

ORIGINAL



PROJECT NO.: IFB140155

OPEN DATE: February 27, 2014

AND TIME: 2:30 P.M.

PRE-BID DATE: February 14, 2014

AND TIME: 10:00 A.M.

LOCATION: LEE COUNTY PROCUREMENT
1825 HENDRY ST., 3RD FLOOR
FORT MYERS, FL 33901

REQUEST FOR INFORMAL BID

TITLE: PORTABLE TOILET RENTAL AND SERVICING

REQUESTER: LEE COUNTY BOARD OF COUNTY COMMISSIONERS
DIVISION OF PROCUREMENT MANAGEMENT

ADDRESS

1825 Hendry St 3rd Floor
FORT MYERS, FL 33901

PROCUREMENT CONTACT:

NAME: Patrick T. Lewis Sr.
TITLE: Procurement Analyst
PHONE NO.: (239) 533-5453
EMAIL: Plewis@leegov.com

LEE COUNTY, FLORIDA
PROPOSAL QUOTE FORM
FOR
PORTABLE TOILET RENTAL AND SERVICING

DATE SUBMITTED: FEBRUARY 14 2014

VENDOR NAME: SUNCOAST PORTABLE SANITATION, INC

TO: The Board of County Commissioners
Lee County
Fort Myers, Florida

Having carefully examined the "General Conditions", and the "Detailed Specifications", all of which are contained herein, the Undersigned proposes to furnish the following which meet these specifications:

NOTE REQUIREMENT: IT IS THE SOLE RESPONSIBILITY OF THE VENDOR TO CHECK LEE COUNTY PROCUREMENT MANAGEMENT WEB SITE FOR ANY PROJECT ADDENDA ISSUED FOR THIS PROJECT. THE COUNTY WILL POST ADDENDA TO THIS WEB PAGE, BUT WILL NOT NOTIFY.

The undersigned acknowledges receipt of Addenda numbers: _____

REQUIRED UNITS

STANDARD UNIT:

\$ 69.00 PER DAY *

\$ 69.00 PER WEEK *

\$ 69.00 PER MONTH

HANDICAP UNIT:

\$ 102.00 PER DAY

\$ 102.00 PER WEEK

\$ 102.00 PER MONTH

HANDWASHING STATION:

\$ 102.00 PER DAY

\$ 102.00 PER WEEK

\$ 102.00 PER MONTH

* PLEASE NOTE OUR PER DAY & PER WEEK RATES
ASSUME THE UNIT WILL ONLY BE REQUIRED FOR
ONE DAY OR ONE WEEK

OPTION A - UPGRADED UNITS

NON-HANDICAP UNIT:

\$ 80.00 PER DAY

\$ 80.00 PER WEEK

\$ 80.00 PER MONTH

HANDICAP UNIT:

\$ 102.00 PER DAY

\$ 102.00 PER WEEK

\$ 102.00 PER MONTH

NOTE: PLEASE SPECIFY THE MINIMUM ORDER QUANTITY
(IF ANY) YOUR FIRM REQUIRES FOR DELIVERY: ONE

TO BE STARTED WITHIN ONE CALENDAR DAYS AFTER RECEIPT OF
AWARD AND PURCHASE ORDER.

Is your firm interested in being considered for the Local Vendor Preference?
YES NO

If yes, then read the paragraph entitled "Local Vendor Preference" included in these specifications. Also complete the Local Vendor Preference Questionnaire and return with your bid.

WILL YOU DELIVER WITH YOUR OWN VEHICLE AS OPPOSED TO COMMON
CARRIER?
YES NO

Bidders should carefully read all the terms and conditions of the specifications. Any representation of deviation or modification to the quote may be grounds to reject the quote.

Are there any modifications to the quote or specifications?
YES NO

Failure to clearly identify any modifications in the space below or on a separate page may be grounds for the quoter being declared nonresponsive or to have the award of the quote rescinded by the County.

MODIFICATIONS:

Bidder shall submit his/her bid on the County's Proposal Quote Form, including the firm name and authorized signature. Any blank spaces on the Proposal Quote Form, qualifying notes or exceptions, counter offers, lack of required submittals, or signatures, on County's Form may result in the Bidder/Bid being declared non-responsive by the County.

ANTI-COLLUSION STATEMENT

THE BELOW SIGNED BIDDER HAS NOT DIVULGED TO, DISCUSSED OR COMPARED HIS BID WITH OTHER BIDDERS AND HAS NOT COLLUDED WITH ANY OTHER BIDDER OR PARTIES TO A BID WHATSOEVER. NOTE; NO PREMIUMS, REBATES OR GRATUITIES TO ANY EMPLOYEE OR AGENT ARE PERMITTED EITHER WITH, PRIOR TO, OR AFTER ANY DELIVERY OF MATERIALS. ANY SUCH VIOLATION WILL RESULT IN THE CANCELLATION AND/OR RETURN OF MATERIALS (AS APPLICABLE).

FIRM NAME: SUNCOAST PORTABLE SANITATION, INC.

BY (Printed): PETER REID

BY (Signature): 

TITLE: SALES MANAGER

FEDERAL ID # OR S.S. # 204186602

ADDRESS: 1661 BENCHMARK AVE.

FORT MYERS FL 33905

PHONE NO.: 239 337 7709

FAX NO.: 239 337 0287

CELLULAR PHONE/PAGER NO.: 239 243 6292

DUNS#: N/A

LEE COUNTY LOCAL BUSINESS TAX ACCOUNT NUMBER:

~~BUS 2009-00707~~ 8100400 (RZ)

E-MAIL ADDRESS: bram.bock@adco-usa.com

DISADVANTAGED BUSINESS ENTERPRISE (DBE): N/A

DESCRIPTION OF OPERATIONS -

Suncoast Portable Sanitation, Inc.
1661 Benchmark Avenue
Fort Myers, FL 33905-

Lee County Board of County Commissioners
P.O. Box 398
Fort Myers, FL 33902-

Subject to policy terms, conditions, forms, and exclusions, the insurance coverages afforded by the policies above include the following when required by written contract for the certificate holder and/or entities listed below: Blanket Additional Insured in regards to General Liability for ongoing and completed operations and Automobile Liability; Blanket Primary and Non-Contributory in regards to General Liability; Blanket Waiver of Subrogation in regards to General Liability, Automobile Liability, Workers Compensation. Per Project Aggregate applies to the General Liability when required by written contract.

Entity: Lee County.

INFORMAL BID NO.: IFB140155

Have you provided goods or services to Lee County on a regular basis for the preceding, consecutive three years?

Yes

No

If yes, please provide your contractual history with Lee County for the past three, consecutive years. Attach additional pages if necessary.

LEE CTY. ORDER # 14331567

ATTACHMENT A
LOCAL VENDOR PREFERENCE QUESTIONNAIRE
(LEE COUNTY ORDINANCE NO. 08-26)

Instructions: Please complete either Part A or B whichever is applicable to your firm

PART A: VENDOR'S PRINCIPAL PLACE OF BUSINESS IS LOCATED WITHIN LEE/COLLIER COUNTY (Only complete Part A if your principal place of business is located within the boundaries of Lee/Collier County)

1. What is the physical location of your principal place of business that is located within the boundaries of Lee/Collier County, Florida?

1661 BENCHMARK AVE. NEAR MLK
FORT MYERS FL 33905

2. What is the size of this facility (i.e. sales area size, warehouse, storage yard, etc.)

OFFICE & REPAIR FACILITY 4000 sq ft
YARD 3 ACRES

PART B: VENDOR'S PRINCIPAL PLACE OF BUSINESS IS NOT LOCATED WITHIN LEE/COLLIER COUNTY OR DOES NOT HAVE A PHYSICAL LOCATION WITHIN LEE/COLLIER COUNTY (Please complete this section.)

1. How many employees are available to service this contract? _____

2. Describe the types, amount and location of equipment you have available to service this contract.

LOCAL VENDOR PREFERENCE QUESTIONNAIRE CONTINUED

3. Describe the types, amount and location of material stock that you have available to service this contract.

TWO THOUSAND PORTABLE TOILETS

AFFIDAVIT CERTIFICATION
IMMIGRATION LAWS

#FB

SOLICITATION NO.: 140155 PROJECT NAME: PORTABLE TOILET RENTAL & SERVICING

LEE COUNTY WILL NOT INTENTIONALLY AWARD COUNTY CONTRACTS TO ANY CONTRACTOR WHO KNOWINGLY EMPLOYS UNAUTHORIZED ALIEN WORKERS, CONSTITUTING A VIOLATION OF THE EMPLOYMENT PROVISIONS CONTAINED IN 8 U.S.C. SECTION 1324 a(e) (SECTION 274A(e) OF THE IMMIGRATION AND NATIONALITY ACT ("INA").

LEE COUNTY MAY CONSIDER THE EMPLOYMENT BY ANY CONTRACTOR OF UNAUTHORIZED ALIENS A VIOLATION OF SECTION 274A(e) OF THE INA. SUCH VIOLATION BY THE RECIPIENT OF THE EMPLOYMENT PROVISIONS CONTAINED IN SECTION 274A(e) OF THE INA SHALL BE GROUNDS FOR UNILATERAL CANCELLATION OF THE CONTRACT BY LEE COUNTY.

BIDDER ATTESTS THAT THEY ARE FULLY COMPLIANT WITH ALL APPLICABLE IMMIGRATION LAWS (SPECIFICALLY TO THE 1986 IMMIGRATION ACT AND SUBSEQUENT AMENDMENTS).

Company Name: SUNCOAST PORTABLE SANITATION, INC.
[Signature] Title Date 2-12-2014
GENERAL MANAGER

STATE OF Florida
COUNTY OF Lee

The foregoing instrument was signed and acknowledged before me this 12th day of February 2014, by Brian Beck who has produced (Print or Type Name) _____ as identification. (Type of Identification and Number)

Jennifer K. Engel
Notary Public Signature
Jennifer K. Engel
Printed Name of Notary Public



EE878519 / 2-26-2017
Notary Commission Number/Expiration

The signee of this Affidavit guarantec, as evidenced by the sworn affidavit required herein, the truth and accuracy of this affidavit to interrogatories hereinafter made. **LEE COUNTY RESERVES THE RIGHT TO REQUEST SUPPORTING DOCUMENTATION, AS EVIDENCE OF SERVICES PROVIDED, AT ANY TIME.**