

Purchasing Office

INVITATION TO BID/RFP

PUBLIC BID NO. R0069037

COMMODITY: Hospital Furniture

BID PROPOSAL SUBMISSION DEADLINE: **Friday, August 25, 2023 at 12:00pm EST.** This is a sealed bid. Submit in a sealed envelope with the specific bid/RFP number along with the date and time of bid closing noted on the envelope.

MAIL OR DELIVER TO: Lisa Considine Fontes, Purchasing Office, Community College of Rhode Island, 400 East Ave, Warwick, RI 02886.

Note to Bidders: Questions concerning this solicitation may be emailed to the purchasing office at <u>purchasing@ccri.edu</u> no later than **Thursday, August 10, 2023 @ 9:00am** (EST). Please reference the bid number on all correspondence. Questions received if any, will be posted as an addendum to this solicitation. It is the responsibility of all interested parties to download the information.

PRE-BID CONFERENCE: N/A

| FEIN: | | |
|----------------------|--|------------------|
| | ed by the included three-page Bidder Certification Forn order to be considered responsive. | n. The form must |
| Print Name and Title | Telephone Number/E-Mail Address | |
| Signature | Date | _ |

Knight Campus • 400 East Avenue, Warwick, Rhode Island 02886-1807 • (401) 825-2196 • Fax: (401) 825-2328



Purchasing Office

BID/RFP Instructions

PUBLIC BID NO. R0069037

COMMODITY: Hospital Furniture

- a. Rules for submitting offers:
 - 1. Bid response must be submitted using Community College of Rhode Island (CCRI) Bid Form. Any other form submitted will be considered non-responsive and will be disqualified.
 - 2. Vendor name must appear on all pages.
 - 3. If bidding on any item, the entire bid must be returned.
 - 4. Submitting a Bid
 - Via mail: Each bid/offer must be submitted in a separate sealed envelope with the specific bid/RFP number, date and time of bid closing noted on the envelope. A complete, signed bid/offer package, including a completed three-page CCRI bidder certification form/contract offer and attachments if required (e.g., bid sureties, special licenses, samples, specifications that differ from solicitation) must be submitted as one package.

Mail to: Purchasing Office Community College of RI 400 East Ave Warwick, RI 02886

 Via email: A complete, signed bid/offer package, including a completed threepage CCRI bidder certification form/contract offer and attachments if required (e.g., bid sureties, special licenses, samples, specifications that differ from solicitation) must be submitted as one PDF document titled as the specific bid/RFP number. Attach said PDF file to the email with the subject line of the specific bid/RFP number and the date and time of bid closing.

Email to: purchasing@ccri.edu

- 5. Bids misdirected to other locations or which are not present at the CCRI Purchasing Office at the time of closing for whatever cause will be considered to be late and will not be opened. For the purpose of this requirement, the official time and date shall be that of the time clock in the Purchasing Office of CCRI. Postmarks shall not be considered proof of timely submission.
- 6. Failure to complete form as instructed may be grounds for disqualification.
- 7. Bid price is Net F.O.B. destination and shall include inside delivery at no extra cost.
- 8. Bidder must be an authorized dealer of the product offered.
- 9. Questions regarding bid procedure can be emailed to the Purchasing Office at <u>purchasing@ccri.edu</u>; CCRI bid number must appear on the subject line.
- b. Each bidder must be a manufacturer or stocking distributor/dealer at the time of the bid submittal and must maintain that status for the life of the contract or award. Bidder cannot be a broker.

NOTICE TO OFFERORS

This three-page Community College of Rhode Island (CCRI) Bidder Certification Form/Contract Offer **must** be attached to the front of the offer and shall be considered an integral part of each offer made by a vendor to enter into a contract with CCRI. As such, submittal of the entire Community College of Rhode Island Bidder Certification Form/Contract Offer, signed by a duly authorized representative of the offeror attesting to the accuracy of the information provided and the offer extended, is a mandatory part of any contract award. Offers received without the entire completed three-page form attached may result in offer disqualification.

Other Provisions and Procedures

To assure maximum access opportunities for users, public bid/RFP notices shall be posted on the Rhode Island Division of Purchases Website (<u>https://ridop.ri.gov/</u>) for a minimum of seven days and no amendments shall be made within the last five days before the date an offer is due.

Offers are irrevocable for sixty (60) days from the opening date (or such other extended period set forth in the solicitation), and may not be withdrawn, except with the express permission of the College Purchasing Agent. All pricing will be considered to be firm and fixed unless otherwise indicated. All offers must define delivery dates for all items; if no delivery date is specified, it is assumed that immediate delivery from stock will be made. After an award has been made, failure to meet all requirements of this invitation may result in a determination of default. Payments for partial delivery will not be made, except where expressly provided herein.

Unless specified "no substitute," product offerings equivalent in quality and performance will be considered (at the sole option of the College) on the condition that the offer is accompanied by detailed product specifications.

The College reserves the right to (a) make awards on the basis that best serves the interest of CCRI, individual items, total low, etc., and (b) reject any and all bids in whole or in part. Prices quoted are N30, FOB DESTINATION, less federal/state tax.

VENDOR AUTHORIZATION TO PROCEED. When a purchase order or change order is issued by the Community College of Rhode Island, no claim for payment for services rendered or goods delivered contrary to or in excess of the contract terms and scope shall be considered valid unless the vendor has obtained a written change order issued by the Community College of Rhode Island PRIOR TO delivery.

Any offer, whether in response to a solicitation for proposals or bids, or made without a solicitation, which is accepted in the form of a purchase order made in writing by the Purchasing Agent, or a state official with purchasing authority delegated by the Purchasing Agent, shall be considered a binding contract.

Where bid surety is required, bidder must furnish a bid bond or certified check for 5% of the bid total with the bid, or for such other amount as may be specified. Where indicated, successful bidder must furnish a 100% performance bond and labor and payment bond for contracts subject to Title 37 Chapters 12 and 13 of the Rhode Island General Laws. All bonds must be furnished by a surety company authorized to conduct business in the State of Rhode Island.

This solicitation and any contract or purchase order arising from it is issued in accordance with the specific requirements described herein, and the State's Purchasing Laws and Regulations and other applicable State Laws, including the <u>State of Rhode Island General</u> <u>Conditions of Purchase (220-RICR-30-00-13</u>. The regulations, General Terms and Conditions are incorporated into all Community College of Rhode Island contracts. The General Conditions of Purchase can be viewed at <u>https://rules.sos.ri.gov/regulations/part/220-30-00-13</u>.

Offerors are advised that all materials submitted to the College for consideration in response to this solicitation will be considered without exception to be Public Records pursuant to Title 38 Chapter 2 of the Rhode Island General Laws, and will be released for inspection upon written request once an award has been made. Bidders are encouraged to attend Public Bid Openings to obtain competitive pricing information. Bid tabulations may be reviewed after award(s) have been made at the Community College of Rhode Island Purchasing Office Mondays through Fridays between the hours of 9:00 a.m. and 3:30 p.m. – telephone requests for bid results will not be honored.

Provisions of State labor laws concerning payment of prevailing wage rates, issued by the R.I. Department of Labor and Training, shall apply for contracts involving public works construction, alteration, or building repair work.

In accordance with Title 7 Chapter 1.1-99 of the Rhode Island General Laws, foreign corporations (a corporation established other than in Rhode Island) must be qualified to transact business in this state.

State Equal Employment Opportunity Compliance certificate and agreement procedures will apply to all awards for supplies or services valued at \$10,000 and more. Minority Business Enterprise policies and procedures, including subcontracting opportunities as described in Title 37 Chapter 14.1 of the Rhode Island General Laws, also apply. For further information, contact the State MBE Administrator at (401) 574-8253 or kate.brody@doa.ri.gov, visit the website https://dedi.ri.gov/.

ALL CONTRACT AWARDS ARE SUBJECT TO THE FOLLOWING DISCLOSURES & CERTIFICATIONS

A person authorized to enter into contracts must sign the offer and attest to the accuracy of all statements. Incomplete certification forms are grounds for disgualification of offer.

DISCLOSURES

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

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-3, and if "Yes," provide details below. Complete Disclosure 4.

1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "Yes," provide details below.

2. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has had any contracts with a federal, state, or municipal governmental authority terminated for any reason within the previous 5 years. If "Yes," provide details below.

3. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been fined more than \$5000 for violation(s) of any Rhode Island environmental law(s) by the Rhode Island Department of Environmental Management within the previous 5 years. If "Yes," provide details below.

_____4. List each officer, director, manager, stockholder, member, partner, or other owner or principal 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.

Disclosure details (continue on additional sheet if necessary):

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 CCRI 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 CCRI 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 CCRI Purchasing Agent in writing.

4. The Bidder understands that falsification of any information in this bid proposal or failure to notify the CCRI 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):

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 all amendments 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 RIVIP 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.

BIDDER

Date:

Name of Bidder

Signature in ink

Printed name and title of person signing on behalf of Bidder

STATE OF RHODE ISLAND FORM W-9 PAYER'S REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION



THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A \$50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

Taxpayer Identification Number (T.I.N.)

Enter your taxpayer identification number in the appropriate box. For most individuals, this is your social security number. Social Security No. (SSN)

Employer ID No. (EIN)

NAME

ADDRESS

CITY, STATE AND ZIP CODE

PAYMENT REMITTANCE ADDRESS, IF DIFFERENT FROM THE ADDRESS ABOVE

ADDRESS

CITY, STATE AND ZIP CODE

CERTIFICATION: Under penalties of perjury, I certify that:

- (1) 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
- (2) I am not subject to backup withholding because either: (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.
- (3) I am a U.S. citizen or other U.S. person (as defined by the IRS).

<u>Certification Instructions</u> -- 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.

Please sign here and provide title, date and telephone number:

| SIGNATURE Original | Signature Required (Digita | TITLE Signature Not Acceptable) | DATE | TEL NO | |
|-----------------------|----------------------------|---|------------------|--------------------------------|--|
| BUSINESS DESIGNATION: | | | | | |
| Please Check One: | Individual | Corporation Trus | t/Estate 🗌 Gov | vernment/Nonprofit Corporation | |
| | Partnership | Medical Services Corporati | on 🗌 🛛 Leç | Legal Services Corporation | |
| | LLC Tax Classification: | Single Member (Individu | al) 🗌 🛛 Partners | ship Corporation | |

TIPS:

NAME: Be sure to enter your full and correct legal name as shown on your income tax return for the SSN or EIN provided. **ADDRESS. CITY. STATE AND ZIP CODE:** If you operate a business at more than one location, adhere to the following:

- 1) Same EIN with more than one location -- attach a list of location addresses with remittance address for each location and indicate to which location the year-end tax information return should be mailed.
- 2) Different EIN for each different location -- submit a completed W-9 form for each EIN and location. (One year-end tax information return will be reported for each EIN and remittance address.)

Mail Completed Form To: Supplier Coordinator Purchasing Department One Capitol Hill, 2nd Floor Providence RI 02908

| For Sta | ate Use Only: | | |
|---------|---------------|-----|------------|
| IRS | RI SOS | FED | Other |
| RI Sup | oplier # | | Approved |
| Date E | intered | | Entered By |

Cri

COMMUNITY COLLEGE

OF RHODE ISLAND

| Vendor Information | | |
|--------------------|--|--|
| Vendor Name: | | |
| Address: | | |
| Phone: | | |
| Fax: | | |
| Contact Person: | | |
| Email: | | |

| Line # | ltem | Item Specifications | UOM | Quantity | UnitPrice | Total | Lead Time |
|--------|--------------------------|--|----------|----------|-----------|-------|-----------|
| 1a | Hospital Bed | 2-4 Side Rail Bed, Multiple Positions Electric Bed; Total Length 84"-100" (254 cm); Max Width 40.75"; Minimum Height 7"; Max Height 32.5" (82.5cm); Max Patient Weight 500lbs; Head Section Inclination Max 65 degrees; Mattress Thickness 5.0- 6.5"; | Each | 5 | | | |
| 1b | Hopital Bed | 3 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 1c | Hopital Bed | 5 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 1d | Hopital Bed | 10 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 2a | Hospital Bedside Cabinet | 21" W x 18" D x 32" H (3 drawer cabinet or 1 drawer with cabinet door) | Each | 5 | | | |
| 2b | Hospital Bedside Cabinet | 3 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 2c | Hospital Bedside Cabinet | 5 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 2d | Hospital Bedside Cabinet | 10 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 3a | Hospital Overbed Table | Standard Size | Each | 5 | | | |
| 3b | Hospital Overbed Table | 3 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| Зс | Hospital Overbed Table | 5 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 3d | Hospital Overbed Table | 10 year warranty on mechanical repairs and parts | per unit | 5 | | | |
| 4 | Shipping/Delivery | Need to be delivered by October 30, 2023 to Community College of Rhode Island, Healthcare, 1762 Louisquisset Pike, Lincoln, RI 02865 | | | | | |
| 5a | Total | Units and shipping only | Each | 5 | | | |
| 5b | Total | Units with 3 year warranty on mechanical repairs and parts and shipping | per unit | 5 | | | |
| 5c | Total | Units with 5 year warranty on mechanical repairs and parts and shipping | per unit | 5 | | | |
| 5d | Total | Units with 10 year warranty on mechanical repairs and parts and shipping | per unit | 5 | | | |