



**RHODE ISLAND
COLLEGE**

PURCHASING DEPARTMENT

600 Mt. Pleasant Avenue, Building #5
Providence, Rhode Island 02908
Phone: (401) 456-8047 Fax: (401) 456-8528

BID/PROPOSAL

BID/RFP NUMBER: **24060742**

BID/RFP TITLE: **SUSHI**

OPENING DATE & TIME: Wednesday June 7, 2023 at 2:30 PM (EST)

Questions concerning this solicitation may be emailed to mlepore@ric.edu and mcloudis@ric.edu no later than Tuesday May 30, 2023 at 12:00 PM. Please reference the BID/RFP# on all correspondence. Questions received, if any, will be posted at <https://purchasing.ri.gov/bidding/externalbidsearch.aspx> as an addendum to this solicitation. It is the responsibility of all interested parties to download the information.

FEIN: _____
VENDOR NAME: _____
ADDRESS: _____

TELEPHONE: _____
FAX: _____
EMAIL: _____
CONTACT PERSON: _____
TITLE: _____

NOTICE TO BIDDERS

Each bid proposal for a *public works project* must include a “public copy” to be available for public inspection upon the opening of bids. **Bid proposals that do not include a copy for public inspection will be deemed nonresponsive.** For further information on how to comply with this statutory requirement, see R.I. Gen. Laws §§ 37-2-18(b) and (j). Also see Procurement Regulations 5.11, and in addition, for highway and bridge projects, also see Procurement Regulations 5.13, accessible at www.ridop.ri.gov or click here: [About Us](#)



OWNERSHIP DISCLOSURE

Bidders must provide all relevant information. Bid proposals submitted without a complete response may be deemed nonresponsive.

If the Bidder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other owners that hold at least 10% of the record or beneficial equity interests of the Bidder; otherwise, complete ownership disclosure is required. List each officer, director, manager, stockholder, member, partner, or other owner or principle of the Bidder, and each intermediate parent company and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, principal occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each intermediate parent company and the ultimate parent company of the bidder.

CERTIFICATIONS

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No), and if "No," provide details below.

The Bidder certifies that:

___ 1. The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to this solicitation.

___ 2. The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements of any contract awarded pursuant to this solicitation and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in writing.

___ 3. The Bidder will maintain all required insurance during the term of any contract pursuant to this solicitation. In the event that any required insurance shall lapse or be canceled, the Bidder will immediately notify the State Purchasing Agent in writing.

___ 4. The Bidder understands that falsification of any information in this bid proposal or failure to notify the State Purchasing Agent of any changes in any disclosures or certifications in this Bidder Certification may be grounds for suspension, debarment, and/or prosecution for fraud.



___ 5. The Bidder has not paid and will not pay any bonus, commission, fee, gratuity, or other remuneration to any employee or official of the State of Rhode Island or any subdivision of the State of Rhode Island or other governmental authority for the purpose of obtaining an award of a contract pursuant to this solicitation. The Bidder further certifies that no bonus, commission, fee, gratuity, or other remuneration has been or will be received from any third party or paid to any third-party contingent on the award of a contract pursuant to this solicitation.

___ 6. This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement or collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion, conspiracy, or unlawful agreement any advantage against the State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in the bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the Bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.

___ 7. The Bidder: (i) is not identified on the General Treasurer’s list created pursuant to R.I. Gen. Laws § 37-2.5-3 as a person or entity engaging in investment activities in Iran described in § 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.

___ 8. The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.

Certification details (continue on additional sheet if necessary):



BIDDER

Submission by the Bidder of a bid proposal pursuant to this solicitation constitutes an offer to contract with the State of Rhode Island through the Division of Purchases on the terms and conditions contained in this solicitation and the bid proposal. The Bidder certifies that: (1) the Bidder has reviewed this solicitation and agrees to comply with its terms and conditions; (2) the bid proposal is based on this solicitation; and (3) the information submitted in the bid proposal (including this Bidder Certification Cover Form) is accurate and complete. The Bidder acknowledges that the terms and conditions of this solicitation and the bid proposal will be incorporated into any contract awarded to the Bidder pursuant to this solicitation and the bid proposal. The person signing below represents, under penalty of perjury, that he or she is fully informed regarding the preparation and contents of this bid proposal and has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

All bid submissions must be mailed or delivered in a sealed envelope by the time and date specified for the opening of responses. Bids misdirected to other locations or which are not present at the time of opening FOR WHATEVER CAUSE will be considered late and returned to the bidder unopened. For the purposes of this requirement, the official time and date shall be that of the date / time stamp in the reception area. If you are going to mail your bid submittal, please notify us via email at mlepore@ric.edu or mloudis@ric.edu so I can make sure the bid is here on time.

**Rhode Island College
Purchasing Department, Building 5
600 Mt. Pleasant Ave.
Providence, RI 02908
Attention: Marc Lepore & Mike Loudis**

Date

Name of Company Submitting Bid

Signature in ink

Printed Name and Title of Person Signing on Behalf of Bidder



Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____	<input type="checkbox"/> S Corporation
	<input type="checkbox"/> Other (see instructions) ▶ _____	<input type="checkbox"/> Partnership
	<input type="checkbox"/> Trust/estate	<input type="checkbox"/> Trust/estate
5 Address (number, street, and apt. or suite no.) See instructions.		Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number								
				-				

or
Employer identification number

		-						
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Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.



BID # 24060742

GROUP: SUSHI

EFFECTIVE FROM JULY 1, 2023 - JUNE 30, 2024

DELIVERY REQUIREMENTS

- All deliveries for the Donovan Dining Center are to be delivered to:
**RHODE ISLAND COLLEGE
DINING SERVICES
600 MT. PLEASANT AVE.
PROVIDENCE, RI 02908**
- Deliveries accepted Monday through Friday 7:00 AM – 11:00 AM and Saturday & Sunday 10:00 AM to 12:00 PM
- Deliveries are AS REQUESTED by the College's Dining Services
- Deliveries to inside of the building are required
- Delivery of all items must match the contract items and prices
- Rhode Island College reserves the right to request and receive perishable-type products seven (7) days per week in special circumstances
- All items are to be delivered at 40 degrees Fahrenheit or lower, and loaded into the DDC cooler.
- Each delivery must include the following at no additional cost to the College:
 - Ginger,
 - Wasabi,
 - Chop sticks, and
 - Low sodium soy sauce packets

ADDITIONAL REQUIREMENTS

- A single price shall be quoted for each item being requested within this bid document. This price will be the maximum amount in effect during the agreement period.
- Respondent shall provide in their bid response a complete list of ingredients and nutrition fact labels for all items on the price sheet.
- A bid submittal for single items and/or a smaller percentage of the total items listed, may, at the State's sole option, be rejected as being incomplete and non-responsive to the intent of this request.
- Products are to be made fresh daily with no additional additives or preservatives.
- Each package must include product expiration date, ingredients list and nutrition facts.

ORDERING

- Rhode Island College will submit individual orders for the various items and various quantities as may be required during the agreement period.
- Regardless of any agreement resulting from this bid, Rhode Island College reserves the right to solicit prices separately for any events not covered within this bid solicitation and to include delivery to specific destinations.
- Quantities listed herein are an estimate only. The agreement shall cover the actual quantities being ordered during the period of this agreement.



- Rhode Island College Dining Services reserves the right to determine which products and amounts will be purchased.
- The estimated total daily usage of ALL types of sushi combined will be 75-100 packages. Fridays 50 packages during the period from August 2023 to May 2024. Quantities prior to and after this period may be substantially lower.
- Bid price is Net F.O.B. Destination and shall include inside delivery at no extra cost to the College.

INVOICE PROCEDURES

- All packing slips must be signed by authorized personnel in our Donovan Dining Center receiving department
- If your packing slip does not serve as an invoice, all invoices must be sent to this address:

**RHODE ISLAND COLLEGE
DONOVAN DINING CENTER
600 MT. PLEASANT AVE.
PROVIDENCE, RI 02908
ATTN: DEBBIE GINOLFI or WALTER JASIONOWSKI**

- All invoices shall reference the bid number and purchase order number
- Invoices for items not received or for work not yet performed will not be accepted
- If a discount for prompt payment is available, please state those terms within your bid response.
- College Dining Services strives to provide timely payments and compliance with these procedures will assist in making that happen

NUTRITION FACTS LABEL

Rhode Island College, in accordance with the Federal Food, Drug, and Cosmetic Act § 403 (Q)(3) – (5), nutrition labeling as specified in 21 CFR 101 – Food Labeling and 9 CFR 317 Subpart B Nutrition Labeling.

Awarded vendors will be required to follow the standards based on manufacturer's nutritional data or nutrient fact labels.

- When food is in package form, the required nutrition labeling information shall appear on the label
- When food is not in package form, the required nutrition labeling information shall be displayed clearly at the point of purchase or available for customers to view in a binder
- Expiration dates will also be noted on the package

PROCUREMENT OF LOCALLY SOURCED PRODUCTS AND PRODUCT COMPONENTS

Consistent with R.I. Gen. Laws 37-2-8 (Rhode Island Food Stuffs), Rhode Island College acknowledges that some locally sourced ingredients are seasonal, however, requests that awarded vendors maximize local food purchases as well as product components that are locally sourced, in accordance with the terms herein, to achieve efficiency while also maximizing opportunity for local suppliers.

Successful vendor(s) will be requested to provide monthly reports stating the amount of locally, and regionally sourced ingredients provided to RIC for the duration of this contract agreement for applicable products.



RHODE ISLAND COLLEGE RESERVES THE RIGHT TO TERMINATE THIS AGREEMENT BASED ON DETERMINING FACTORS, SUCH AS UNSATISFACTORY PERFORMANCE, AS WELL AS DISCONTINUE THE PURCHASE OF GOODS AND/OR SERVICES OR TO REVISE THE SCOPE OF SERVICES BASED ON THE COLLEGE'S NEEDS.

THE FOLLOWING DATA MUST BE PROVIDED AS A CONDITION OF BID SUBMITTAL

Name of Sale Representative	Toll-Free Order Number	Additional Contact Information

If a prompt payment discount is available, please state terms here:

I certify that the prices listed here in this contract are accurate and I am authorized to quote these prices.

Date

Name of Company Submitting Bid

Signature in ink

Printed Name and Title of Person Signing on Behalf of Bidder



PRICE SHEET

ITEM	DESCRIPTION	DELIVERY	SHELF LIFE	NET WT	PIECES PER PACK	VENDOR PRICE
1.	CALIFORNIA ROLL	FRESH	1 DAY	7.5 oz	9 pcs	\$
2.	SPICY CALIFORNIA ROLL	FRESH	1 DAY	7.5 oz	9 pcs	\$
3.	VEGETABLE ROLL	FRESH	1 DAY	7.5 oz	9 pcs	\$
4.	CUCUMBER ROLL	FRESH	1 DAY	7.5 oz	9 pcs	\$
5.	SPICY SHRIMP ROLL	FRESH	1 DAY	7.5 oz	9 pcs	\$
6.	SPICY SALMON ROLL	FRESH	1 DAY	7.5 oz	9 pcs	\$
7.	BURMESE NOODLE SALAD	FRESH	3 DAYS	7.5 oz	EACH	\$
8.	SPICY TUNA ROLL	FRESH	1 DAY	7.5 oz	9 pcs	\$
9.	TEMPURA SHRIMP ROLL	FRESH	1 DAY	7.5 oz	8 pcs	\$
10.	SPICY TEMPURA SHRIMP ROLL	FRESH	1 DAY	7.5 oz	8 pcs	\$
11.	PORK & CHICKEN DUMPLING	FRESH	4 DAYS	5.0 oz	EACH	\$
12.	FRIED VEGETABLE SPRING ROLL	FRESH	4 DAYS	7.5 oz	EACH	\$