

REQUEST FOR QUOTATION

For

PURCHASE OF JUROR CHAIRS FOR SUPERIOR COURT QUOTE NUMBER: 20-0081-5

The Number Must Appear On All Quotations and Related Correspondence.

Quotation must be received <u>NO LATER THAN: 2:00PM OCTOBER 20, 2020</u> at the Purchasing and Contracting office. Quotes may be faxed, emailed, mailed or hand delivered.

Address Reply To: 1117 Eisenhower Drive, Suite C, Savannah, GA 31406

Fax to: (912) 790-1627

Email to: ajfleming@chathamcounty.org

| NAME OF BIDDER: | | |
|------------------------|---------------|--|
| STREET ADDRESS: | | |
| CITY, STATE, ZIP CODE: | | |
| PHONE: | FAX: | |
| EMAIL: | FED TAX ID #: | |

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. Shipping charges must be included in the quote. Any exceptions must be clearly marked. The below information is the basis of design for each product. If bidding an equal product from an alternative manufacturer, the bidder must list any and all differences and attach manufacturer specifications.

Delivery will be made to 133 Montgomery St, Savannah, GA 31401. Deliveries will be made through the front doors and with the elevators to the 2nd and 4th floor court rooms.

Existing chairs must be removed and Chatham County will be responsible for repairing the floor from the existing square model base to fit the new round model base.

Purchases will be made as courtrooms become available and all six (6) courtrooms will be done within six (6) months of award. Bidder will need to honor quoted prices for this time period.

Award will be made by courtroom. A courtroom consists of one (1) caster base chair and thirteen (13) bolted base chairs and fourteen (14) chairs removed.

| Item | Description | Qty | U/M | Manufacturer | Unit Price | Total Bid |
|------|-----------------------|-----|-----|--------------|------------|-----------|
| No. | _ | _ | | | | |
| | CAD1-HW11B Krug | 6 | Ea. | | | |
| 1. | Cadence High Back | | | | | |
| | with Urethane Arms | | | | | |
| | and Black Base | | | | | |
| | (castered base to | | | | | |
| | wheel out for | | | | | |
| | handicap jurer). | | | | | |
| | Grade 2 vinyl, luxe – | | | | | |
| | black or equal | | | | | |
| | | | | | | |
| | | | | | | |

| 2. | CAD1-HW11J Krug Cadence High Back with Urethane Arms and Black Jury Base. Grade 2 vinyl, luxe – black or equal | 78 | Ea. | | |
|----|---|----|-----|-------|----|
| 3. | Installation | 1 | Ea. | | |
| 4. | Removal and disposal of existing jury chairs | 84 | Ea. | | |
| | | | | TOTAL | \$ |

| Time frame for delivery | | |
|-------------------------|-------|-------------|
| | | |
| Please Print Name | _ | |
| Please Plint Ivanie | | |
| Authorization Signature | _ | |
| Date | | |

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. 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 bid opening. 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)" 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. This 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 under O.C.G.A. § 13-10-91(b)(1)

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 engaged in the physical performance of services on behalf of CHATHAM COUNTY has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

| Federal Work Authorization User Identification Number |
|---|
| Date of Authorization |
| Name of Contractor |
| Name of Project |
| Name of Public Employer |
| I hereby declare under penalty of perjury that the foregoing is true and correct. |
| Executed on,, 201 in(city),(state). |
| Signature of Authorized Officer or Agent |
| Printed Name and Title of Authorized Officer or Agent |
| SUBSCRIBED AND SWORN BEFORE ME ON THIS THE DAY OF,201 |
| NOTARY PUBLIC |
| My Commission Expires: |

SUBCONTRACTOR AFFIDAVIT under O.C.G.A. § 13-10-91(b)(3)

| 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, is authorized to use and uses the federal work |
| authorization program commonly known as E-Verify, or any subsequent replacement program, in |
| accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. |
| Furthermore, the undersigned subcontractor will continue to use the federal work authorization program |
| throughout the contract period and the undersigned subcontractor will contract for the physical |
| performance of services in satisfaction of such contract only with sub-subcontractors who present an |
| affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91 (b). Additionally, |
| the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor |
| to the contractor within five (5) business days of receipt. If the undersigned subcontractor receives |
| notice of receipt of an affidavit from any sub-subcontractor that has contracted with a sub-subcontractor |
| to forward, within five (5) business days of receipt, a copy of such notice to the contractor. |
| Subcontractor hereby attests that its federal work authorization user identification number and date of |
| authorization are as follows: |
| authorization are as follows. |
| |
| |
| Federal Work Authorization User Identification Number |
| |
| Date of Authorization |
| Name of Subcontractor |
| Traine of Subconductor |
| Name of Project |
| |
| Name of Public Employer |
| I hereby declare under penalty of perjury that the foregoing is true and correct. |
| |
| Executed on,(city),(state). |
| Signature of Authorized Officer or Agent |
| Signature of Additionized Officer of Agent |
| |
| Printed Name and Title of Authorized Officer or Agent |
| |
| SUBSCRIBED AND SWORN BEFORE ME |
| ON THIS THE DAY OF,201 |
| NOTARY PUBLIC |
| My Commission Expires: |
| My Commission Expires. |

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

| or Occupation Tax Certificate, Alcohol Lic reference in O.C.G.A. Section 50-36-1, I ar | n applicant for a Chatham County, Georgia Business License ense, Taxi Permit, Contract or other public benefit as m stating the following with respect to my bid for a Chatham [Name of natural person applying on partnership, or other private entity] |
|--|--|
| 1.) I am a citizen of | f the United States. |
| OR | |
| 2.) I am a legal perm | manent resident 18 years of age or older. |
| OR | |
| | se qualified alien (8 § USC 1641) or non-immigrant under the ationality Act (8 USC 1101 et seq.) 18 years of age or older United States.* |
| willfully makes a false, fictitious, or | under oath, I understand that any person who knowingly and r fraudulent statement or representation in an affidavit shall tion 16-10-20 of the Official Code of Georgia. Signature of Applicant: Date |
| | Printed Name: |
| SUBSCRIBED AND SWORN BEFORE ME ON THIS THEDAY OF, 20 | ** Alien Registration number for non-citizens. |
| Notary Public My Commission Expires: | |