

# **Purchasing Office**

# **BID/PROPOSAL**

| PUBLIC BID NO. <u>B0003495</u>   |
|--|
| COMMODITY: ANATOMICAL MODEL - SKELETONS  |
| DATE & TIME BID TO BE RECEIVED IN CCRI PURCHASING OFFICE:  APRIL 1, 2016 AT 10:30AM. THIS IS A SEALED BID. SUBMIT IN A SEALED ENVELOPE WITH THE SPECIFIC BID/RFP NUMBER, DATE & TIME OF BID CLOSING NOTED ON THE ENVELOPE. MAIL OR DELIVER TO PURCHASING OFFICE, COMMUNITY COLLEGE OF RI, 400 EAST AVE, WARWICK, RI 02886. |
| QUESTIONS MAY BE EMAILED TO THE PURCHASING OFFICE AT PURCHASING@CCRI.EDU.  |
| PRE-BID CONFERENCE: NO   |
| SURETY: NOT REQUIRED:  |
| PLEASE COMPLETE THE ATTACHED W-9 AND SUBMIT WITH THIS COVER SHEET AND ATTACHED BID.  |
| CCRI VENDOR ID:  |
| COMPANY NAME:  |
| STREET AND NUMBER:   |
| CITY, STATE & ZIP CODE:  |
| ORDERING E-MAIL ADDRESS:   |
| No offer will be considered that is not accompanied by the attached two-page Bidder Certification Form/Contract Offer completed and signed by the offeror.   |
| Print Name and Title Telephone Number/E-Mail Address   |
| Signature Date   |

### Community College of Rhode Island Bidder Certification Form/Contract Offer

#### NOTICE TO OFFERORS

This two-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 two-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 (<a href="www.purchasing.ri.gov">www.purchasing.ri.gov</a>) 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for sixty (60) days from the opening date (or such other extended period set forth in the solicitation), and may not be withdrawn, except with the express permission of the College Purchasing Agent.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>Board of Governors for Higher Education General Terms and Conditions of Purchase</u>. The regulations, General Terms and Conditions are incorporated into all Community College of Rhode Island contracts and can be viewed at <a href="https://www.ribghe.org/procurementregs113006.pdf">www.ribghe.org/procurementregs113006.pdf</a>.

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 charles.newton@doa.ri.gov, visit the website http://www.mbe.ri.gov/.

Page 1 of 2 Pag

### ALL CONTRACT AWARDS ARE SUBJECT TO THE FOLLOWING DISCLOSURES & CERTIFICATIONS

Offerors must respond to every disclosure statement. 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 disqualification of offer.

| Indicate | Yes (Y) or No (N):  |
|----------|---|
| 1        | Has your firm (or any principal) been subject to the following findings by the Federal Government, State of Rhode Island or any other jurisdiction? Suspension, Debarment, Indictment, Criminal Conviction. CIRCLE APPROPRIATE ITEM (S).  |
| 2        | Has your firm (or any principal) been fined more than \$5000 for a single violation by the Rhode Island Department of Environmental Management for violation of Rhode Island Wetlands law?  |
| 3        | I/we certify that I/we will immediately disclose, in writing, to the College Purchasing Agent any potential conflict of interest which may occur during the course of the engagement authorized pursuant to this contract.  |
| 4        | I/we acknowledge that, in accordance with (1) RIGL Section 37-2-54(C) "no purchase or contract shall be binding on the state or any agency thereof unless approved by the Department [of Administration] or made under general regulations which the Chief Purchasing Officer may prescribe," and (2) RIGL section 37-2-7(16) which identifies the Board of Governors for Higher Education as a public agency and gives binding contractual authority to the College Purchasing Agent.      |
| 5        | I/we certify that all of the vendor information provided is correct and complete.   |
| 6        | I/we certify that I or my firm possesses all licenses required by Federal and State law and regulation as they pertain to the requirements of the solicitation and offer made herein and shall maintain such required license(s) during the entire course of the contract resulting from the offer contained herein and, should my/our license lapse or be suspended, I/we shall immediately inform the Community College of Rhode Island Purchasing Agent in writing of such circumstance. |
| 7        | I/we certify that I/we will maintain required insurance during the entire course of the contract resulting from the offer contained herein and, should my/our insurance lapse or be suspended, I/we shall immediately inform the Community College of Rhode Island Purchasing Agent in writing of such circumstance.  |
| 8        | I/we certify that I/we understand that falsification of any information herein or failure to notify the Community College of Rhode Island Purchasing Agent as certified herein may be grounds for suspension, debarment and/or prosecution for perjury.   |
| 9        | I/we acknowledge that the provisions and procedures set forth in this form apply to any offer contained herein.   |
|          | HAVE ANSWERED "YES" TO QUESTIONS #1 or 2 OR IF YOU ARE UNABLE TO CERTIFY YES TO QUESTIONS OF THE FOREGOING, PROVIDE DETAILS/EXPLANATION BELOW AND/OR IN AN ATTACHED STATEMENT.  |
| _        | re below commits vendor to the attached offer and certifies (1) that the offer reflects all solicitation amendments (2) above statements and information are accurate (3) that vendor understands and has complied with the requirements herein   |
| Vendor'  |   |
| Signatur | e:Bid Number:Date:Date:   |
| (rerson  | authorized to enter into contracts; signature must be in mk) (II applicable)  |
| Print Na | me and Title of Company official signing offer  Telephone Number  |

FORM W-9 REV 8/15

### 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 Identifica  | tion Number (T.I.N.)  |   |   |   |   |                        |
|--|---|---|---|---|---|------------------------|
| the appropriate box.   | identification number in For most individuals,  | Social Security No. (SSN)   | Er  | mployer ID No.                          | (EIN)                                       |                        |
| this is your social se   | curity number.  |   |   |   |   |                        |
| NAME   |   |   |   | •                                       |   |                        |
| ADDRESS  |   |   |   |   |   |                        |
| CITY, STATE AND  | ZIP CODE  |   |   |   |   |                        |
| PAYMENT REMITT   | ANCE ADDRESS, IF DI   | FFERENT FROM THE ADDRE  | SS ABOVE                                      |   |   | -                      |
| ADDRESS  |   |   |   |   |   |                        |
| CITY, STATE AND  | ZIP CODE  |   |   |   |   |                        |
|  |   |   |   |   |   |                        |
|  |   |   |   |   |   |                        |
| the Internal Revor (C) the IRS h (3) I am a U.S. citiz  Certification Instrubackup withholding l does not apply. | venue Service (IRS) that las notified me that I am it en or other U.S. person octions You must cros | s out item (2) above if you ha<br>to report all interest and divide   | Iding as a resund hholding.  Ve been notified | ult of a failure to<br>ed by the IRS th | report all interest or d                    | ividends,<br>ubject to |
| _  | ia provide ilile, date and  | •   |   |   |   |                        |
| SIGNATUREOriginal  | l Signature Required (Digital   | TITLEI Signature Not Acceptable)  | DA  | \TE                                     | TEL NO                                      |                        |
| BUSINESS DESIGN  | IATION:   |   |   |   |   |                        |
| Please Check One:  | Individual  | Corporation Trust/E   | state $\square$                               | Government/N                            | Ionprofit Corporation                       |                        |
|  | Partnership   | Medical Services Corporation  |   | Legal Services                          | Corporation                                 |                        |
|  | LLC Tax Classification:   | Single Member (Individual)  | ☐ Par   | tnership 🗌                              | Corporation                                 |                        |
| ADDRESS, CITY, S  1) Same EIN with which location tl 2) Different EIN for  | TATE AND ZIP CODE: If more than one location ne year-end tax information                            | legal name as shown on your i<br>f you operate a business at mo<br>- attach a list of location addres<br>on return should be mailed.<br>- submit a completed W-9 form | re than one loo<br>sses with remit            | cation, adhere to<br>ttance address f   | o the following:<br>or each location and in | dicate to              |
| Mail Completed Fo<br>Supplier Coordinat<br>Purchasing Depart<br>One Capitol Hill, 2r                             | oorted for each EIN and r<br>rm To:<br>or<br>ment   |   | For State                                     | Use Only:                               | ne year-end tax informa                     |                        |

Date Entered \_\_

Entered By\_

Or Email To: doa.pursuppliercoordinator@purchasing.ri.gov

## **Community College of Rhode Island** 400 East Ave Warwick RI 02886

| Date.           | 03/22/16                           |
|-----------------|------------------------------------|
| Vendor<br>Info: | Name: Address:                     |
|                 | Phone: Fax: Contact Person: Email: |

**Ship To:** 

Community College of RI 1762 Louisquisset Pike - LC Lincoln RI 02865-4585

#### CONDITIONS OF OFFER:

- 1. In accordance with Chapter 37-2-54(3) of the Rhode Island General Laws "No purchase or contract shall be binding on the State or any agency thereof unless approved by the Department of Administration or made under general regulations which the Chief Purchasing Officer may prescribe" including change orders and other type of contracts.
- "Any alleged oral agreement or arrangements made by a bidder or contractor with any agency or an employee of the Office of Purchases may be disregarded and shall not be binding on the State".
- 2. I/we certify that I or my firm possesses all licenses and certification required by Federal and State Law and regulation as they pertain to the requirements of this solicitation.
- 3. I/we certify that I/we will maintain required insurance during the entire course of the contract resulting from this solicitation.
- 4. Offers must be signed and dated by a person authorized to enter into contracts on behalf of vendor. Signature commits vendor to the terms and prices specified on this contract for a period of 30 calendar days from the bid opening date.

**Requisition:** R0046290

| tem Quantity UOM  | Description                       | Unit Price | Total |
|-------------------|-----------------------------------|------------|-------|
|                   |                                   |            |       |
| CLOSING DATE & TI | ME: APRIL 1, 2016 AT 10:30AM      |            |       |
| RULES FOR SUBMITT | ING OFFERS:                       |            |       |
| *********         | *****IMPORTANT***********         |            |       |
| BID RESPONSE MUST | BE SUBMITTED USING CCRI BID       |            |       |
| FORM. ANY OTHER   | FORM SUBMITTED WILL BE CONSIDERED |            |       |
| NON-RESPONSIVE AN | D WILL BE DISQUALIFIED.           |            |       |
| •                 |                                   |            |       |
| VENDOR NAME MUST  | APPEAR ON ALL PAGES.              |            |       |
| TE BIDDING ON ANY | ITEM, THE ENTIRE BID MUST BE      |            |       |
| RETURNED.         | TIBM, THE ENTIRE BID MOOT BE      |            |       |
|                   |                                   |            |       |
| A COMPLETE, SIGNE | D BID/OFFER PACKAGE, INCLUDING A  |            |       |
| COMPLETED THREE-E | AGE COMMUNITY COLLEGE OF RI       |            |       |
|                   | 'ION FORM/CONTRACT OFFER MUST BE  |            |       |
|                   | E SPECIFIC BID/RFP NUMBER, DATE,  |            |       |
| AND TIME OF BID ( | LOSING NOTED ON THE ENVELOPE.     |            |       |
| MAIL TO:          |                                   |            |       |
|                   |                                   |            |       |

NOTE TO VENDOR: The College is a tax-exempt public educational institution.

THIS IS A SOLICITATION FOR BID NOT A PURCHASE ORDER. DO NOT SHIP ANY PRODUCT BASED ON THIS DOCUMENT.

Date

## Community College of Rhode Island 400 East Ave Warwick RI 02886

Vendor Info:

Name:
Address:

Phone:
Fax:
Contact Person:

**Ship To:** Community College of RI

Email:

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| Item | Quantity UOM        | Description   | Unit Price | Total |
|------|---------------------|---|------------|-------|
|      |                     |   |            |       |
| 1    | (Cont               | inued)  |            |       |
|      | PURCHASING OFFICE   |   |            |       |
|      | COMMUNITY COLLEGE O | FRI   |            |       |
|      | 400 EAST AVENUE     |   |            |       |
|      | WARWICK, RI 02886   |   |            |       |
|      | ******              | *******   |            |       |
|      |                     |   |            |       |
|      |                     | OTHER LOCATIONS OR WHICH                                |            |       |
|      |                     | THE COMMUNITY COLLEGE OF                                |            |       |
|      |                     | SING OFFICE AT THE TIME OF                              |            |       |
|      |                     | R CAUSE WILL BE CONSIDERED  NOT BE OPENED. FOR THE PUR- |            |       |
|      |                     | EMENT, THE OFFICIAL TIME AND                            |            |       |
|      | ~                   | OF THE TIME CLOCK IN THE                                |            |       |
|      | -                   | F COMMUNITY COLLEGE OF RI.                              |            |       |
|      |                     | BE CONSIDERED PROOF                                     |            |       |
|      | OF TIMELY SUBMISSIO |   |            |       |
|      |                     | ···   |            |       |
|      | FAILURE TO COMPLETE | FORM AS INSTRUCTED MAY BE                               |            |       |
|      | GROUNDS FOR "DISQUA |   |            |       |
|      |                     |   |            |       |
|      |                     |   |            |       |
|      |                     |   |            |       |

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Vendor Info:

Name:
Address:

Phone:
Fax:
Contact Person:

**Ship To:** Community College of RI

Email:

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Requisition: R0046290

| Item | Quantity UOM        | Description   | Unit Price | Total |
|------|---------------------|---|------------|-------|
|      |                     |   |            |       |
| 1    | (Cont               | inued)  |            |       |
| _    | ,                   | BE SUBMITTED IN A SEPARATE                            |            |       |
|      | SEALED ENVELOPE. I  | F ATTACHMENTS ARE REQUIRED,                           |            |       |
|      | BE SURE THEY ARE IN | CLUDED IN THE PACKAGE.                                |            |       |
|      | , ,                 | , SPECIAL LICENSES, SAMPLES,                          |            |       |
|      | SPEIFICATIONS THAT  | DIFFER FROM SOLICITATION).                            |            |       |
|      |                     |   |            |       |
|      |                     | O.B DESTINATION AND SHALL                             |            |       |
|      | INCLUDE INSIDE DELI | VERY AT NO EXTRA COST.                                |            |       |
|      | BIDDING:            |   |            |       |
|      |                     | SHALL BE OUOTED FOR EACH                              |            |       |
|      | ITEM AGAINST WHICH  | A PROPOSAL IS SUBMITTED.                              |            |       |
|      | THIS PRICE WILL BE  | THE MAXIMUM IN EFFECT DURING                          |            |       |
|      | THE AGREEMENT PERIC | D. ANY PRICE DECLINE AT THE                           |            |       |
|      |                     | L SHALL BE REFLECTED IN A                             |            |       |
|      | REDUCTION OF THE AG | REEMENT PRICE TO THE COLLEGE                          |            |       |
|      | (b) OHANDERTED TE   | ANY, ARE ESTIMATED ONLY. THE                          |            |       |
|      | ~                   | ANY, ARE ESTIMATED ONLY. THE ER THE ACTUAL QUANTITIES |            |       |
|      |                     | PERIOD. DELIVERIES WILL                               |            |       |
|      | ORDERED DORATIO THE | THE PHILVENIES WITH                                   |            |       |
|      |                     |   |            |       |

NOTE TO VENDOR: The College is a tax-exempt public educational institution.

THIS IS A SOLICITATION FOR BID
NOT A PURCHASE ORDER.
DO NOT SHIP ANY PRODUCT
BASED ON THIS DOCUMENT.

Vendor Signature

Date

## Community College of Rhode Island 400 East Ave Warwick RI 02886

Vendor Info:

Name:
Address:

Phone:
Fax:
Contact Person:
Email:

**Ship To:** Community College of RI

1762 Louisquisset Pike - LC Lincoln RI 02865-4585

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Requisition: R0046290

| Item | Quantity UOM          | Description                                | Unit Price | Total |
|------|-----------------------|--|------------|-------|
|      |                       |  |            |       |
| 1    | (Cont                 | inued)                                     |            |       |
|      | BE BILLED AT THE SI   | NGLE, FIRM, AWARDED UNIT                   |            |       |
|      | PRICE QUOTED REGARD   | LESS OF THE QUANTITIES                     |            |       |
|      | ORDERED               |  |            |       |
|      |                       |  |            |       |
|      | ` '                   | T F.O.B. DESTINATION AND MUST              |            |       |
|      | INCLUDE ALL APPLICA   | BLE FREIGHT CHARGES.                       |            |       |
|      | · (4) DIDG EOD GINGLE | THEMS AND ON A SMALL                       |            |       |
|      | , ,                   | ITEMS AND/OR A SMALL ITEMS LISTED, MAY, AT |            |       |
|      |                       | OPTION, BE REJECTED AS BEING               |            |       |
|      |                       | HE INTENT OF THIS REQUEST                  |            |       |
|      |                       |  |            |       |
|      | ORDERING:             |  |            |       |
|      | (a) THE COLLEGE WIL   | L SUBMIT INDIVIDUAL ORDERS                 |            |       |
|      | FOR THE VARIOUS ITE   | MS AND VARIOUS QUANTITIES                  |            |       |
|      | AS MAY BE REQUIRED    | DURING THE AGREEMENT PERIOD                |            |       |
|      |                       |  |            |       |
|      | ()                    | ARDLESS OF ANY AGREEMENT                   |            |       |
|      |                       | BID, THE COLLEGE RESERVES THE              |            |       |
|      | RIGHT TO SOLICIT PR   | ICES SEPARATELY FOR ANY EXTRA              |            |       |
|      |                       |  |            |       |
|      |                       |  |            |       |

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BASED ON THIS DOCUMENT.

endor Signature Date

## Community College of Rhode Island 400 East Ave Warwick RI 02886

| Date:           | 03/22/16                    |
|-----------------|-----------------------------|
| Vendor<br>Info: | Name: Address:              |
|                 | Phone: Fax: Contact Person: |

CONDITIONS OF OFFER:

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Requisition: R0046290

**Ship To:** Community College of RI

1762 Louisquisset Pike - LC Lincoln RI 02865-4585

| Item | Quantity UOM   | Description   | Unit Price | Total |
|------|--|---|------------|-------|
| 1    | ,  | inued)<br>FOR DELIVERY TO SPECIFIC  |            |       |
|      | VENDORS MUST INCLUDE PROPOSAL. FAILURE BID PROPOSAL MAY RE | UMBERS ARE SUBSTITUTED, E SPECIFICATIONS WITH BID TO SUBMIT SPECIFICATIONS WITH SULT IN DISQUALIFICATION OF LOGS MUST BE CLEARLY MARKED AND |            |       |
| 1    | Advan<br>Replica, featuring                                | alvanium, detachable arms, legs,  | \$         | \$    |
| 2    | Advan  | e Rod Mounted - Somso<br>ced Skeleton<br>a removable skull, detachable  | \$         | \$    |

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BASED ON THIS DOCUMENT.

| Vendor Signature | Date |
|------------------|------|

## Community College of Rhode Island 400 East Ave Warwick RI 02886

| Date.           | 03/22/10                           |
|-----------------|------------------------------------|
| Vendor<br>Info: | Name: Address:                     |
|                 | Phone: Fax: Contact Person: Email: |

**Ship To:** Community College of RI

Doto:

1762 Louisquisset Pike - LC Lincoln RI 02865-4585

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| Item | Quantity UOM                                     | Description  | Unit Price | Total |
|------|--|--|------------|-------|
| 2    | (Continued) arms, legs and feet. Size 67" Height |  |            |       |
| 3    | Skele  | a removable skull, detachable  | \$         | \$    |
| 4    | Skele<br>Replica, featuring                      | Rod Mounted - Somso Advanced<br>ton<br>a removable skull, detachable<br>t. Size 67" Height | \$         | \$    |

NOTE TO VENDOR: The College is a tax-exempt public educational institution.

THIS IS A SOLICITATION FOR BID NOT A PURCHASE ORDER. DO NOT SHIP ANY PRODUCT BASED ON THIS DOCUMENT.

| Vendor Signature | Date |
|------------------|------|