**DEPARTMENTAL INPUT**

**CONTRACT/PROJECT MEASURE ANALYSIS AND RECOMMENDATION**

- X New
- OTR
- Sole Source
- Bid Waiver
- Emergency
- Previous Contract/Project No.: 5840-4/12-4
- Re-Bid
- Other

**Requisition No./Project No.: RQID1300013**

- TERM OF CONTRACT 10 YEAR(S) WITH NAYEAR(S) OTR

**Description:** This Request to Qualify will establish a pool of Vendors capable of providing polymeric flocculants to Miami Dade County Water and Sewer Department on an as needed basis.

**Issuing Department:** ISD/PMS  
**Contact Person:** Herman Ramsey  
**Phone:** (305) 375-2851  
**Estimate Cost:** $13,680,000  
**Funding Source:** Proprietary

**ANALYSIS**

<table>
<thead>
<tr>
<th>Commodity Codes:</th>
<th>885-70</th>
<th>885-83</th>
</tr>
</thead>
</table>

**Contract/Project History of previous purchases three (3) years**

Check here X if this is a new contract/purchase with no previous history.

<table>
<thead>
<tr>
<th>Contractor:</th>
<th>EXISTING</th>
<th>2ND YEAR</th>
<th>3RD YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small Business Enterprise:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contract Value:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**RECOMMENDATIONS**

<table>
<thead>
<tr>
<th>SBE</th>
<th>Set-aside</th>
<th>Sub-contractor goal</th>
<th>Bid preference</th>
<th>Selection factor</th>
</tr>
</thead>
</table>

**Basis of recommendation:**

Signed: Herman Ramsey  
Date sent to DBD: 04/08/2013

**Date returned to DPM:**
MIAMI-DADE COUNTY, FLORIDA

REQUEST TO QUALIFY

TITLE:

POLYMERIC FLOCCULANTS, RTQ

FOR INFORMATION CONTACT:
Herman Ramsey, hramsey@miamidade.gov

IMPORTANT NOTICE TO BIDDERS:
• READ THIS ENTIRE DOCUMENT AND HANDLE ALL QUESTIONS IN ACCORDANCE WITH SECTION 1, PARAGRAPH 1.2(D).

• FAILURE TO COMPLETE THE CERTIFICATION REGARDING LOCAL PREFERENCE ON BID SUBMITTAL FORM IN SECTION 4 SHALL RENDER THE VENDOR INELIGIBLE FOR LOCAL PREFERENCE

• FAILURE TO SIGN BID SUBMITTAL FORM IN SECTION 4 WILL RENDER YOUR BID NON-RESPONSIVE
MIAMI-DADE COUNTY, FLORIDA

REQUEST TO QUALIFY

Bid Number:

Bid Title: Polymeric Flocculants, RTQ

Procurement Officer: Herman Ramsey

Bids will be accepted until 2:00 p.m. on , 2013

Bids will be publicly opened. The County provides equal access and does not discriminate on the basis of disability in its programs or services. It is our policy to make all communication available to the public, including those who may be visually or hearing impaired. If you require information in a non-traditional format please call 305-375-5278.

Instructions: The Clerk of the Board business hours are 8:00am to 4:30pm, Monday through Friday. Additionally, the Clerk of the Board is closed on holidays observed by the County. Each Bid submitted to the Clerk of the Board shall have the following information clearly marked on the face of the envelope: the Bidders name, return address, Bid number, opening date of the Bid and the title of the Bid. Included in the envelope shall be an original and two copies of the Bid Submittal, plus attachments if applicable.

All Bids received time and date stamped by the Clerk of the Board prior to the bid submittal deadline shall be accepted as timely submitted. The circumstances surrounding all bids received and time stamped by the Clerk of the Board after the bid submittal deadline will be evaluated by the procuring department, in consultation with the County Attorney’s Office, to determine whether the bid will be accepted as timely.

NOTICE TO ALL BIDDERS:

• FAILURE TO SIGN THE BID SUBMITTAL FORM WILL RENDER YOUR BID NON-RESPONSIVE.

• THE BID SUBMITTAL FORM CONTAINS IMPORTANT CERTIFICATIONS THAT REQUIRE REVIEW AND COMPLETION BY ANY BIDDER RESPONDING TO THIS SOLICITATION.
All general terms and conditions of Miami-Dade County Procurement Contracts for Invitations to Bid are posted online. Persons and Companies that receive an award from Miami-Dade County through Miami-Dade County's competitive procurement process must anticipate the inclusion of these requirements in the resultant Contract. These standard general terms and conditions are considered non-negotiable subject to the County’s final approval.

All applicable terms and conditions pertaining to this solicitation and resultant contract may be viewed online at the Miami-Dade County Procurement Management website by clicking on the below link:

2.1 **PURPOSE**

This Request to Qualify (RTQ) will establish a pool of Vendors capable of providing polymeric flocculants. Entry into the Pre-Qualification Pool is not a contract between Miami-Dade County and any Vendor, but an acknowledgement that included Vendors meet the qualifications as outline throughout this RTQ. Pre-qualified Vendor will be invited to participate in future competitions on an as needed basis. The pool shall be open for Submitters to qualify at any time after the initial RTQ opening date.

2.2 **TERM**

The pre-qualification pool will begin on the first calendar day of the month succeeding approval by the Board of County Commissioners, or designee, unless otherwise stipulated in the Notice of Award Letter which is distributed by the County’s Internal Services Department, Procurement Management Services Division, and contingent upon the completion and submittal of all required bid documents. The Pre-Qualification Pool shall expire on the last day of the last month of the 10 year period.

2.3 **QUALIFICATION CRITERIA**

Submitters who meet the following minimum qualifications will be placed on a list for participation in future competitions.

**Bidders Certifications:** In order to be considered submitters shall provide the following information:

a) Submitters shall be the product manufacturer and/or authorized distributor of the product manufacturer.

*If the Submitters are the product manufacturer it must be indicated on letterhead.*

*If the Submitters are the authorized distributor:*

1. Provide a current letter (within the 12 months from bid submission) from the manufacturer, stating that the submitter is an authorized distributor. This letter must be signed and presented on the manufacturer’s letterhead with the contact person name and phone number.

Third party submitter (reseller or toll blender) will not be considered qualified.

b) Submitters shall provide a Material Safety Data Sheet supplied by manufacturer.

c) Submitters shall provide a Certification of Analysis by the manufacturer of the material in accordance with O-A-445B.

Submitters shall provide all of the specified information and documents listed above with their submittal form as proof of compliance to the requirement of this RTQ. However, the County may, at its sole discretion and in its best interest, allow Submitters to complete, supplement or supply the required documents.

The County at its sole discretion may request additional information in order to assess the submitters’ responsibility. Failure to supply these documentations may result in the submitter not being added to the pre-qualified pool.
It shall be the sole prerogative of the County as to the number of Submitters who will be included under this RTQ. During the term of this RTQ, the County reserves the right to add or delete Submitters as it deems necessary and in its best interest.

2.4 **EQUAL PRODUCT**

The specific items listed in this RTQ are the only products that will be accepted under this RTQ. These items have been pre-approved and authorized by the County as documented on a Qualified Products List.

This RTQ contains the current Qualified Products List that identifies the specific products that are qualified for purchase under this specific RTQ. "Equal" products may not be considered. The Qualified Products List is contained in the technical specification (Section 3) of this RTQ.

A **TESTING / NONCONFORMANCE OF PRODUCTS**

During the term of the RTQ, samples of delivered items may be randomly selected and tested for compliance / performance. If it is found that the delivered commodities do not conform to the specifications, the County will notify the submitter of nonconformance within 10 calendar days. The County then requires replacement of the item within 48 hours after notification.

Should the submitter fails to delivered polymeric flocculants product within the time frame specified, may result in the submitter being deemed in breach of contract. The County may terminate the submitter for default and charge the firm re-procurement charges, if applicable.

2.5 **SHIPPING TERMS: F.O.B. DESTINATION**

All submitters shall quote prices based on F.O.B. Destination (freight shall be included in the proposed price, Section 1, Paragraph 1.18) and shall hold title to the goods until such time as they are delivered to, and accepted by, an authorized County representative at the wastewater treatment plant. Submitters are responsible for filing, processing, and collecting all damage claims against the shipper.

2.6 **DELIVERY**

Submitter(s) shall make deliveries as defined in the request for quote. Deliveries will be accepted Monday through Friday between the hours of 8:00 AM and 2:00 PM.

**DELIVERY LOCATION:**
South District Wastewater Treatment Plant (Blackpoint)
8950 SW 232nd Street
Miami, Florida 33170

Should the submitter(s) to whom the contract(s) is awarded fail to deliver in the number stated in the request for quote, the County reserves the right to cancel the contract on a default basis after any back order period that has been specified in this RTQ has lapsed. If the contract is so terminated, it is hereby understood and agreed that the County has the authority to purchase the goods elsewhere and to charge the incumbent submitter with any re-procurement costs. If the submitter fails to honor these re-procurement costs, the County may terminate the contract for default.
A PACKING SLIP / DELIVERY TICKET

Submitter(s) shall enclose a complete packing slip / delivery ticket with any items to be delivered in conjunction with this RTQ. The packing slip / delivery ticket shall be available to the County's authorized representative during delivery. The packing slip / delivery ticket shall include, at a minimum, the following information: purchase order number; date of order; a complete listing of items being delivered; and back-order quantities and estimated delivery of back-orders if applicable.

2.7 CONTACT PERSONS

For any additional information regarding the terms and conditions of this RTQ, contact Herman Ramsey, at email – hramsey@miamidade.gov

2.8 COMPLIANCE / REGULATIONS

A FEDERAL STANDARDS

All items to be purchased under this RTQ shall be in accordance with all governmental standards, to include, but not be limited to, those issued by the Occupational Safety and Health Administration (OSHA), the National Institute of Occupational Safety Hazards (NIOSH), and the National Fire Protection Association (NFPA).

B POLLUTION CONTROL

It is the intent of these specifications to comply with the Miami-Dade County Pollution Control Ordinance as stated in Chapter 24 of the Miami-Dade Code. This ordinance is made a part of these specifications by reference and may be obtained, if necessary, by the submitter through the Department of Regulatory and Economic Recourses (RER), 701 NW 1st Court, Suite 400, Miami, Florida 33136, Telephone (305) 372-6789.

2.9 INSURANCE REQUIREMENTS IN SECTION 1, PARAGRAPH 1.21 OF THE TERMS AND CONDITIONS IS NOT APPLICABLE

2.10 STOCK LEVELS

Submitters shall ensure that adequate stock levels of polymeric flocculants are maintained at its place of business in order to assure the County of prompt delivery. If the delivery terms specified in the request for quotes are not fulfilled by the Submitter, the County reserves the right to cancel the order, purchase the goods elsewhere, and charge the Submitter for any re-procurement costs incurred by the County.
3.1 **SCOPE**

This Request to Qualify (RTQ) is intended to qualify vendors for future delivery of two polymers (dewatering and gravity thickening) as described below. The County uses these two polymers in the wastewater treatment process.

3.2 **SPECIFICATIONS**

**A  DIGESTED SLUDGE DEWATERING**

The Polymeric Flocculant for Digested Sludge Dewatering shall be one of the following qualified materials.

Products prequalified under this RTQ were qualified under the following requirements:

a) Sludge Feed Rate 160-200 gpm per centrifuge, minimum two machines

b) Capture Rate 95% minimum

c) Centrifuged Sludge 16% minimum cake solids.

<table>
<thead>
<tr>
<th>Supplier (a)</th>
<th>Material (b)</th>
<th>Est. Annual Usage (c)</th>
<th>Dosage lbs./tons (c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Polydye</td>
<td>SE-1311</td>
<td>580,000 lbs.</td>
<td>34.8</td>
</tr>
<tr>
<td>Polydye</td>
<td>SE-1312</td>
<td>470,000 lbs.</td>
<td>28.6</td>
</tr>
</tbody>
</table>

**B  GRAVITY THICKENER**

The Polymeric Flocculant for Gravity Thickening shall be one of the following qualified materials.

Products prequalified under this RTQ were qualified under the following requirements:

a) Underflow solids must average at least 4%

b) Capture Rate 95% minimum per grab sample set

<table>
<thead>
<tr>
<th>Supplier (a)</th>
<th>Material (b)</th>
<th>Est. Annual Usage (c)</th>
<th>Dosage lbs./tons (c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASF</td>
<td>Zetag 7650</td>
<td>140,000 lbs.</td>
<td>4.8</td>
</tr>
</tbody>
</table>

**C  ADDITIONAL POLYMERS MAY BE ADDED DURING THE CONTRACT**

Although this RTQ states specific polymers to be purchased by the County, it is understood and agreed that the County reserves the right to allow performance trials of additional polymers by firms to meet performance criteria and be considered "qualified" as a gravity thickening or dewatering polymer. Upon being qualified, the respective polymers will be included in the quote for qualified polymers. Please note that the County will bear the cost of the Examination Trial Proctor, but the firm shall supply the necessary polymer for the qualifying trial. All samples for test purposes must be labeled with the Submitter's name, current RTQ number, and item number. Samples not properly labeled as described will be considered unidentifiable and will not be eligible for testing purposes.
Submit Bid To:
CLERK OF THE BOARD
Stephen P. Clark Center
111 NW 1st Street
17th Floor, Suite 202
Miami, Florida 33128-1983

PLEASE QUOTE PRICES F.O.B. DESTINATION, FREIGHT ALLOWED, LESS TAXES, DELIVERED IN MIAMI-DADE COUNTY, FLORIDA.

NOTE: Miami-Dade County is exempt from all taxes (Federal, State, Local). Bid price should be less all taxes. Tax Exemption Certificate furnished upon request.

Issued by: hl
ISD/PMS Date Issued: 03/11/2013
This Bid Submittal Consists of
Pages 5 through 9+Affidavits

Sealed bids subject to the Terms and Conditions of this Invitation to Bid and the accompanying Bid Submittal. Such other contract provisions, specifications, drawings or other data as are attached or incorporated by reference in the Bid Submittal, will be received at the office of the Clerk of the Board at the address shown above until the above stated time and date, and at that time, publicly opened for furnishing the supplies or services described in the accompanying Bid Submittal Requirement.

Title:
POLYMERIC FLOCCULANTS FOR THE SOUTH DISTRICT WASTEWATER TREATMENT PLANT

A Bid Deposit in the amount of NA of the total amount of the bid shall accompany all bids.

A Performance Bond in the amount of NA of the total amount of the bid will be required upon execution of the contract by the successful bidder and Miami-Dade County.

DO NOT WRITE IN THIS SPACE

ACCEPTED _______ HIGHER THAN LOW _______
NON-RESPONSIVE _______ NON-RESPONSIBLE ______
DATE B.C.C. ____________ NO BID ______
ITEM NOS. ACCEPTED ____________________________

COMMODITY CODE: 885-70, 885-83
Procurement Contracting Officer Herman Ramsey

RETURN ONE ORIGINAL AND TWO COPIES OF BID SUBMITTAL PAGES AND AFFIDAVITS.

FAILURE TO SIGN THE BID SUBMITTAL FORM IN SECTION 4 WILL RENDER YOUR BID NON-RESPONSIVE.
The space provided below shall be filled in with the requested information. Failure to provide this information with the offer may result in the bidder offer being deemed non-responsible.

<table>
<thead>
<tr>
<th>QUALIFYING CRITERIA</th>
<th>PRODUCT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authorization Letter</td>
<td>Polymeric Flocculants</td>
</tr>
<tr>
<td>Material Safety Data Sheets</td>
<td></td>
</tr>
<tr>
<td>Certification of Analysis</td>
<td></td>
</tr>
</tbody>
</table>

**BIDDERS GENERAL INFORMATION**

Provide name of office staff that is capable of meeting the County's needs from 8:00 AM to 5:00 PM EST, Monday through Friday.

- Contact Person:                   
- Company Name:                     
- Office: Address:                  
- City/State/Zip Code:              
- Telephone No.:                    
- Fax No.:                          
- Emergency Telephone No.:          
- E-Mail Address:                   

This information is the vendor responsibility to keep current. Any changed information should be sent to the appropriate Officer in a signed written form i.e. e-mail or a firm's letterhead.
ACKNOWLEDGEMENT OF ADDENDA

INSTRUCTIONS: COMPLETE PART I OR PART II, WHICHEVER APPLIES

PART I:

LIST BELOW ARE THE DATES OF ISSUE FOR EACH ADDENDUM RECEIVED IN CONNECTION WITH THIS BID

Addendum #1, Dated ______________________
Addendum #2, Dated ______________________
Addendum #3, Dated ______________________
Addendum #4, Dated ______________________
Addendum #5, Dated ______________________
Addendum #6, Dated ______________________
Addendum #7, Dated ______________________
Addendum #8, Dated ______________________

PART II:

☐ NO ADDENDUM WAS RECEIVED IN CONNECTION WITH THIS BID

________________________________________
FIRM NAME:

________________________________________
AUTHORIZED SIGNATURE: DATE:

________________________________________
TITLE OF OFFICER:
Bid Title: Polymeric Flocculants, RTQ

By signing this Bid Submittal Form the Bidder certifies that it satisfies all legal requirements (as an entity) to do business with the County, including all Conflict of Interest and Code of Ethics provisions in Section 2-11 of the Miami-Dade County Code. Any County employee or member of his or her immediate family seeking to contract with the County shall seek a conflict of interest opinion from the Miami-Dade County Ethics Commission prior to submittal of a Bid response or application of any type to contract with the County by the employee or his or her immediate family and file a copy of that request for opinion and any opinion or waiver from the Board of County Commissioners with the Clerk of the Board. The affected employee shall file with the Clerk of the Board a statement in a form satisfactory to the Clerk disclosing the employee's interest or the interest of his or her immediate family in the proposed contract and the nature of the intended contract at the same time as or before submitting a Bid, response, or application of any type to contract with the County. Also a copy of the request for a conflict of interest opinion from the Ethics Commission and any corresponding opinion, or any waiver issued by the Board of County Commissioners, must be submitted with the response to the solicitation.

In accordance with Sec. 2-11.1(s) of the County Code as amended, prior to conducting any lobbying regarding this solicitation, the Bidder must file the appropriate form with the Clerk of the Board stating that a particular lobbyist is authorized to represent the Bidder. Failure to file the appropriate form in relation to each solicitation may be considered as evidence that the Bidder is not a responsible contractor.

The Bidder confirms that this Bid is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a Bid for the same goods and/or services and in all respects is without collusion, and that the Bidder will accept any resultant award. Further, the undersigned acknowledges that award of a contract is contingent upon vendor registration. Failure to register as a vendor within the specified time may result in your firm not being considered for award.

Pursuant to Miami-Dade County Ordinance 94-34, any individual, corporation, partnership, joint venture or other legal entity having an officer, director, or executive who has been convicted of a felony during the past ten (10) years shall disclose this information at the time of bid or proposal submission.

☐ Place a check mark here only if bidder has such conviction to disclose.

By executing this proposal through a duly authorized representative, the proposer certifies that the proposer is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, as those terms are used and defined in sections 287.135 and 215.473 of the Florida Statutes. In the event that the proposer is unable to provide such certification but still seeks to be considered for award of this solicitation, the proposer shall execute the proposal through a duly authorized representative and shall also initial this space: __________. In such event, the proposer shall furnish together with its proposal a duly executed written explanation of the facts supporting any exception to the requirement for certification that it claims under Section 287.135 of the Florida Statutes. The proposer agrees to cooperate fully with the County in any investigation undertaken by the County to determine whether the claimed exception would be applicable. The County shall have the right to terminate any contract resulting from this solicitation for default if the proposer is found to have submitted a false certification or to have been placed on the Scrutinized Companies for Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.

LOCAL PREFERENCE CERTIFICATION: For the purpose of this certification, a “local business” is a business located within the limits of Miami-Dade County (or Broward County in accordance with the Interlocal Agreement between the two counties) that conforms with the provisions of Section 1.10 of the General Terms and Conditions of this solicitation and contributes to the economic development of the community in a verifiable and measurable way. This may include, but not be limited to, the retention and expansion of employment opportunities and the support and increase to the County’s tax base.

☐ Place a check mark here only if affirming bidder meets requirements for Local Preference. Failure to complete this certification at this time (by checking the box above) may render the vendor ineligible for Local Preference.

LOCAL-HEADQUARTERED BUSINESS CERTIFICATION: For the purpose of this certification, a “locally-headquartered business” is a Local Business whose “principal place of business” is in Miami-Dade County, as defined in Section 1.10 of the General Terms and Conditions of this solicitation.

☐ Place a check mark here only if affirming bidder meets requirements for the Locally-Headquartered Preference (LHP). Failure to complete this certification at this time (by checking the box above) may render the vendor ineligible for the LHP. The address of the locally-headquartered office is ______________________________.
LOCAL CERTIFIED SERVICE-DISABLED VETERAN BUSINESS ENTERPRISE CERTIFICATION: A Local Certified Service-Disabled Veteran Business Enterprise is a firm that is (a) a local business pursuant to Section 2-8.5 of the Code of Miami-Dade County and (b) prior to bid submission is certified by the State of Florida Department of Management Services as a service-disabled veteran business enterprise pursuant to Section 295.187 of the Florida Statutes.

☐ Place a check mark here only if affirming bidder is a Local Certified Service-Disabled Veteran Business Enterprise. A copy of the certification must be submitted with this proposal.

COUNTY USER ACCESS PROGRAM (UAP): Joint purchase and entity revenue sharing program
For the County’s information, the bidder is requested to indicate, at ‘A’ and ‘B’ below, its general interest in participating in the Joint Purchase Program of the County User Access Program (UAP) described in Section 2.21 of this contract solicitation, if that section is present in this solicitation document. Bidder participation in the Joint Purchase portion of the UAP is voluntary, and the bidder’s expression of general interest at ‘A’ and ‘B’ below is for the County’s information only and shall not be binding on the bidder.

A. If awarded this County contract, would you be interest in participating in the Joint Purchase portion of the UAP with respect to other governmental, quasi-governmental or not-for-profit entities located within the geographical boundaries of Miami-Dade County?

Yes ____________  No ____________

B. If awarded this County contract, would you be interested in participating in the Joint Purchase portion of the UAP with respect to other governmental, quasi-governmental or not-for-profit entities located outside the geographical boundaries of Miami-Dade County?

Yes ____________  No ____________

Firm Name:__________________________________________________________

Street Address:____________________________________________________

Mailing Address (if different):________________________________________

Telephone No.: __________________________ Fax No.: __________________

Email Address:____________________________________________________

FEIN No. __/__/__/__/__/__/__/__/_

Prompt Payment Terms: _____% _____ days net _____ days (Please see paragraph 1.2 H of General Terms and Conditions)

Signature: _________________________________________________________ (Signature of authorized agent)

"By signing this document the bidder agrees to all Terms and Conditions of this Solicitation and the resulting Contract."

Print Name:________________________________________________________ Title: ______________________________

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF PROPOSER TO BE BOUND BY THE TERMS OF ITS PROPOSAL. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED ABOVE BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE PROPOSAL NON-RESPONSIVE. THE COUNTY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY PROPOSAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BOUNDS THE PROPOSER TO THE TERMS OF ITS OFFER.
In accordance with Ordinance 07-143 amending Section 2-8.1 of the Code of Miami-Dade County, effective June 1, 2008, vendors are required to complete a new Vendor Registration Package, including a Uniform Affidavit Packet (Vendor Affidavits Form), before being awarded a new contract. The undersigned affirms that the Vendor Affidavits Form submitted with the Vendor Registration Package is current, complete and accurate for each affidavit listed below.

<table>
<thead>
<tr>
<th>Contract No. :</th>
<th>Identification Number (FEIN):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Affidavits and Legislation/ Governing Body**

| 1. Miami-Dade County Ownership Disclosure  | 6. Miami-Dade County Vendor Obligation to County |
| Sec. 2-8.1 of the County Code              | Section 2-8.1 of the County Code                |
| County Ordinance No. 90-133, amending Section 2-8.1(d)(2) of the County Code | Article 1, Section 2-8.1(b) and 2-11(b)(1) of the County Code through (6) and (9) of the County Code and County Ordinance No 60-1 amending Section 2-11.1(c) of the County Code |
| Section 2-8.1.2(b) of the County Code      | Article V of Chapter 11 of the County Code      |
| Article 1, Section 2-8.1.5 Resolution R182-00 amending R-385-93 | Section 2-8.9 of the County Code               |
| 5. Miami-Dade County Debarment Disclosure   | 10. Miami-Dade County Domestic Leave and Reporting |
| Section 10.38 of the County Code            | Article 8, Section 11A-60 11A-67 of the County Code |

---

Printed Name of Affiant: 
Printed Title of Affiant: 
Signature of Affiant: 
Name of Firm: 
Address of Firm: 
State: 
Zip Code: 
Date: 

**Notary Public Information**

Notary Public – State of: 
County of: 

Subscribed and sworn to (or affirmed) before me this day of, 20   
by  
He or she is personally known to me  or has produced Identification  
Type of identification produced: 

Signature of Notary Public: 
Serial Number: 
Print or Stamp of Notary Public: 
Expiration Date: 
Notary Public Seal: 

Page 1 of 3

Revised 1/12/12
FAIR SUBCONTRACTING PRACTICES
(Ordinance 97-35)

In compliance with Miami-Dade County Ordinance 97-35, the Bidder shall submit with the bid proposal a
detailed statement of its policies and procedures (use separate sheet if necessary) for awarding
subcontractors in accordance with Section 1, Paragraph 1.15

☐ NO SUBCONTRACTORS WILL BE UTILIZED FOR THIS CONTRACT

__________________________  ______________________
Signature                    Date
In accordance with Sections 2-8.1, 2-8.8 and 10.34 of the Miami-Dade County Code, this form must be submitted as a condition of award by all bidders/respondents on County contracts for purchase of supplies, materials or services, including professional services which involve expenditures of $100,000 or more, and all bidders/respondents on County or Public Health Trust construction contracts which involve expenditures of $100,000 or more. The bidder/respondent who is awarded this bid/contract shall not change or substitute first tier subcontractors or direct suppliers or the portions of the contract work to be performed or materials to be supplied from those identified, except upon written approval of the County. The bidder/respondent should enter the word "NONE" under the appropriate heading of this form if no subcontractors or suppliers will be used on the contract and sign the form below.

In accordance with Ordinance No. 11-90, an entity contracting with the County shall report the race, gender and ethnic origin of the owners and employees of all first tier subcontractors/suppliers. In the event that the successful bidder demonstrates to the County prior to award that the race, gender, and ethnic information is not reasonably available at that time, the successful bidder shall be obligated to exercise diligent efforts to obtain that information and provide the same to the County not later than ten (10) days after it becomes available and, in any event, prior to final payment under the contract.

(Please duplicate this form if additional space is needed.)

<table>
<thead>
<tr>
<th>Business Name and Address of First Tier Subcontractor/Subconsultant</th>
<th>Principal Owner</th>
<th>Scope of Work to bePerformed by Subcontractor/Subconsultant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Principal Owner</th>
<th>Employee(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Enter the number of male and female owners by race/ethnicity)</td>
<td>(Enter the number of male and female employees and the number of employees by race/ethnicity)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Race/Ethnicity</th>
<th>Gender</th>
<th>Race/Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>White</td>
<td>Black</td>
<td>Other</td>
<td>Other</td>
</tr>
<tr>
<td>Hispanic</td>
<td>Pacific Islander</td>
<td>Native</td>
<td>American/Alaskan</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business Name and Address of First Tier Direct Supplier</th>
<th>Principal Owner</th>
<th>Supplies/Materials/Services to be Provided by Supplier</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mark here if race, gender and ethnicity information is not available and will be provided at a later date. This data may be submitted to Contracting/User department or on-line to Small Business Development Division of the Department of Regulatory and Economic Resources Department at http://new.miamidade.gov/business/business-development.asp.

I certify that the representations contained in this Subcontractor/Supplier listing are to the best of my knowledge true and accurate.

Signature of Bidder/Respondent __________________________ Print Name __________________________ Print Title __________________________ Date __________________________

SUB 100 Rev. 6/12