

DEPARTMENTAL INPUT
CONTRACT/PROJECT MEASURE ANALYSIS AND RECOMMENDATION

New OTR Sole Source Bid Waiver Emergency Previous Contract/Project No. _____

Contract _____

Re-Bid Other

LIVING WAGE APPLIES: YES NO

Requisition No./Project No.: RQCA1200002 TERM OF CONTRACT One time Purchase YEAR(S) WITH 0 YEAR(S) OTR

Requisition /Project

Title: TRAINING VENUES

Description: The purpose of this invitation to quote is to provide the use of a space for the Annual Pregnant Women Infants and Toddlers Conference to Miami--Dade County, Community Action Agency Department (CAA) for approximately 300 guests and staff. This event will take place on Monday March 12, Tuesday March 13 2012 from 8:00 a.m. to 5:00 PM.

Issuing Department: DPM Contact Person: Shirley Almeida Phone: 786 469- 4722

Estimate Cost: \$40,000 GENERAL FEDERAL OTHER

Funding Source: X

ANALYSIS

Commodity Codes: 96115 971 97130 97165

Contract/Project History of previous purchases three (3) years
Check here if this is a new contract/purchase with no previous history.

PREVIOUS YEAR **2ND YEAR** **3RD YEAR**

Contractor: IQ9467-CA

Small Business Enterprise: Not applicable

Contract Value: 25,895.00

Comments:

Continued on another page (s): Yes No

RECOMMENDATIONS

SBE

Set-aside Sub-contractor goal Bid preference Selection factor

Basis of recommendation: I recommend that no measure be placed on this contract since federal funds are being used.

Signature: _____

Date sent to SBD: 3/15/11

Date returned to DPM: _____

Revised April 2005

RECEIVED
DEPT. BUSINESS DEV.

2012 JAN 11 PM 3:01



INVITATION TO QUOTE

MIAMI-DADE COUNTY
QUOTATION NO.

**THIS IS NOT
AN ORDER**

Internal Services Department

QUOTATION NO.:

DUE DATE: January 20, 2012

TIME: 2:00 PM

CONTACT PERSON: Yuly Chaux

PHONE: 305-375-4263

E-MAIL: ychaux@miamidade.gov

SEALED QUOTE IS REQUIRED:

Sealed quotes must have the following information clearly marked on the face of the envelope: vendor's name and return address, quote number, quote opening date and time. All quotes shall be submitted in a sealed envelope, on or before the due date and time, to:

**Miami Dade County-Internal Services Department
111 N.W. First Street, Suite 1300-Miami, FL 33128-1989
Attn: Vendor Assistance Unit**

Quotes received after the time and date specified, shall not be accepted. Requests for additional information or clarification must be made in writing to the contact person identified on this form. The County will issue additional information by written addenda prior to the scheduled opening date. It is the vendor's responsibility to assure receipt of all addenda. To receive a copy of the tabulation, please send an email to ychaux@miamidade.gov

Failure to complete and sign this form renders your bid/quotation non-responsive and ineligible for award.

The purpose of this invitation to quote To provide the use of a space for the 10th Annual Pregnant Women, Infants, and Toddlers Conference. This event will take place on Monday March 12 and Tuesday March 13, 2012 from 8:00 a.m. to 5:00 PM.

Annual Pregnant Women Infants, and Toddlers Conference (March 2012)				
Note: Accurate number of guests and sleeping rooms will be provided to the awarded vendor a week prior to the event.				
Item	Est. QTY	Description	Unit Price	Extended Price
1	1	Monday: Space for the 10th Annual Pregnant Women Infants, and Toddlers Conference for approximately 300 participants. To include coffee stations to be refilled throughout the morning. <u>See technical specifications</u>	\$ -	\$ -
2	300	Tuesday Luncheon: Three-course meal (i.e. salad, dessert and entree) not to exceed \$25.00 per person , and shall include service charges. <u>See technical specifications</u>	\$ -	\$ -
3	1	Tuesday: Space for the 9th Annual Pregnant Women Infants, and Toddlers Conference for approximately 300 participants. To include coffee stations to be refilled throughout the morning. <u>See technical specifications</u>	\$ -	\$ -
Total:			\$ -	\$ -

Payment Terms: _____

SPECIAL CONDITIONS

Method of award: To a Single Lowest Priced Vendor in the AGGREGATE Award of this contract will be made to the responsive, responsible vendor whose offer represents the lowest price. The County will award the total contract to a single vendor. All pricing offered must be provided in the form of a firm fixed price for the specified task/job.

Examination and Inspection of Facilities: The County reserves the right to examine the vendor's facility at any time during the contract term to determine if the facility is adequate for a particular conference or training session. The County's determination in this regard shall be final.

TECHNICAL SPECIFICATIONS

The facility must be located in Miami-Dade County and easily accessible by public transportation, i.e. Metro Mover, Transit Buses and Metrorail. *Vendor(s) must submit a copy of their current Local Business Tax Receipt to show that they meet this requirement.*

The facility must be able to accommodate a minimum of 10 sleeping rooms for overnight guests.



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Audio visual equipment needed as indicated including LCD projectors, screens, and microphones. Quote must include all labor/set up charges associated with said equipment.

Note: Centerpieces and photographer will be provided by the County

The vendor must be able to accommodate 300 guests in the following arrangements:

DATE	DESCRIPTIONS
Sunday: March 11, 2012	
Late afternoon	County Committee will walk the facilities, and speak with the staff coordinating the event at the hotel/conference. County will drop off decoration, and equipment needed for the conference. A small, secure room should be available on site to store CAA audio-visual equipment overnight during the event.
Monday: March 12, 2012 - For Workshops I, II and III: vendor shall provide and set up the rooms as follows: 6 breakout rooms for 50 people each, classroom style; to include: tables/ chairs, head table and microphone, small a/v table, LCD, and easel stand for room signage.	
6:30 am - 8:00 am	County committee will come to set up the decoration, and county equipment.
8:00 am - 9:00 am	Registration (Vendor shall provide four six-foot tables with two chairs each and drapes)
9:00 am - 10:30 am	<u>General Session</u> for 300 people vendor shall provide and set up the room to include: round tables (set for 10), head table/ chairs podium, microphone, small a/v table, LCD, and screen.
10:45 am - 12:15 pm	Workshop Session I
12:15 pm - 1:15 pm	Participants Lunch on Their Own (possible cash sales for lunch)
1:15 pm - 2:45 pm	Workshop Session II
3:00 pm - 4:30 pm	Workshop Session III
Tuesday March 13, 2012- For Workshops IV, V and VI: vendor shall provide and set up the rooms as follows: 6 breakout rooms for 50 people each, classroom style; to include: tables/ chairs, head table and microphone, small a/v table, LCD and easel stand for room signage.	
7:00 am - 8:00 am	County committee will come to set up the decoration, and county equipment.
8:00 am - 9:00 am	Registration (Vendor shall provide four six-foot tables with two chairs each and drapes)
9:00 am - 10:30 am	Workshop Session IV
10:45 am - 12:15 pm	Workshop Session V
12:15 pm - 1:15 pm	Platted Lunch for 300 persons with round tables (set for 10) for eating- The vendor shall be responsible for the preparation of the Luncheon. The Luncheon Menu shall include: <ul style="list-style-type: none"> • Three-course meal (i.e. salad, dessert and entree) for \$25.00 per person or less. Prices shall include service charges.
1:15 pm - 2:45 pm	Workshop Session VI
3:00 pm - 4:30 pm	<u>General Session</u> for 300 persons vendor shall provide and set up the room to include: round tables (set for 10), podium, microphone, small a/v table, LCD, and screen.



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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.

Addenda Received: Yes No **If yes, please indicate the number of addenda received:** _

It is hereby certified and affirmed that the bidder shall accept any awards made as a result of this quotation. Bidder further agrees that prices quoted will remain fixed for a period of forty-five (45) days from date quotation is due. If awarded a purchases order or contract as a result of this solicitation, bidder further agrees that prices quoted shall remain fixed and firm for the term of the contract.

Authorized Signature: _____ **Title:** _____

Print/Type Name: _____ **Phone:** _____

E-mail: _____ **Fax:** _____

Firm Name: _____ **F.E.I. ID No.:** ___/___-___/___/___/___/___/___/___

Address: _____ **City:** _____ **State:** _____

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 BINDS THE PROPOSER TO THE TERMS OF ITS OFFER.

TERMS AND CONDITIONS

1. Miami-Dade County is tax exempt and no taxes shall be included unless otherwise specified, by the County, on the quote form.
2. The County may reject any or all quotations, or any portion of the quotation, as it deems, in the best interest of the County.
3. In case of default by a successful bidder, Miami-Dade County may procure the goods or services from other sources and charge the bidder, any excess cost or damages occasioned thereby, and debar the bidder from further County contracts in accordance with the Miami-Dade County Code.
4. It is agreed that items or services quoted shall comply with all Federal, State, and local laws relative thereto, and that the bidder shall defend actions or claims brought, and save harmless the County from loss, cost or damage by reason of actual or alleged infringements of patents, copyrights, etc.
5. Bidder shall insert unit price and extension, as required, opposite each item. Where the unit price and the extension price are at variance, the unit price shall prevail.
6. This quote form, any addenda, and/or properly executed modifications, the purchase order (if issued), and a change order (if applicable), constitute the entire contract.
7. Unless otherwise specified by the bidder, a 2% discount will be deducted from payment if made no later than the 20th day after receipt of the goods/services, whichever is later. Prompt payment discounts will not be used in calculating the low bidder.
8. The County may, at its sole discretion, extend the delivery date where the County determines that it is in the best interest of the County.
9. The Department of Procurement Management (DPM) Director, or designee, shall issue an award under this solicitation. The successful bidder shall honor no request for performance until the DPM Director, or designee, has made an award.



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10. Any bidder may protest any recommendation for contract award in accordance with the applicable provisions of the Dade County Code.
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Legal Requirements

Bidders are advised that this contract is subject to all legal requirements contained in the County's Administrative Order 3-38 and all other applicable County Ordinances and/or State and Federal Statutes. Where conflicts exist between this bid solicitation and these legal requirements, the higher authority shall prevail.

The award of this bid solicitation is subject to County Ordinance No. 01-21 which, except where Federal or State law mandates to the contrary, allow preference to be given to a local business. For the purposes of the applicability of this Ordinance, "local business" means the bidder, as of the date of the bid opening, has a valid occupational license issued by Miami-Dade County to do business in Miami-Dade County, that authorizes the bidder to provide the goods, services or construction to be purchased, and has a physical business address located within the limits of Miami-Dade County from which the vendor operates or performs business. A Post Office Box cannot be used to establish a physical address

When a responsive, responsible non-local business submits the lowest price bid, and the bid submittal by one or more responsive, responsible local businesses is within 10% of the price submitted by the non-local business, then the non-local business and each of the aforementioned local businesses shall have the opportunity to submit a best and final bid equal to or lower than the amount of the low bid previously submitted by the non-local business. The best and final bid will be requested by the County within five working days of the bid opening. In the case of a tie in the best and final bid between a local business and a non-local business, contract award shall be made to the local business.

Vendor Compliance

If a vendor fails to comply with this section, that vendor may be considered in default of the contract by Miami-Dade County.



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Affirmation of Business Entity Affidavits

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 (Affidavits Form), before they can be awarded a contract. The undersigned affirms that the Affidavit form submitted with the Vendor Registration Package is current, complete and accurate for each affidavit listed below.

Contract No. : _____ Federal Employer
Identification Number (FEIN): _____

Contract Title: _____

Affidavits and Legislation/ Governing Body

1. Miami-Dade County Ownership Disclosure Sec. 2-8.1 of the County Code	6. Miami-Dade County Obligation to County Section 2-8.1 of the County Code
2. Miami-Dade County Employment Disclosure County Ordinance No. 90-133, amending Section 2.8-1(d)(2) of the County Code	7. Miami-Dade County Code of Business Ethics Article 1, Section 2-8.1(i) and 2-11(b)(1) of the County Code through (6) and (9) of the County Code and County Ordinance No 00-1 amending Section 2-11.1(c) of the County Code
3. Miami-Dade Employment Drug-free Workplace Certification Section 2-8.1.2(b) f the County Code	8. Family Leave Article V of Chapter 11 of the County Code
4. Miami-Dade Disability Non-Discrimination Article 1, Section 2-8.1.5 (AA) Resolution R182-00 amending R-385-95	9. Living Wage Section 2-8.9 of the County Code
5. Miami-Dade County Debarment Disclosure Section 10.38 of the County Code	10. Domestic Leave and Reporting 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 _____ Date _____

Address of Firm _____ State _____ Zip Code _____

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 _____