Hydrogen Peroxide
Estimated Cost - $7,015,000.00/5 years
RQID1500068 - Verification of Availability

June 26, 2015

SBD is attempting to place Small Business Measures on RQID1500068. Please review the this document to determine if your firm would be able provide the scope of services below and is willing to participate on this solicitation. If your firm is interested, please include a copy of your firm’s resume or list of projects or list 3 similar projects on the last page of this document.

The deadline to respond to this Verification of Availability is 3:00 PM, Thursday, July 2, 2015.

Tyrone White
Contract Certification Specialist
Miami-Dade County Small Business Development Division
Office: (305) 375-3123
Fax: (305) 375-3160
Email: twj@miamidade.gov

“Help stimulate Miami’s economy by supporting Small Businesses”

Please familiarize yourself with the Project Review Process Website:
http://www.miamidade.gov/business/contracting-opportunities.asp
VERIFICATION OF AVAILABILITY TO BID

INTERNAL SERVICES DEPARTMENT (ISD)
SMALL BUSINESS DEVELOPMENT (SBD) DIVISION
COMMUNITY SMALL BUSINESS ENTERPRISE PROGRAM
111 N.W. 1ST STREET, 19th FLOOR
MIAMI, FLORIDA 33128
PHONE: 375-3111 FAX: 375-3160

CONTRACT SPECIALIST: Tyrone White
I am herewith submitting this letter of verification of availability and capability to bid, provided the proposed scope of work attached. (NOTE: Please provide all the information requested; incomplete and/or incorrect verifications are not acceptable or usable.)

CONTRACT TITLE: Hydrogen Peroxide

PROJECT NUMBER: RQID1500068

Estimated Contract Amount: $7,015,000.00/5 years

(Scope of work and minimum requirements for this project is attached.)

____________________________________________________________________
NAME OF FIRM

ADDRESS CITY ZIP CODE

Certification Expires: ____________
DATE

Telephone: (__ __ __) __ __ ____ - __ __ __ __

____________________________________________________________________
PRINT NAME AND TITLE

________________________________________________             ________________
SIGNATURE OF COMPANY REPRESENTATIVE                             DATE

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<tr>
<th>Currently Awarded Projects (Name of Project and Owner)</th>
<th>Project Completion Date</th>
<th>Contract Amount</th>
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VERIFICATION OF AVAILABILITY TO BID

CONTRACT TITLE: Hydrogen Peroxide
PROJECT NUMBERS: RQID1500068
ESTIMATED CONTRACT AMOUNT: $7,015,000/5 years

SECTION 2 - SPECIAL TERMS AND CONDITIONS

2.1 PURPOSE
The purpose of this solicitation is to establish a contract for the purchase and delivery of hydrogen peroxide in a 50% water solution in tanker truck loads. The awarded bidder shall also, provide hydrogen peroxide feed systems services and related equipment as required in conjunction with the County's needs.

Can your firm provide hydrogen peroxide?
Yes _____  No _____

Can your firm delivery the hydrogen peroxide in a 50% water solution in tanker truck loads?
Yes _____  No _____

2.2 TERM OF CONTRACT
This contract shall commence on the first calendar day of the month succeeding approval of the contract 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 contract shall remain in effect for five (5) years, and shall expire on the last day of the last month of the five (5) year period.

2.3 METHOD OF AWARD

2.3.1 Award of this contract will be made to the single lowest responsive and responsible bidder who submits an offer on the item listed in this solicitation.

If the primary Bidders defaults, the County shall have the right to negotiated with the next responsive and responsible Bidder.

2.3.2 Bidder shall be the manufacturer of the offered product, or be authorized by the manufacturer or the designee, as a direct distributor to be considered for award. A third party bidder (reseller or toll blender) will not be considered qualified. Bidders are required to submit proof of manufacturer’s authorization. The proof may be in the form of any of the following:

A formal notice on manufacturer’s letterhead identifying the Bidder as the manufacturer, or designating the Bidder as equivalent direct distributor. The notice must include contact name and phone number from an authorized signature and be signed and dated within 12 months of bid submission.

If the bidder is a direct distributor the following shall be provided:

A copy of an executed agreement between the manufacturer, or designee, and the Bidder, designating the Bidder as a direct distributor.

Bidders shall provide a list of at least two (2) references where the Bidder has distributed hydrogen peroxide and provide dosage equipment services (Commercial Business and/or Government Agencies) within the past two (2) years. No more than one of these references may be from a department or division of Miami-Dade County.

The hydrogen peroxide must be clearly identified on the offer submittal pages as to the product manufacturer; manufacturer plant location; and manufacturer’s calculated weight in pounds per gallon @ 20°C (50% basis), as requested, in order to be eligible for award.
The County at its sole discretion may request additional information in order to assess Bidder responsibility. Failure to supply these documents may result in the offer being deemed non-responsive.

2.4 PRICES
The initial contract price results from this solicitation shall remain fixed for a period of no less than 12 months from the contract’s initial effective date. Following the initial 12 month period, the fixed price may be adjusted upward or downward based on changes in the Producer Price Index (PPI), commodity code 067900961 (as updated): Water-treating compound, starting within most recent 12 month period.

It is the awarded Bidder’s responsibility to request any pricing adjustment under this provision. For any adjustment to be considered, the awarded Bidder's request for adjustment must be submitted no less than 90 calendar days prior to expiration of the then current 12 month period. The awarded Bidder’s adjustment request may not be in the excess of the identified index.

Any adjustment received after 90 calendar days from the expiration of the then current 12 month period may not be considered. If no adjustment request is received from the Bidder, the County will assume that the awarded Bidder has agreed that the next 12 month period will be without any upward price adjustment. The County reserves the right to negotiate lower pricing based on market research information or other factors that influence price. The County reserves the right to apply any reduction in pricing for the next 12 month period based on the downward movement of the index identifies in this solicitation.

It shall be further understood that the County reserves the right to reject any price adjustments submitted by the awarded Bidder and/or to terminate the contract with the awarded Bidder based on such price adjustments.

The Bidder’s price shall be inclusive of all costs, charges, and fees involved in providing the specified product and equipment. Additional charges of any kind added to the invoice submitted by the Bidder will be disallowed.

2.5 INSURANCE REQUIREMENTS
The standard insurance requirements listed in the General Terms and Conditions Paragraph 1.21 shall apply with the exception of the following changes to the sections specifically identified:

B. Commercial General Liability Insurance on a comprehensive basis, in an amount not less than $1,000,000 combined single limit per occurrence for bodily injury and property damage. Miami-Dade County must be shown as an additional insured with respect to this coverage.

C. Automobile Liability Insurance covering all owned, non-owned and hired vehicles used in connection with the work, in an amount not less than $1,000,000 combined single limit per occurrence for bodily injury and property damage.

Can your firm meet the insurance requirements?
Yes _____  No _____

METHOD OF PAYMENT
The awarded Bidder shall submit an invoice(s) to the County user department(s) after purchase has been completed. The County has a dedicated State of Florida certified scale for hydrogen peroxide. The net weight of each delivery as measured on that scale shall be the basis for payment. In addition to the general invoice requirements set forth in the General Terms and Conditions Paragraph 1.34, the invoices shall reference the corresponding delivery ticket number / packing slip number and scale ticket that was signed by an authorized representative of the County user department at the time the items were delivered and accepted. Failure to submit invoices in the prescribed manner will delay payment.

Does your firm understand the method of payment?
Yes _____  No _____

2.7 COMPLIANCE / REGULATION

2.7.1 FEDERAL STANDARDS
All services/products to be purchased under this contract 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).

Are your firm's services/products in accordance with governmental standards to include OSHA, NIOSH & NFPA?
Yes _____ No _____

2.7.2 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 contacting the Department of Regulatory and Economic Resources (RER), 701 NW 1st Court, Suite 400, Miami, Florida 33136, Telephone (305) 372-6789.

2.7.3 ACCIDENT PREVENTION AND BARRICADES

Precautions shall be exercised at all times for the protection of persons and property. All Bidders performing services under this contract shall conform to all relevant OSHA, State and County regulations during the course of such effort. Any fines levied by the above mentioned authorities for failure to comply with these requirements shall be borne solely by the responsible Bidder. Barricades shall be provided by the bidder when work is performed in areas traversed by persons, or when deemed necessary by the County Project Manager.

2.8 PURCHASE OF OTHER ITEMS/SERVICES/EQUIPMENT

While the County has listed the hydrogen peroxide in the forms and compositions currently used by the County departments and any related equipment or services in conjunction with the operation of the plant process, there may be similar purchases by the County during the term of this solicitation. Any additional forms/compositions/services/equipment required may be leased or purchased as needed. Under these circumstances, a County representative will solicit the awarded bidder to obtain a price quote for the similar item. Should a different item be quoted than listed on the request for price quotation, the awarded bidder shall provide the documentation as listed in Section 2.3 of this solicitation, or any supporting documentation as required by the County.

Does your firm understand this section?
Yes _____ No _____

2.9 DELIVERY

2.9.1 The awarded Bidder shall make deliveries within the standard 5 calendar days after the date of the order from user department.

If an emergency arises, delivery time shall be within 24 hours after receipt of order either verbal or written. Verbal orders shall be followed up with written confirmation of the order placed.

2.9.2 Delivery shall be made by tanker truck loads (Estimated Annual Quantity: 8,400,000 lbs., Site Tank Size: Two (2) 13,000 gallons). All trucks to delivery product to the County shall comply with all Federal, State, and Local regulations covering the transportation of hazardous products. The delivery vehicle must supply all necessary hoses, meters, and pump to accomplish delivery and unloading. When deliveries are completed, awarded Bidder shall collect scale weight tickets to be submitted with invoices in accordance with Section 2.6.

2.9.3 PACKING SLIP/DELIVERY TICKET/SCALE TICKET

The awarded Bidder shall enclose a complete packing slip/delivery ticket and scale ticket with any items to be delivered in conjunction with this bid solicitation. The packing slip/delivery ticket/
scale ticket shall be made available to the County’s authorized representative during delivery. The packing slip / delivery ticket / scale 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, the gross weight, TARE weight, and net weight of the vehicle.

2.9.4 TESTING / NONCONFORMANCE OF PRODUCTS

During the term of the contract, 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 awarded bidder of nonconformance within ten (10) calendar days. The County shall then require replacement of the item within 48 hours after notification.

Should the awarded Bidder fail to deliver hydrogen peroxide product within the time frame specified, the awarded Bidder may be deemed in breach of contract. The County may terminate the awarded Bidder for default and charge the firm re-procurement charges, if applicable.

2.9.5 DEMURRAGE CHARGES WILL NOT BE ALLOWED

The County shall not incur separate demurrage charges from Bidders who supply containers on an interim basis to the County in conjunction with this contract. Any rental or demurrage costs for such containers that are normally charged by the Bidder must be reflected in the unit prices offered by the Bidder.

2.9.6 BACK ORDER

The County shall not allow any late deliveries attributed to product back order situations under this solicitation. Accordingly, the awarded Bidder is required to deliver all items to the County within the time specified in this solicitation and resultant contract; and no grace period on account of back order situations shall be honored, unless written authorization is issued by the user department, and a new delivery date is mutually established. In the event that the awarded Bidder fails to deliver the products within the time specified, the County reserves the right to cancel the order, seek the items from an alternative source, and charge the awarded Bidder for any re-procurement costs.

Can your firm meet the delivery requirements?
Yes _____ No _____
Contractor Qualifications Questionnaire

This questionnaire will assist SBD in identifying the qualified contractors that can provide the aforementioned good(s)/service(s). Indicate yes “Y” or no “N” on the empty line on the left side of this questionnaire and forward it completely filled out to this e-mail address: twj@miamidade.gov or via fax (305) 375-3160 attention Mr. Tyrone White.

_____ PROPOSER (PRIME) has experience completing projects with a similar size and scope as this project, meets the requirements to qualify and can perform the work as required.

_____ PRIME DOES NOT have experience providing the required good(s) and/or services required by this solicitation.

I certify that to the best of my knowledge all the information provided is verifiable and correct.

Name of Firm: ___________________________ Certification #: ________________
Representative’s Name: ___________________________
Title: ______________ Signature: ____________________________

Please respond by 3:00 PM, Thursday, July 2, 2015.

Any questions, feel free to contact me at the number below.

PLEASE LIST YOUR FIRMS HISTORY OF SIMILAR PROJECTS, REASON(s) WHY YOUR FIRM DOES NOT MEET THE EXPERIENCE REQUIREMENTS (IF APPLICABLE) AND ANY COMMENTS YOU MAY HAVE ON THE NEXT PAGE
Please submit your firm’s resume or list your firm’s history of “Projects with Similar Scopes of Services” below:

Project Title: ______________________________________________________
Client Name: ______________________________________________________
Contact #: (___ ___) ___ ___ - ___ ___ / ______________________________
Contract Amount: $____________________
Scope of Service(s):
________________________________________________________________________
________________________________________________________________________

Project Title: ______________________________________________________
Client Name: ______________________________________________________
Contact #: (___ ___) ___ ___ - ___ ___ / ______________________________
Contract Amount: $____________________
Scope of Service(s):
________________________________________________________________________
________________________________________________________________________

Project Title: ______________________________________________________
Client Name: ______________________________________________________
Contact #: (___ ___) ___ ___ - ___ ___ / ______________________________
Contract Amount: $____________________
Scope of Service(s):
________________________________________________________________________
________________________________________________________________________

REASONS & COMMENTS