

Purchasing & Contracting Department

November 1, 2011

Request for Proposals Media Services

RFP #11-0034-7

Dear Proposer:

Chatham County is accepting proposals and statements of qualifications for a company to provide multiple types of Media Service for Conservation and Recycling Campaigns. This proposal will result in an annual contract with four (4) automatic renewal options.

The scope of work includes but is not limited to following campaigns:

1) Resource Center Shredding & Recycle throughout April (Events) 5 Week March-April Campaign:

<u>Days</u> <u>Time</u>	<u>Spot Total</u>
M-F 6a-10a/Sat 7a-9a	25X/per campaign period
M-F 4p-7p	10X/per campaign period
M-F 6a-7p	30X/per campaign period
M-Su 8p-11p	10X/per campaign period

Water & Energy Conservation CampaignWeeks per month (8 Weeks Total) May-August:

M-F	M-F 6a-10a/Sat 7a-9a	32X/per campaign period
M-F	6a-7p	44X/per campaign period
M-F	8p-11p	16X/per campaign period

3) November Identity Safe Recycling Day 2 Week Campaign:

<u>i ime</u>	<u>Spot rotal</u>
6a-11a/Sat 7a-9a	12X/per campaign period
4p-7p	6X/per campaign period
6a-7p	16X/per campaign period
	6a-11a/Sat 7a-9a 4p-7p

4) Holiday Campaign 2 Weeks per month (4 Weeks Total) November-December:

Days	<u>Time</u>	Spot Total
M-F	M-F 6a-11a/Sat 7a-9a	12X/per campaign period
M-F	6a-7p	16X/per campaign period
M-F	8p-11p	8X/per campaign period

- 5) Broadcast company to provide monthly .com service. In addition to highlighting and promoting local green initiatives during the month of April and one week fixed position corner peel promoting Resource Center Shredding day/events and other educational events.
- 6) Elaborate on your company's additional media promoting services.

Proposals shall include your experience and qualifications to perform media services.

The broadcast company must possess the following skills and experience:

- 1) A least 10 years of professional media production experience.
- 2) Able to provide multiple creative views.
- 3) Must provide data on viewers based on Nielsen rating most recent book May to November. Provide cost per 1000 (CPM) of adults 18+ years.
- 4) Must have at least three (3) references of which services have previously or currently is being provided.

Proposals shall be evaluated on the following criteria:

- 1. Experience and qualifications of company
- 2. Schedule for completion of work.
- 3. Proposed fee, lump sum to include any and all costs submitted on the attached fee proposal form.
- 4. References

Proposal Format: Proposals shall be submitted in the following format and include the following information.

- a) Experience and Qualifications or Certifications of the proposer
- b) Fee Proposals signed by responsible party
- c) References
- d) Forms

Questions concerning this Request for Proposal should be directed to Robin Maurer at 912-790-1623.

Proposals shall be marked RFP#11-0034-7 Media Services. <u>Two (2) Copies</u> of your proposal is due in the Purchasing Department, 1117 Eisenhower Drive, Suite C, Savannah, Georgia 31406 prior to 2:00pm local time, November 17, 2011.

We would appreciate a response from your firm.

Sincerely,

Margaret H. Joyner Purchasing Agent

Margaret H Joy

FEE PROPOSALFORM RFP. NO. 11-0034-7 MEDIA SERVICE FOR CONSERVATION AND RECYCLYING CAMPAIGNS

I have read and understand the requirements of this proposal, RFP No. P11-0016-7, and agree to provide the required services in accordance with this proposal, and all other attachments, exhibits, etc. I agree to furnish the Services as describe in the RFP for the fee listed below. I understand that the County will not be responsible for the reimbursement of any costs not specifically set forth in this proposal. In addition, the County reserves the right to accept any part or all of the fee schedule and to negotiate any charges contained herein unless qualified otherwise.

PROPOSAL FEE: /Per Year		
FIRM NAME:		
PROPOSER:		
SIGNATURE:		
ADDRESS:		
CITY/STATE/ZIP:		
TELEPHONE:		
FAX NUMBER:	***************************************	
E-MAIL:		
BUSINESS TAX CERTIFICATE/LICENSE NUMBER:_		
CITY/COUNTY/STATE:		
MINORITY BUSINESS ENTERPRISE?	/YES	/NO
MINORITY CLASSIFICATION:		

Attachment A

DRUG FREE WORKPLACE CERTIFICATION

The undersigned certifies that the provisions of Code Sections 50-24-1 through 50-24-6 of the Official Code to Georgia Annotated, related to the Drug Free Workplace have been complied with in full.

1.	A drug-free workplace will be performance of the contract; a	e provided for the employees duri	ng the
2.	Each sub-contractor under the following written certification:	e direction of the Contractor shall sec	ure the
	t known as <u>MEDIA SERVICES</u>	(Contractor) certifies to Chatham for the employees during the performations of subsect (7), of subsect	ance of
3	unlawful manufacture, sale, d	certifies that he/she will not engage istribution, dispensation, possession, marijuana during the performance	or use
CONTRAC	TOR:	DATE:	-
NOTARY:		DATE:	<u>.</u>

Attachment B

PROMISE OF NON-DISCRIMINATION STATEMENT

Know All Mei	n By These Presents, that I (We)),		
	, (· · · · ·	Name	Title I	Name of Bidder
(herein after following Cha	"Company") in consideration atham	of the privilege	e to bid/	or propose on the
County proje as follows:	ct procurement (MEDIA SERVIC	<u>CES),</u> hereby c	onsent, c	ovenant and agree
1.	No person shall be excluded from otherwise discriminated against or gender in connection with the performance of the contract res	t on the basis one bid submitte	of race, c d to Chat	olor, national origin
2.	That it is and shall be the proportunity to all business printerested with the Company controlled by racial minorities, a	ersons seeking including the	g to cor	itract or otherwise
3.	In connection herewith, I (V Company has been made av affirmative action to provide m the maximum practicable oppoon this contract;	vare of, under inority and wo	stands a men own	nd agrees to take ed companies with
4.	That the promises of non-discribe continuing throughout the County;			
5.	That the promises of non-discribe and are hereby deemed to reference in the contract which	o be made a _l	part of a	nd incorporated by
6.	That the failure of this Comp promises of non-discrimination constitute a material breach of contract in default and to exerc limited to termination of the con-	on as made contract entitlin cise appropriate	and set ng the Co	forth above may ounty to declare the
Signa	ture	 Date		

Attachment C

DISCLOSURE OF RESPONSIBILITY STATEMENT

Failure to complete and return this information will result in your bid/offer/proposal being disqualified from further competition as non-responsive.

 List any convictions of any person, subsidiary, or affiliate of the company, arising out of obtaining, or attempting to obtain a public or private contract or subcontract, or in the performance of such contract or subcontract.
2. List any indictments or convictions of any person, subsidiary, or affiliate of this company for this company for offenses such as embezzlement, theft, fraudulent schemes, etc. or any other offenses indicating a lack of business integrity or business honesty which affects the responsibility of the contractor.
3. List any convictions or civil judgments under states or federal antitrust statutes.
4. List any violations of contract provisions such as knowingly (without good cause) to perform, or unsatisfactory performance, in accordance with the specifications of a contract.
5. List any prior suspensions or debarments by any governmental agency.
6. List any contracts not completed on time.
7. List any penalties imposed for time delays and/or quality of materials and workmanship.
8. List any documented violations of federal or any state labor laws, regulations, or standards, occupational safety and health rules.

	, as
Name of individual	, as Title & Authority
of	, declare under oath that
Company Name	
the above statements, incl	uding any supplemental responses attached hereto, are true.
Signature	
State of	
County of	<u> </u>
Subscribed and sworn to b	pefore me on this day of
20 by	representing him/herself to be
	of the company named herein.
Notary Public	
My Commission expires:	
- Constant Miles	
Resident State:	

DPC Form #45

Attachment D

CONTRACTOR AFFIDAVIT AND AGREEMENT

Employment Eligibility Verification

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 the City of Savannah 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 the City of Savannah, 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 City of Savannah at the time the subcontractor(s) is retained to perform such service.

EEV / Basic Pilot Program* User Identification	on Number
BY:	
Contractor Name	Date
Signature of Authorized Officer or Agent Agent	Printed Name of Authorized Officer or
Title of Authorized Officer or Agent of Contr	_ actor

*As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV I 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).

Attachment E

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

By executing this affidavit under oath Business License or Occupation Tax or other public benefit as reference i following with respect to my bid for a individual, business, corporation, pa	x Certificate, Alcohol License, Tax n O.C.G.A. Section 50-36-1, I am a Chatham County contract for IName of natural person an	xi Permit, Contract n stating the
individual, business, corporation, pa	rtnership, or other private entity]	
1.)I am a citi:	zen of the United States.	
OR	•	
2.) I am a lega	al permanent resident 18 years of	f age or older.
OR		
immigrant under the Federal li	nerwise qualified alien (8 § USC mmigration and Nationality Act (8 awfully present in the United State	USC 1101 et seq.)
In making the above representation uknowingly and willfully makes a false in an affidavit shall be guilty of a violate of Georgia.	, fictitious, or fraudulent statemer	nt or representation
oi Georgia.	Signature of Applicant:	Date
	Printed Name:	
SUBSCRIBED AND SWORN		
BEFORE ME ON THIS THE, 20	Alien Registration number fo	or non-citizens.
Notary Public My Commission Expires:		