



MEMORANDUM

TO: Prospective Bidders

FROM: William P. Gilliland, Purchasing Director

RE: Request for Bid - #050-15

DATE: October 21, 2015

Enclosed you will find the necessary information for preparing and submitting your bid for **Janitorial Supplies** for the City of Rome. This bid is for a period of one (1) year with the opportunity to renew the contract annually for up to two (2) additional years if there are no price increases and it is agreeable to both parties.

The deadline for submitting your bid is **November 19, 2015 at 3:00 p.m. Local time. All questions should be sent via e-mail to Johnna Allen, jallen@romea.us and Bill Gilliland, bgilliland@romea.us simultaneously. All questions and answers will be posted on the City of Rome website, www.romefloyd.com. It is the bidders responsibility to visit the site frequently to acquire any new information that mat be posted.**

If you have further questions, please do not hesitate to call my office at 706-236-4410.

William P. Gilliland
Purchasing Director

INSTRUCTIONS FOR BIDDERS

I. Bids must be received by **November 19, 2015 at 3:00 p.m.**

II. Bids must be delivered to:

City of Rome
601 Broad Street
P.O. Box 1433
Rome, Georgia 30162

III. Bids must be sealed and marked:

“050-15- Janitorial Supplies”

IV. Bids must be complete and include:

- A. Completed Bid Proposal Form
- B. Executed Affidavit of Non-Collusion
- C. Executed Certificate of Non-Discrimination
- D. Executed Bidder's Declaration
- E. Prompt Payment Affidavit
- F. Request for Taxpayer I.D. Number
- G. E-Verify
- H. Drug-Free Workplace Certificate

All bids submitted shall be subject to acceptance or rejection and the City of Rome specifically reserves the right to accept or reject any or all bids, to waive any technicalities and formalities in the bidding.

Bidder shall submit all required forms and information simultaneously with sealed bids, which forms and information become a part of the property of the City of Rome and will not be returned to bidders unless a written request to withdraw is received prior to **November 19, 2015 @ 3:00 p.m.**

V. Payment:

When contracts are awarded, payment by the City of Rome will be the normal 30-day cycle. However, the City does make every effort to honor all discounts.

REQUIREMENTS FOR BIDDERS

These items apply to and become a part of the terms and conditions of the bidders bid. Any exceptions must be in writing.

Notice is hereby given that the City of Rome will receive sealed bids from interested parties until **November 19, 2015 at 3:00 p.m.** at its offices located at 601 Broad Street, Rome, Georgia 30162-1433.

Any bids received thereafter will not be considered.

Bids will be publicly opened and read at the City of Rome Purchasing Department located at 601 Broad Street on the day and at the hour specified.

The purchaser may consider as non-responsive, any bid in which there is an alteration of, or departure from the bid form hereto attached.

The bid should be awarded to the lowest reliable bidder complying with the conditions of the invitation for bid. The bidder to whom award is made will be notified at the earliest possible date. The purchaser reserves the right to reject the bid of a bidder who has previously failed to perform properly or complete on time, contracts of a similar nature, or the bid of a bidder who, in the sole opinion and discretion of the purchaser is not in a position to perform the contract, or whose name appears on the United States Comptroller General's list of ineligible contractors.

Bids may be withdrawn by written request, provided such withdrawals are received prior to bid opening date.

NOTE: Unless stated on the bid form the bid submitted will assume all specifications will be met. Please note on the bid form all exceptions.

CITY OF ROME JANITORAL SUPPLIES BID

		UNIT	UNIT PRICE	COMMENTS
CLEANERS	WINDSHIELD SOLVENT W/ANTIFREEZE	CS	_____	6/GL/CS
	CLEANER DEGREASER 32 OZ	CS	_____	12/QT/CS
	SANITIZER BOWL DISINFECTANT CLEANER	CS	_____	12/QT/CS
	AJAX POWDER KITCHEN CLEANER	CS	_____	24/21OZ/CS
	WINDEX GLASS CLEANER W/SPRAYERS	CS	_____	12/QT/CS
	DAWN DISHWASH DETERGENT	CS	_____	8/38OZ/CS
	PINESOL LEMON FRESH CLEANER	CS	_____	3/144OZ/CS
	PINE OIL CLEANER	CS	_____	4/GL/CS
	FANTASTIK SPRAY CLEANER W/SPRAYERS	CS	_____	12/QT/CS
	TIDE LAUNDRY DETERGENT	CS	_____	2/144OZ
	LAUNDRY DETERGENT	DR	_____	15GL/DR
	PLEDGE FURNITURE POLISH	CS	_____	6/18OZ/CS
	BLEACH	CS	_____	6/GAL/CS
	SPRAY NINE CLEANER/DISINFECTANT	CS	_____	12/24OZ/CS
	SPRAY TUB & TILE HD SPRAY CLEANER	CS	_____	12/QT/CS
DISINFECTANT	CITRIS DISINFECTANT AIR FRESHENER SPRAY	CS	_____	12/15OZ/CS
	SANITIZER QUAT 10% SOLUTION	EA	_____	5GAL
	HOSPITAL DISINFECTANT SPRAY	CS	_____	12/20OZ/CS
	FOAM DISINFECTANT TUB & TILE CLEANER	CS	_____	12/20OZ/CS
DRAIN	LIQUID DRAIN OPENER	CS	_____	12/QT/CS
FLOOR	24" MEDIUM PUSH BROOM PLASTIC	EA	_____	
	36" MEDIUM FINE PUSH BROOM PLASTIC	EA	_____	
	60" WOOD HANDLE-METAL THREAD TIP	EA	_____	
	16" PALYMYRA STREET BROOM	EA	_____	
	LIGHT DUTY 5 STRING STRAW BROOM	EA	_____	
	WAREHOUSE HEAVY DUTY STRAW BROOM	EA	_____	
	16" BLACK FLOOR STRIPPING PADS	EA	_____	5/CS 1ST CHOICE
	17" BLACK FLOOR POLISHING PADS	EA	_____	5/CS 1ST CHOICE
	FLOOR STRIPPER NON-AMMONIATED	EA	_____	4-GAL CONT.
	FLOOR FINISH 18%	EA	_____	4-GAL CONT.
	RUBBERMAID HD DUST PANS	EA	_____	
	FLOOR SWEEP W/GRIT	EA	_____	300 LBS
	18" X 3" DUST MOP COVER	EA	_____	
	24" X 3" DUST MOP COVER	EA	_____	
	16" RAYON STICK MOP	EA	_____	
	CARPET SPOT REMOVER W/SPRAYER	CS.	_____	12/QT/CS
	18" X 3" DUST MOP FRAME	EA	_____	
	24" X 3" DUST MOP FRAME	EA	_____	
	48"X5" DUST MOP COVER	EA	_____	
	48" X 5" DUST MOP FRAME	EA	_____	
	DUST MOP SWIVEL LOCK HANDLE	EA	_____	
	24" RAYON MOPHEAD	EA	_____	
	32" RAYON MOPHEAD	EA	_____	
	DUST MOP TREATMENT	CS	_____	12/20OZ/CS
	63" SCREW CLAMP HANDLE	EA	_____	
	OIL DRY BAG	EA	_____	40 LBS

HAND CLEANERS	DIAL POWDERED SOAP	CS	10/5LB/CS
	GOJO HAND CLEANER	CS	12/18OZ/CS
	GOJO SOAP	CS	
	GOJO HAND CLEANER W/PUMICE 4.5LB	CS	6/4.5LB/CS
	PINK LIQUID HAND SOAP	CS	4/GL/CS
	PEARLIZED HAND SOAP	CS	4/GL/CS
	PURELL HAND SANITIZER	CS	24/4.5OZ/CS
INSECT-REPELLENT	WASP & HORNET SPRAY	CS	12/20OZ/CS
	DEEP WOODS OFF SPRAY	CS	12/6OZ/CS
LINERS	24 X 33 6MIC BLK CAN LINER 15 GAL (12.5LBS)	CS	20/50/CS
	30 x 36 BLK MEDIUM CAN LINER (8.8LBS)	CS	250/CS
	38 x 58 BLK 2.1MIL CAN LINER (26.4 LBS)	CS	100/CS
	40 x 46 CAN LINER 1.4MIL (17.2LBS)	CS	100/CS
	30 x 36.8 CAN LINER (11.6LBS)	CS	200/CS
LIGHT BULBS	48" FLUORESCENT/DAYLIGHT BULBS	CS	30/CS
	96" FLUORESCENT/DAYLIGHT BULBS	CS	15/CS
	75 WATT LIGHT BULBS	CS	24/CS
MISCELLANEOUS	8 OZ STYROFOAM CUPS	CS	M/CS
	16 OZ STYROFOAM CUPS	CS	M/CS
	23" OSTRICH FEATHER DUSTER	EA	
	TOILET BOWL PLUNGER	EA	
	DRUM PUMP/PLASTIC #428	EA	
	TERRI CLOTH RAGS (APPROX 150 PCS)	CS	25 LBS
	WHITE KNIT RAGS	CS	25 LBS
COTTON DURGICAL RAGS W/SEWN EDGES	CS	25 LBS	
ODOR CONTROL	MICROSORB ODOR CONTROL	CS	25 LBS
	GLADE AIR FRESHNER SPRAY	CS	12/20OZ/CS
	NATURAL LEMON DISENFECTANT	DR	55 GAL
	24 OZ WALL DEODORANT BLOCK	CS	6/CS
	4 OZ HANGING DEODORANT BLOCK	CS	144/CS
	4 OZ ROUND DEODORANT BLOCK	CS	144/CS
	URINAL SCREEN W/DEODORANT BLOCK	CS	12/CS
TISSUE TOWELS	ATLAS TOILET TISSUE 500 2PLY (28 LBS)	CS	96/500RL/CS
	HOUSEHOLD TOWELS 11X8.8 85 SH (13.6 LBS)	CS	30/CS
	BROWN ROLL TOWEL 8X350' (22.4 LBS)	CS	12/CS
	BROWN MULTIFOLD TOWEL	CS	4M/CS
	WHITE MULTIFOLD TOWEL	CS	4M/CS
	WHITE C-FOLD TOWEL	CS	4M/CS
	WHITE MULTIFOLD TOWEL PARK AVENUE	CS	16/150/CS

The Bidder should provide the manufacture/brand name of the product being proposed for consideration. The bid pricing should include the cost of delivery to designated City locations.

BID FORM

TO: City of Rome – Purchasing Department
P.O. Box 1433
601 Broad Street
Rome, Georgia 30162-1433
ATTN: WILLIAM P.GILLILAND

BID PKG. “050-15 – Janitorial Supplies ”

*** Per specification sheet

Expected Delivery Date: _____

All bids submitted shall be subject to acceptance or rejection and the City of Rome specifically reserves the right to accept or reject any or all bids, to waive any technicalities and formalities in the bidding.

The undersigned understands that any conditions stated above, clarifications made to the above or information other than that requested should be under separate cover and to be considered only at the discretion of the Purchasing Department.

Name of Individual, Partner
or Corporation

Company

Title

Address

Authorized Signature

City, State, Zip Code

Company phone number

BIDDERS DECLARATION

The bidder understands, agrees and warrants:

That the bidder has carefully read and fully understands the full scope of the specifications.

That the bidder has the capability to successfully undertake and complete the responsibilities and obligations in said specifications.

That the bidder has liability insurance and a declaration of insurance form is included in the bid package.

That this bid may be withdrawn by requesting such withdrawal in writing at any time prior to **November 19, 2015 at 3:00 p.m.** but may not be withdrawn after such date and time.

That the City of Rome reserves the right to reject any or all bids and to accept that bid which will, in its opinion, best serve the public interest. The City of Rome reserves the right to waive any technicalities and formalities in the bidding.

That by submission of this bid the bidder acknowledges that the City of Rome has the right to make any inquiry or investigation it deems appropriate to substantiate or supplement information supplied by the bidder.

If a partnership, a general partner must sign.

If a corporation, the authorized corporate officer(s) must sign and the corporate seal must be affixed to this bid.

BIDDER:

Name Title

Name Title

AFFIX CORPORATE SEAL (If Applicable)

CERTIFICATE OF NON-DISCRIMINATION

In connection with the performance of work under this contract, the bidder agrees as follows:

The bidder agrees not to discriminate against any employee or applicant for employment because of race, creed, color, sex, national origin, ancestry or disability. The vendor shall take affirmative action to insure that employees are treated without regard to their race, creed, color, sex, national origin, ancestry or disability. Such action shall include, but not be limited to the following: employment, upgrading, demotion, transfer, recruiting or recruitment, advertising, lay-off or termination, rates of pay or other compensation and selection for training, including apprenticeship.

In the event of the bidder's non-compliance with this non-discrimination clause, the contract may be canceled or terminated by the City of Rome. The bidders may be declared, by the City of Rome, ineligible for further contracts with the City of Rome until satisfactory proof of intent to comply shall be made by the vendor.

The bidder agrees to include this non-discrimination clause in any sub-contracts connected with the performance of this agreement.

BIDDER

SIGNATURE

TITLE

NON-COLLUSION AFFIDAVIT

The following affidavit is to accompany the bid:

STATE OF

COUNTY OF

Owner, Partner or Officer of Firm

Company Name, Address, City and State

Being of lawful age, being first duly sworn, on oath says that he/she is the agent authorized by the bidder to submit the attached bid. Affidavit further states as bidder, that they have not been a party to any collusion among bidders in restraint of competition by agreement to bid at a fixed price or to refrain from bidding; or with any office of the City of Rome or any of their employees as to quantity, quality or price in the prospective contract; or any discussion between bidders and any official of the City of Rome or any of their employees concerning exchange of money or other things of value for special consideration in submitting a sealed bid for:

FIRM NAME _____

SIGNATURE _____

TITLE _____

Subscribed and sworn to before me this ____ day of _____ 20____

NOTARY PUBLIC

CITY OF ROME

DRUG-FREE WORKPLACE CERTIFICATE

By signature on this certificate, the Bidder certifies that the provisions of O.C.G.A. Section 50-24-1 through 50-24-6 related to the "Drug-Free Workplace Act" will be complied with in full. The Bidder further certifies that:

1. A drug-free workplace will be provided for the Bidder's employees during the performance of the contract; and
2. Each contractor who hires a subcontractor to work in a drug-free workplace shall secure from that subcontractor the following written certification: "As part of the subcontracting agreement with (contractor's name), (subcontractor's name) certifies to the contractor that a drug-free workplace will be provided for the subcontractor's employees during the performance of this contract pursuant to O.C.G.A. Section 50-24-3(b)(7)."

By signature on this certificate, the Bidder further certifies that it will not engage in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

Bidder: _____

By: _____

Name _____ Printed: _____

Title: _____

Date: _____

CITY OF ROME, GEORGIA

E-VERIFY COMPLIANCE AFFADAVIT

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 the City of Rome, Georgia 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
(Not Required if Less than 10 Employees)

Signature (if less than 10 employees)

Date of Authorization

Name of Contractor/Company

Name of Project

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 20____ 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 _____, 20_____

NOTARY PUBLIC
My Commission Expires: