged/marked prior to commencement of work by the Contractor.
C. All work shall be done by skilled workmen fully experienced in this type of installation.

QUALITY ASSURANCE:

A. Basis of specifications: Due to standardization, we are specifying a particular brand (NO ALTERNATIVES WILL BE ACCEPTED)
B. Contractor will be solely responsible for accuracy of all measurements and fit of the carpet
C. Contractor will be responsible for any damage to walls due to the removal and installation of the carpet and cove base.
D. Upon completion of each room, the installation shall be inspected by a County representative and accepted prior to proceeding to the next area.

FURNITURE LIFTING/MOVE:

A. Contractor will be required to lift/move all furniture and equipment, including any modular furniture, work stations and file cabinets to remove existing carpet and install new carpet.
B. Contractor will be required to store all furniture and cabinets out of the weather.
C. Contractor will not be responsible for disconnecting and moving any computers and computer related equipment.

CARPET REMOVAL AND DISPOSAL:

A. Contractor will be solely responsible for removing all existing carpeting and cove base and disposing thereof.
B. County dumpsters are not to be used for disposal of debris.

CARPET:

A. Shaw Shape #5T070-69505

COVE BASE:

A. Contractor shall install new 4" black vinyl cover base in Administration area and 4" black vinyl cover base in Employee area. Care and attention will be made when removing old cove base as not to damage walls.

FLOOR PREPARATION:

A. Contractor shall scrape all floor surfaces as required to remove glue residue, broom clean all floor areas where carpet is to be installed, and spot patch floor if required. All floor areas shall be dry prior to the installation of any new carpet.

INSTALLATION:

A. Installation shall be done with direct-glue-down methods.
B. Carpet shall be secured to floor with adhesive per carpet manufacturer's recommendation.
C. Vinyl reducers strips will not be accepted during the installation of the carpet. The Contractor shall provide a seamless butt edge in a manner recommended by the carpet manufacturer.
D. Special attention will be given to carpet installation around entry/exit doors. Contractor will ensure that edges will not pull, wrinkle, tear or fray thereby causing a tripping hazard. Contractor will be responsible for all repairs during the 12 month warranty period.
E. On completion of the installation, all dirt, carpet scraps, etc., must be removed from the surface of the carpet. Any soiled spots or excessive adhesive on the carpet of wall areas shall be removed with the proper spot remover. All loose pieces of face yarn must be removed with sharp scissors.

QUALITY CONTROL:

A. Upon completion of each room, the installation shall be inspected by the Chatham County Project Manager and accepted prior to proceeding to the next area.
B. Contractor will provide Chatham County with the care and cleaning instructions that clearly states the manufacturer's approved chemicals which ensure carpet longevity and cleaning methods to be used.

WORKING HOURS:

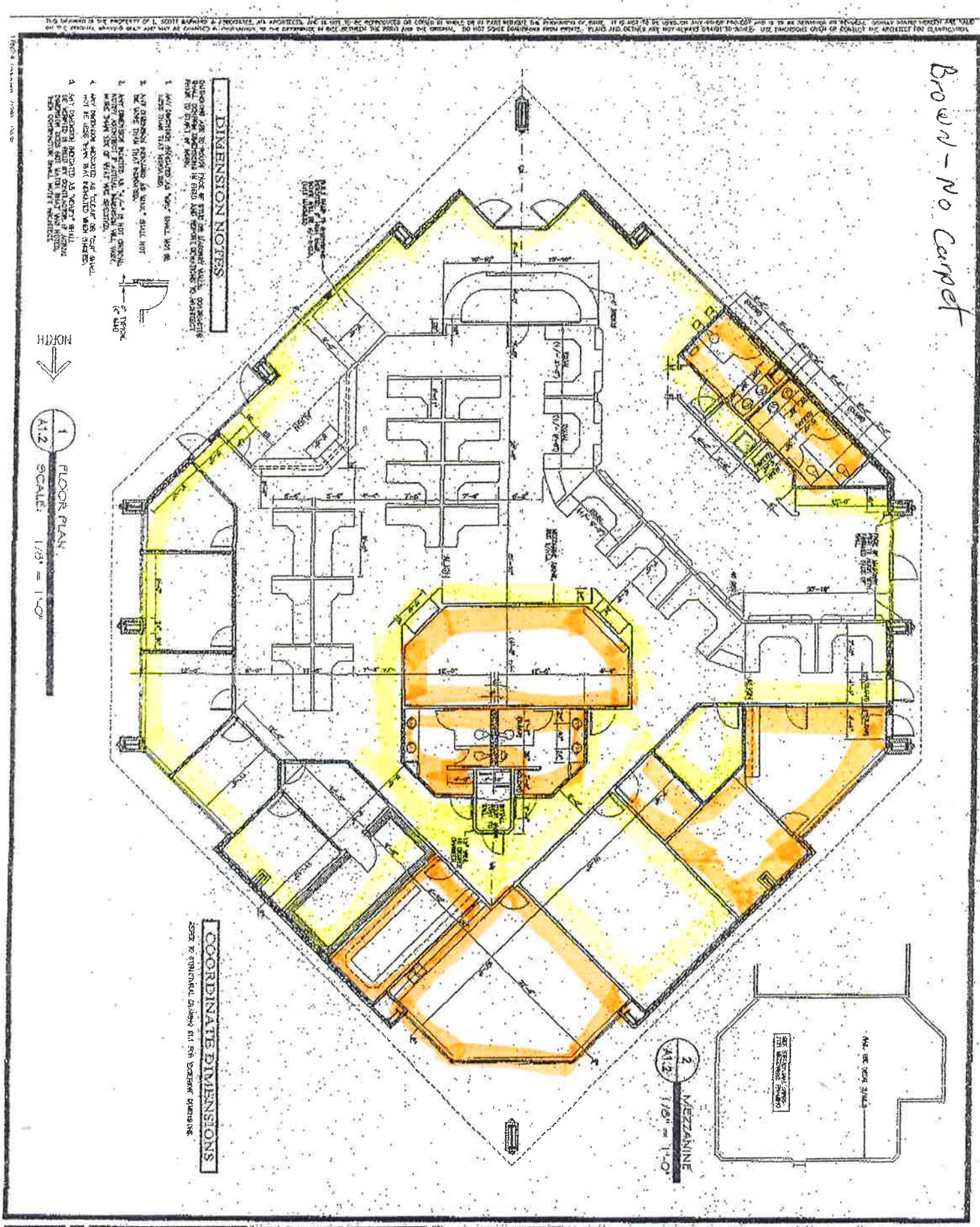
A. Contractor must coordinate all installations with the Chatham County Project Manager.
B. All work is to be performed Monday through Friday after 5:30 pm. Work can be performed on Saturday and Sunday with prior approval from the Chatham County Project Manager.

CONTRACTOR SUPERVISORY PERSONNEL:

A. Contractor will provide 1 supervisor with each work crew for each scheduled work shift. Contractor also will not leave site in an unsafe state upon completing work for the day.
B. Contractor will be accompanied by a Chatham County staff member while working.

Commencement and Completion:

WORK SHALL BEGIN WITHIN TEN (10) DAYS AFTER RECEIPT OF "NOTICE TO PROCEED". PLANS AND SPECIFICATIONS SHALL BE COMPLETED WITHIN 35 CALENDAR DAYS AFTER THE TEN DAY PERIOD.



SHEET NO.: A1.2 OF 0	CHATHAM COUNTY TAG OFFICE EISENHOWER DRIVE SAVANNAH, GEORGIA FLOOR PLAN WITH DIMENSIONS		CHATHAM COUNTY TAG OFFICE	L. SCOTT BARNARD & ASSOCIATES, AIA ARCHITECTURE, PLANNING, LANDSCAPE & INTERIOR DESIGN 230 EAST HALL STREET, SAVANNAH, GA 31401 (912)232-6172 ASSOCIATES: ROBERT J. PORTMAN & JOHN A. CLECC

REMOVAL AND REPLACEMENT OF CARPET AT THE CHATHAM COUNTY TAG OFFICE **TOTAL BID $_____**

Print Name/Title: _____

Company Name: _____

Authorization Signature: _____

Date: _____

RECEIPT IS HEREBY ACKNOWLEDGED OF ADDENDA NUMBER(S)_____

Request for Quotation Instructions

1. All shipments are to be F.O.B. destination. Freight charges must be included in quotation. Delivery shall be made to the address listed on the Purchase Order and within the time specified in the quote.
2. Quotations subject to terms set forth herein, are requested on the following list of materials, supplies or services. On quotes for services, Chatham County insurance requirements must be met. The successful vendor must provide the County with a Certificate of Insurance listing the County as Certificate Holder.
3. **Quote must be submitted on sheets provided in spaces indicated.**
4. Quotes for materials, supplies, vehicles, and/or equipment must be accompanied by Brochures, or copies of detailed factory specifications, ratings, technical data, including accurate descriptions of the exact materials, supplies, vehicles and/or equipment for which bids are made.
5. All information required by request for quotation must be completed to constitute a proper bid.
6. Vendor warrants that the goods are merchantable and as described herein or in the solicitation response. Additional warranties may be called for in the specifications.
7. Chatham County is exempt, by law, from any and all federal and state taxes. Do not include taxes in your quotations. Tax exemption number is **58-6001113.** Exemption certificate will be provided upon request.
8. Price Protection Period of ninety (90) days for all items desired from date of quote submission. Vendors are advised that prices in effect at time of bid shall apply and not be subject to revision at time of shipment.
9. The County reserves the right to split this award by line item if deemed to be in its best interest.
10. Minority/Women Business Enterprise (MWBE) Policy: It is the policy of the County to provide minority and women owned business enterprises with equal opportunity for participating in selling goods and services to the County.
11. **Local Preference:** Bids will be evaluated in accordance with the County's Local Preference ordinance.
12. **Employment Eligibility Verification:** As required under Senate Bill 529 – "Georgia Security and Immigration Compliance Act" of 2006, O.C.G.A. Section 2, Article 3 13-10-91, public employers, their contractors and subcontractors are required to verify the work eligibility of all newly hired employees through an electronic federal work authorization program. The Georgia Department of Labor has added a new Chapter 300-10-1, entitled "Public Employers, Their Contractors and Subcontractors Required to Verify New Employee Work Eligibility Through a Federal Work Authorization Program," to the Rules and Regulations of the State of Georgia. (See website: http://www.dol.state.ga.us/pdf/rules/300_10_1.pdf.) The new rules designate the "Employment Eligibility Verification (EEV) Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security as the electronic federal work authorization program to be utilized for these purposes. The EEV/Basic Pilot Program can be accessed at: https://e-verify.uscis.gov/enroll/StartPage.aspx?JS=YES. Bidders shall comply with this new rule and submit with your bid the attached "Contractor Affidavit and Agreement."
13. O.C.G.A. § 50-36-1, requires Georgia's cities to comply with the federal **Systematic Alien**

Verification for Entitlements (SAVE) Program. SAVE is a federal program used to verify that applicants for certain "public benefits" are legally present in the United States. Contracts with the County are considered "public benefits." Therefore, the bidders are required to provide the Affidavit Verifying Status for Chatham County Benefit Application prior to receiving any County contract. The affidavit is included as part of this bid package.

14. The original invoice is to be submitted to the County Finance Department. The purchase order number must be shown on all invoices and packing lists.
15. References may be requested of the successful bidder.

THIS IS NOT AN ORDER

CONTRACTOR AFFIDAVIT AND AGREEMENT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A.13-10-91, stating affirmatively that the individual, firm, or corporation which is contracting with CHATHAM COUNTY has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with (name of public employer), contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the (name of the public employer) at the time the subcontractor(s) is retained to perform such service.

_____

EEV / Basic Pilot Program* User Identification Number

_____ _____

BY: Authorized Officer or Agent Date

(Contractor Name)

_____

Title of Authorized Officer or Agent of Contractor

_____

Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
_____ DAY OF _____, 20___

_____

Notary Public

My Commission Expires:

_____

* As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV / Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

SUBCONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with (_____name of contractor) on behalf of CHATHAM COUNTY has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. 13-10-91.

_____
EEV / Basic Pilot Program* User Identification Number

_____ _____
BY: Authorized Officer or Agent Date
(Subcontractor Name)

_____
Title of Authorized Officer or Agent of Subcontractor

_____
Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
_____ DAY OF _____, 20___

_____
Notary Public
My Commission Expires:

_____
* As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV / Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

Systematic Alien Verification for Entitlements (SAVE)
Affidavit Verifying Status for Chatham County Benefit Application

By executing this affidavit under oath, as an applicant for a Chatham County, Georgia Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit, Contract or other public benefit as reference in O.C.G.A. Section 50-36-1, I am stating the following with respect to my bid for a Chatham County contract for _____. [Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1.) _____ I am a citizen of the United States.

OR

2.) _____ I am a legal permanent resident 18 years of age or older.

OR

3.) _____ I am an otherwise qualified alien (8 § USC 1641) or non-immigrant under the Federal Immigration and Nationality Act (8 USC 1101 et seq.) 18 years of age or older and lawfully present in the United States.*

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia.

Signature of Applicant: Date

_____ _____

Printed Name:

_____

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ____DAY OF _____, 20___

*_____

Alien Registration number for non-citizens.

Notary Public
My Commission Expires: