

DEPARTMENTAL INPUT
CONTRACT/PROJECT MEASURE ANALYSIS AND RECOMMENDATION

Rev 1

<input type="checkbox"/> <u>Accessing contract</u>	<input type="checkbox"/> <u>OTR</u>	<input type="checkbox"/> <u>CO</u>	<input type="checkbox"/> <u>SS</u>	<input type="checkbox"/> <u>BW</u>	<input type="checkbox"/> <u>Emergency</u>	Previous Contract/Project No: 0819-0/14
<input checked="" type="checkbox"/> <u>Re-Bid</u>	<input type="checkbox"/> <u>Other</u>	LIVING WAGE APPLIES: YES <input checked="" type="checkbox"/> NO				

Requisition/Project No: **RQID1800097**

Bid No. and Title: **FB-00890 – Electronic Test Equipment Repair Services and Maintenance**

TERM OF CONTRACT: **60 months**

Description: To prequalify vendors capable of providing electronic test equipment repair services and maintenance for various Miami-Dade County Departments.

Funding Source: **Various**

User Department(s): **Various**

Issuing Department: **Various**

Estimated Cost: **\$409,000.00 60 months.**

Contact Person: **R. Campbell** Phone: **305-375-3233**

ANALYSIS

Commodity No.: **287-80, 465-25, 465-29, 730-60, 730-84, 939-73,936-82**

SIC:

Trade/Commodity/Service Opportunities

Contract/Project History of Previous Purchases for Previous Three (3) Years
Check Here N/A if this is a New Contract/Purchase with no Previous History

EXISTING

2ND YEAR

3RD YEAR

Contractor:	Various – Prequalified contract	Same	Same
Small Business Enterprise:	N/A	N/A	N/A
Contract Value:	\$409,000.00 for 60 months	\$	\$
Continued on another page (s): Yes <input checked="" type="checkbox"/> No			

RECOMMENDATIONS

SBE	Set-Aside	Sub-Contractor Goal	Bid Preference	Selection Factor
		%		
		%		
		%		
		%		

Basis of Recommendation:

Signed: *Roma Campbell*

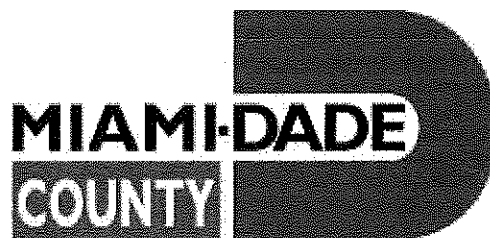
Date to DBD: April 3, 2018

Date Returned to DPM: _____

Solicitation FB-00890

Electronic Test Equipment Repair Services & Maintenance

Solicitation Designation: Public



Miami-Dade County

Solicitation FB-00890

Electronic Test Equipment Repair Services & Maintenance

Solicitation Number FB-00890
Solicitation Title Electronic Test Equipment Repair Services & Maintenance

Solicitation Start Date In Held
Solicitation End Date Jun 15, 2018 6:00:00 PM EDT
Question & Answer End Date Jun 6, 2018 8:00:00 AM EDT

Solicitation Contact Roma Campbell
305-375-3233
rcamp@miamidade.gov

Solicitation Contact Fredrick Taylor
Procurement Contracting Manager
ISD - PMS
305-375-1078
taylorf@miamidade.gov

Solicitation Contact Robert Mendoza
PROCUREMENT CONTRACTING ASSOCIATE
ISD - Procurement Management Services
305-375-3704
Robert.Mendoza@miamidade.gov

Contract Duration **See Bid Documents**
Contract Renewal See Bid Documents
Prices Good for **See Bid Documents**

Solicitation Comments **To prequalify vendors capable of providing electronic test equipment repair services and maintenance for various Miami-Dade County Departments.**

Item Response Form

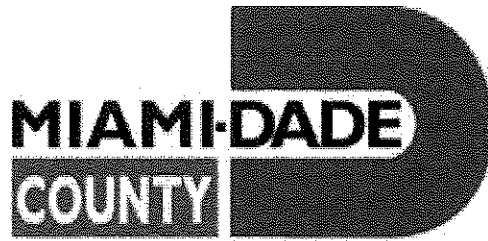
Item **FB-00890-01-01 - Electronic Test Equipment Repair Services & Maintenance**
Quantity **1 each**
Prices are not requested for this item.
Delivery Location **Miami-Dade County**
WASD
3575 SW LEJEUNE ROAD
MIAMI FL 33133
Qty 1
Expected Expenditure \$409,000.00

Description

Electronic test equipment repair services and maintenance for various Miami-Dade County Departments.

SOLICITATION NO.: FB-00890

Electronic Test Equipment Repair Services & Maintenance
Jun 15, 2018



MIAMI-DADE COUNTY, FLORIDA

**I N V I T A T I O N
T O B I D**

TITLE:

Electronic Test Equipment Repair Services & Maintenance

FOR INFORMATION CONTACT:

Roma Campbell, 305-375-3233, rcamp@miamidade.gov

IMPORTANT NOTICE TO BIDDERS/PROPOSERS:

- **READ THE ENTIRE SOLICITATION DOCUMENT, THE GENERAL TERMS AND CONDITIONS, AND HANDLE ALL QUESTIONS IN ACCORDANCE WITH THE TERMS OUTLINED IN PARAGRAPH 1.2(D) OF THE GENERAL TERMS AND CONDITIONS.**
- **THE SOLICITATION SUBMITTAL FORM CONTAINS IMPORTANT INFORMATION THAT REQUIRES REVIEW AND COMPLETION BY ANY BIDDER/PROPOSER RESPONDING TO THIS SOLICITATION.**
- **FAILURE TO COMPLETE AND SIGN THE SOLICITATION SUBMITTAL FORM WILL RENDER YOUR PROPOSAL NON-RESPONSIVE.**

**SECTION 1****GENERAL TERMS AND CONDITIONS:**

All general terms and conditions of Miami-Dade County Procurement Contracts are posted online. Bidders/Proposers 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 general terms and conditions are considered non-negotiable.

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:

<http://www.miamidade.gov/procurement/library/boilerplate/general-terms-and-conditions-r17-1.pdf>

NOTICE TO ALL BIDDERS/PROPOSERS:

Electronic bids are to be submitted through a secure mailbox at BidSync (www.bidsync.com) until the date and time as indicated in this Solicitation document. It is the sole responsibility of the Bidder/Proposer to ensure their proposal reaches BidSync before the Solicitation closing date and time. There is no cost to the Bidder/Proposer to submit a proposal in response to a Miami-Dade County solicitation via BidSync. Electronic proposal submissions may require the uploading of electronic attachments. The submission of attachments containing embedded documents or proprietary file extensions is prohibited. All documents should be attached as separate files.

For information concerning technical specifications please utilize the question/answer feature provided by BidSync at www.bidsync.com within the solicitation. Questions of a material nature must be received prior to the cut-off date specified in the solicitation. Material changes, if any, to the solicitation terms, scope of services, or bidding procedures will only be transmitted by written addendum. (See addendum section of BidSync site).

Please allow sufficient time to complete the online forms and upload of all proposal documents. Bidders/Proposers should not wait until the last minute to submit a proposal. The deadline for submitting information and documents will end at the closing time indicated in the solicitation. All information and documents must be fully entered, uploaded, acknowledged (Confirm) and recorded into BidSync before the closing time or the system will stop the process and the response will be considered late and will not be accepted.

PLEASE NOTE THE FOLLOWING:

No part of your proposal can be submitted via **HARDCOPY, EMAIL, OR FAX**. No variation in price or conditions shall be permitted based upon a claim of ignorance. Submission of a proposal will be considered evidence that the Bidder/Proposer has familiarized themselves with the nature and extent of the work, and the equipment, materials, and labor required. The entire proposal response must be submitted in accordance with all specifications contained in the solicitation electronically.

SOLICITATION TITLE: ELECTRONIC TEST EQUIPMENT REPAIR SERVICES AND MAINTENANCE**SOLICITATION NO.: FB-00890****SECTION 2 – SPECIAL TERMS AND CONDITIONS****2.1 PURPOSE**

The purpose of this solicitation is to prequalify vendors capable of providing electronic test equipment repair services and maintenance for various Miami-Dade County Departments. Entry into the prequalification pool is not a contract between Miami-Dade County (MDC) and any member of the pool, but rather is an acknowledgement that the pool member satisfies the prequalification criteria set forth below for membership in the pool. Prequalified vendors will be invited to participate in future spot market competitions. The pool shall remain open for the term of the contract, enabling vendors to qualify at any time after the initial opening date.

2.2 TERM

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 Blanket Purchase Order issued by the Internal Services Department, Procurement Management Services Division. Contract commencement is contingent upon the completion and submittal of all required documents. The contract shall expire on the last day of the sixty months.

2.3 METHOD OF AWARD

Award will be made to all vendors qualified under the criteria listed below.

2.3.1 Bidders shall provide contact information to include: Name of contact, company's main phone number, contact phone number if different from main phone number, facsimile, email address and cellular number (if applicable) for Primary (required) and Secondary (optional) staff within your company who will be responsible for providing a response to spot market quotes issued by Miami-Dade County. These services shall typically be required Monday through Friday within the business hours of 8:00 a.m. to 5:00 p.m. (local time).

2.3.2 Bidders are required to demonstrate that their firm has been providing these services for a minimum of two (2) years. To demonstrate this past experience, Bidders are required to provide two (2) client references, one (1) of which can be from a government entity or commercial accounts, indicative of the bidders experience in providing electronic test equipment repair services. Reference information shall include clients name, address, phone number, e-mail address, cell number if available, and project description performed by the bidder.

2.4 INDEMNIFICATION AND INSURANCE

Additional or revised insurance requirements may be necessary when performing work in certain County facilities that limit or restrict access. Any change or addition in insurance requirements will be detailed in the RFQ.

2.5 AVAILABILITY OF CONTRACT

Although this Solicitation is specific to a County Department, it is hereby agreed and understood that any County department or agency may avail itself of this contract and purchase any and all services/items specified herein from the successful bidder(s) at the contract price(s) established herein. Under these circumstances, a separate purchase

SOLICITATION TITLE: ELECTRONIC TEST EQUIPMENT REPAIR SERVICES AND MAINTENANCE**SOLICITATION NO.: FB-00890**

order shall be issued by the County, which identifies the requirements of the additional County department(s) or agency(ies).

2.6 ACCEPTANCE OF WORK BY THE COUNTY

The services to be provided hereunder shall be inspected by an authorized representative of the County once work is completed. This inspection shall be performed to determine operational status, acceptance of work, appropriate invoicing and warranty conditions. If any additional parts and or/work is necessary the vendor shall obtain prior authorization from the department project manager or designee. The project manager or designee shall include in their authorization report/memo/letter, type of inspection, identify equipment, a list of operational checks, maintenance work performed, and an overall condition of the equipment.

2.7. DEFICIENCIES IN WORK TO BE CORRECTED BY THE VENDOR

The vendor shall promptly correct all apparent and latent deficiencies and/or defects in work, and/or any work that fails to conform to the contract documents regardless of project completion status. All corrections shall be made within five (5) calendar days after such rejected defects, deficiencies, and/or non-conformances are verbally reported to the vendor by the County's project administrator, who may confirm all such verbal reports in writing. The vendor shall bear all costs of correcting such rejected work. If the vendor fails to correct the work within the period specified, the County may, at its discretion, notify the vendor, in writing, that the vendor is subject to contractual default provisions if the corrections are not completed to the satisfaction of the County within five (5) calendar days of receipt of the notice. If the vendor fails to correct the work within the period specified in the notice, the County shall place the vendor in default, obtain the services of another vendor to correct the deficiencies, and charge the incumbent vendor for these costs; either through a deduction from the final payment owed to the vendor or through invoicing. If the vendor fails to honor this invoice or credit memo, the County may terminate the contract for default.

2.8 WARRANTY FOR REPAIRS AND PARTS

In addition to the standard warranty, it is hereby agreed and understood that all repairs and replacements parts supplied by the Vendor shall be warranted for a minimum period of one (1) year after the repairs have been completed and/or parts installed and accepted by the County. When a product under warranty is replace, a new full one (1) year warranty period for that product will commence again from the date the replacement was provided and accepted by the County. All parts used in connection with repair of equipment shall be new manufactured standard parts, absolutely no reconditioned or recycled parts are permitted.

If any warranty repair experiences two or more failure within thirty (3) calendar days following the repair due to faulty parts/workmanship supplied by the vendor, the vendor hereby understands and agrees to repair the failure at no cost to the County. If the vendor fails to honor the warranty and/or fails to correct or replace the defective work or items within the period specified, the County may at its discretion, notify the vendor in writing that the vendor may be debarred as a County vendor and/or subject to contractual default if the corrections or replacements are not completed to the satisfaction of the County within ten (10) calendar days of receipt of the notice. If the vendor fails to satisfy the warranty within the period in the notice, the County may (a) place the vendor in default of its contract, and/or (b) procure the services/items from another vendor and charge the vendor for any additional costs that are incurred by the County.

**SOLICITATION TITLE: ELECTRONIC TEST EQUIPMENT REPAIR SERVICES AND
MAINTENANCE****SOLICITATION NO.: FB-00890****2.9 COST OF REPLACEMENT OF EXISTING EQUIPMENT/PARTS**

In the event the equipment are determined by the vendor's experience and expertise to be obsolete or beyond economical repair, the County may request supporting references, such as service notes, prices for replacement parts and/or equipment. The County reserves the right to negotiate the statement of work and prices to be paid by the County for such replacements.

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SOLICITATION TITLE: ELECTRONIC TEST EQUIPMENT REPAIR SERVICES AND MAINTENANCE**SOLICITATION NO.: FB-00890****SECTION 3 – TECHNICAL SPECIFICATIONS****3.1 Scope of Work**

The purpose of this solicitation is to establish a contract to provide repair and maintenance services, and replacement parts for various Miami-Dade County departments. The awarded vendor shall furnish all labor (personnel), travel, equipment, general service tools and any other materials necessary to perform repair and maintenance in accordance with the project specifications.

The task described in this section are not exhaustive or all inclusive. It shall be the awarded vendors' responsibility as experts to ensure that all necessary maintenance tasks are performed in order to maintain the Electronic Test Equipment.

3.2 Maintenance and Repair

Maintenance of the Electronic Test Equipment shall be conducted every six (6) to twelve (12) months. All maintenance is to be performed in accordance with the National Bureau of Standards (a Federal Guideline) to ensure that measurements are accurate representations of the specific quantity. The awarded vendor will utilize all Original Equipment Manufacturer (OEM) standard parts with repair of equipment.

If an equipment is determined by the vendor to be obsolete or beyond economical repair, the vendor shall report to the County's Project Manager or designee with supporting documents regarding their findings, and a written estimate of the cost to replace the equipment. Replacement parts will be at cost.

If the an equipment is required to be removed from County's property to the vendors facility, vendor shall be responsible for loss or damage from the time it leaves the County site until it is returned to the County in good operating condition. Should the vendor provide a loaner if applicable of the same type of equipment to the County for continuity of service, this will be at no additional expense to the County. All equipment must be returned with its hardware, components and fasteners intact and assembled.

The awarded vendor shall not be allowed a percentage markup on reimbursing invoices for replacement parts or equipment.

3.3 Six (6) Months or Yearly Services shall include but are not limited to the Following

1. Check and Calibrate equipment of torque wrenches, pressure gauges, dead weight testers, scales, weighing and measuring equipment for fleet of Bell 412 trauma response helicopters;
2. Check, test and repair services for electrical and lighting meters for voltage rating and amperage reading; pump motors, continuity testing of wire, testing of printed circuit boards, time clocks, and testing of electric glove insulation;
3. Check, test, repairs and re-certification of multi-fluke meters, metal detectors, radio locators, meter back flow testers, gas monitors, etc.

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4. Diagnostic test, calibration service to Oscilloscopes, Function Generators, LCR Meters, Capacitor Inductor Analyzers, Frequency Counters, Cellcorders and Bench Multimeters.

A calibration sticker or certificate must be supplied with all repaired equipment.

3.4 **Manufacturers**

Bidders shall be required to provide and perform repairs services to include but not limited to the following test equipment and the various manufacturer used throughout Miami-Dade County. Please place a check mark (✓) next to the items you can repair. Again, the list below is neither exclusive nor complete:

<u>Equipment</u>	<u>Manufacturer</u>
Amp meters	Amprobe
	Columbia Electronics
	Fluke
	General Electric
	Multi Amp
Calibrators	Autocon
	Fisher Porter
	Foxboro
	Key Telemetry
	Tranmation
Phase Sequence Indicator	Knopp, Inc.
RF Communication Monitors	Aeroflex
	Cushman
	General Dynamics
	Hewlett Packard
	Motorola
Tachometers	Ramsey
	General Radio Company
	Pioneer
	Promax Power Line Communications (PLC)
	TIF
Trackers	Huntron
Test Sets	ACCO Bristol
	Cushman & Wakefield
	Federal Pacific Electric

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Detectors	Motorola
	TBERD
	Mars
	Solar Electronix
	TIF
Frequency Counters	Victoreen
	B&K Precision
	B&W
	Fluke
	Hewlett Packard Agilent
	Phillips
Recorders	Rhodes & Schwarz
	Tektronix
	Amprobe
Multimeters	General Electric
	Simpson
	Ameritec
	Wiltron Anritsu
	B&K Precision
	Fluke
	Helper
	Hewlett Packard Agilent
	Honeywell
Wattmeters	Simpson
	Tektronix
	Triplett
Oscilloscopes	
	Bird
	Hewlett Packard Agilent
	Anritsu
	B&K Precision
	Fluke
	Hewlett Packard Agilent
Power Supplies	Phillips
	Rhodes & Swartz
	Soar
	Tektronix
	B&K Precision
	Fluke
	Hewlett Packard
	Motorola

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	NEC
	Sencor
	Tektronix
Testers	
	Ameritec
	Anritsu
	Associated Research
	B&K Precision
	Biddle
	Hewlett Packard Agilent
	Hi Volt
	Holub Industries
	Murry
	Onan
	Sencor
	Simpson
	Tektronix
	Triplet
Frequency Spectrum Analyzers	
	Anritsu
	Hewlett Packard Agilent
	Rhodes & Swartz
Time Domain Reflectometers	Tektronix
	Anritsu
	Hewlett Packard Agilent
	Rhodes & Swartz
Transmission Impairment Test Sets	Tektronix
	Ameritec
	Anritsu
	Convex
	Fluke
	Hewlett Packard Agilent
	Rhodes & Swartz
	Tektronix
Generators	
	Anritsu
	B&K Precision
	Fluke
	Hewlett Packard Agilent
	IFR
	Phillips
	Rhodes & Swartz
	Singer
	Tektronic

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Microwave Power Meters	Anritsu
	Boonton
	Harris Stratex
	Hewlett Packard Agilent
	Rhode & Swartz
	Tektronix
Miscellaneous Items	
Amphone	General Radio
Ballantine	Goldak Co., Inc.
Bently Nevada Corporation	Harris/Stratex
Biomarine Industries	M/A-Com
Communications Test Design, Inc (CTDI)	Mikron
Crompton	Neggers
Data Precision	Neotonics
Drantz	Nutac
EICO	Pace
Fisher controls	Petolite
Simpson	Soltec
Sperry	Sunstrand Data Control
Televa	TESSCO
WABCO	Weston
Yew	

**SOLICITATION TITLE: ELECTRONIC TEST EQUIPMENT REPAIR SERVICES AND
MAINTENANCE**
SOLICITATION NO.: FB-00890
SECTION 4
BID SUBMITTAL FORM
4.0 CHECKLIST OF REQUIREMENTS

Section 2 Paragraph 2.3.1	Bidders shall provide contact information to include: Name of contact, company's main phone number, contact phone number if different from main phone number, facsimile, email address and cellular number (if applicable) for Primary (required) and Secondary (optional), staff within your company who will be responsible for providing a response to spot market quotes issued by Miami-Dade County. These services shall typically be required Monday through Friday within the business hours of 8:00 a.m. to 5:00 p.m. (local time).	Initial as Completed
	Primary Contact Information:	
	Primary Contact Name:	
	Primary Address for Company:	
	Email Address:	
	Company Main Phone Number:	
	Facsimile:	
	Cellular Phone Number (if applicable):	
	Secondary Contact Information (optional):	
	Secondary Contact Name:	
	Secondary Address:	
	Email Address:	
	Company Main Phone Number:	
	Facsimile:	
	Cellular Phone Number (if applicable):	

SOLICITATION TITLE: ELECTRONIC TEST EQUIPMENT REPAIR SERVICES AND MAINTENANCE**SOLICITATION NO.: FB-00890**

Section 2 Paragraph 2.3.2	Bidders are required to provide two (2) client references, one (1) of which can be from a government entity or commercial accounts, indicative of the bidders experience in providing electronic test equipment repair services. Reference information shall include clients name, address, phone number, email address, cell number if available, and project description performed by the bidder.	Initial as Completed
	Client Reference Letter #1	
	Contact Name:	
	Company's Name	
	Address:	
	Contact Phone Number:	
	Email Address:	
	Cell Number:	
	Project Description:	
	Client Reference Letter #2	
	Contact Name:	
	Company's Name	
	Address:	
	Contact Phone Number:	
	Email address:	
	Cell Number:	
	Project Description:	



Submittal Form

Solicitation No. FB-00890		Solicitation Title: Electronic Test Equipment Repair Services & Maintenance	
Legal Company Name (include d/b/a if applicable): <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Federal Tax Identification Number: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
If Corporation - Date Incorporated/Organized: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	State Incorporated/Organized: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
Company Operating Address: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	City: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	State: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Zip Code: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Miami-Dade County Address (if applicable): <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	City: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	State: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Zip Code: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Company Contact Person: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Email Address: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
Phone Number (include area code): <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Company's Internet Web Address: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
<p>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 prior to entering into a contract with or receiving funding from the County.</p> <p><input type="checkbox"/> Place a check mark here only if the Bidder has such conviction to disclose to comply with this requirement.</p>			
<p>LOCAL PREFERENCE CERTIFICATION: For the purpose of this certification, and pursuant to Section 2-8.5 of the Code of Miami-Dade County, a "local business" is a business located within the limits of Miami-Dade County that has a valid Local Business Tax Receipt issued by Miami-Dade County at least one year prior to bid submission; has a physical business address located within the limits of Miami-Dade County from which business is performed and which served as the place of employment for at least three full time employees for the continuous period of one year prior to bid submittal (by exception, if the business is a certified Small Business Enterprise, the local business location must have served as the place of employment for one full time employee); 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.</p> <p><input type="checkbox"/> Place a check mark here only if affirming the Bidder meets the 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.</p>			
<p>LOCALLY-HEADQUARTERED BUSINESS CERTIFICATION: For the purpose of this certification, and pursuant to Section 2-8.5 of the Code of Miami-Dade County, a "locally-headquartered business" is a Local Business whose "principal place of business" is in Miami-Dade County.</p> <p><input type="checkbox"/> Place a check mark here only if affirming the Bidder meets requirements for the Locally-Headquartered Preference (LHP). Failure to complete this certification at this time (by checking the box) may render the vendor ineligible for the LHP.</p> <p>The address of the Locally-Headquartered office is: <div style="border: 1px solid black; height: 20px; width: 100%;"></div></p>			
<p>LOCAL CERTIFIED VETERAN BUSINESS ENTERPRISE CERTIFICATION: A Local Certified 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 veteran business enterprise pursuant to Section 295.187 of the Florida Statutes.</p> <p><input type="checkbox"/> Place a check mark here only if affirming the Bidder is a Local Certified Veteran Business Enterprise. A copy of the certification must be submitted with the bid.</p>			
<p><u>SMALL BUSINESS ENTERPRISE CONTRACT MEASURES (if Applicable)</u></p> <p>A Small Business Enterprise (SBE) must be certified by Small Business Development for the type of goods and/or services the Bidder provides in accordance with the applicable Commodity Code(s) for this Solicitation. For certification information contact Small Business Development at (305) 375-3111 or access http://www.miamidade.gov/smallbusiness/certification-programs.asp. The SBE must be certified by the solicitation's submission deadline, at contract award, and for the duration of the contract to remain eligible for the preference. Firms that graduate from the SBE program during the contract may remain on the contract.</p>			

Is Bidder's firm a Miami-Dade County Certified Small Business Enterprise? Yes ☐ No ☐

If yes, please provide Certification Number: _____

SCRUTINIZED COMPANIES WITH ACTIVITIES IN SUDAN LIST OR THE SCRUTINIZED COMPANIES WITH ACTIVITIES IN THE IRAN PETROLEUM ENERGY SECTOR LIST:

By executing this bid through a duly authorized representative, the Bidder certifies that the Bidder 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 Bidder is unable to provide such certification but still seeks to be considered for award of this solicitation, the Bidder shall execute the bid response package through a duly authorized representative and shall also initial this space: _____ In such event, the Bidder shall furnish together with its bid response 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 Bidder 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 Bidder 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.

IT IS HEREBY CERTIFIED AND AFFIRMED THAT THE BIDDER SHALL ACCEPT ANY AWARDS MADE AS A RESULT OF THIS SOLICITATION. BIDDER FURTHER AGREES THAT PRICES QUOTED WILL REMAIN FIXED FOR A PERIOD OF ONE HUNDRED AND EIGHTY (180) DAYS FROM DATE SOLICITATION IS DUE.

WAIVER OF CONFIDENTIALITY AND TRADE SECRET TREATMENT OF BID

The Bidder acknowledges and agrees that the submittal of the Bid is governed by Florida's Government in the Sunshine Laws and Public Records Laws as set forth in Florida Statutes Section 286.011 and Florida Statutes Chapter 119. As such, all material submitted as part of, or in support of, the bid will be available for public inspection after opening of bids and may be considered by the County in public.

By submitting a Bid pursuant to this Solicitation, Bidder agrees that all such materials may be considered to be public records. The Bidder shall not submit any information in response to this Solicitation which the Bidder considers to be a trade secret, proprietary or confidential.

In the event that the Bid contains a claim that all or a portion of the Bid submitted contains confidential, proprietary or trade secret information, the Bidder, by signing below, knowingly and expressly waives all claims made that the Bid, or any part thereof no matter how indicated, is confidential, proprietary or a trade secret and authorizes the County to release such information to the public for any reason.

Acknowledgment of Waiver:

Bidder's Authorized Representative's Signature: _____ *	Date _____ *
Type or Print Name _____ *	
Type or Print Title * _____ *	

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF THE BIDDER TO BE BOUND BY THE TERMS OF ITS OFFER. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED ABOVE BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE BID NON-RESPONSIVE. THE COUNTY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY RESPONSE THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE BIDDER TO THE TERMS OF ITS OFFER.

Bidder's Authorized Representative's Signature: _____ *	Date _____ *
Type or Print Name _____ *	
Type or Print Title * _____ *	

**FAIR SUBCONTRACTING PRACTICES**

In compliance with Miami-Dade County Code Section 2-8.8, the Bidder/Proposer shall submit with the proposal a detailed statement of its policies and procedures (use separate sheet if necessary) for awarding subcontractors.

☐ NO SUBCONTRACTORS WILL BE UTILIZED FOR THIS CONTRACT

Signature

Date



SUBCONTRACTOR/SUPPLIER LISTING
(Miami-Dade County Code Sections 2-8.1, 2-8.8 and 10-34)

Name of Bidder/Proposer: _____

FEIN No. _____

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/Proposers on County contracts for purchase of supplies, materials or services, including professional services which involve expenditures of \$100,000 or more, and all Proposers on County or Public Health Trust construction contracts which involve expenditures of \$100,000 or more. The Bidder/Proposer who is awarded this 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/Proposer 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 recommended Bidder/Proposer demonstrates to the County prior to award that the race, gender, and ethnic information is not reasonably available at that time, the Bidder/Proposer 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.)

Business Name and Address of First Tier Direct Supplier	Principal Owner	Supplier/Materials/ Services to be Provided by Supplier	Principal Owner (Enter the number of male and female owners by race/ethnicity)								Employee(s) (Enter the number of male and female employees and the number of employees by race/ethnicity)							
			M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other	M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other

Business Name and Address of First Tier Subcontractor/ Subconsultant	Principal Owner	Scope of Work to be Performed by Subcontractor/ Subconsultant	Principal Owner (Enter the number of male and female owners by race/ethnicity)								Employee(s) (Enter the number of male and female employees and the number of employees by race/ethnicity)							
			M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other	M	F	White	Black	Hispanic	Asian/Pacific Islander	Native American/ Native Alaskan	Other

☐ 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 department or on-line to the Small Business Development of the Internal Services Department at <http://www.miamidade.gov/businessdevelopment-contracts.asp>. As a condition of final payment, Bidder/Proposer shall provide subcontractor information on the Subcontractor Payment Report Sub 260 form which can be found at <http://www.miamidade.gov/business/library/forms/subcontractors-payment.pdf>.

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

Signature of Bidder/Proposer

Print Name

Print Title

Date

10/11

Miami-Dade County**Contractor Due Diligence Affidavit**

Per Miami-Dade County Board of County Commissioners (Board) Resolution No. R-63-14, County Vendors and Contractors shall disclose the following as a condition of award for any contract that exceeds one million dollars (\$1,000,000) or that otherwise must be presented to the Board for approval:

- (1) Provide a list of all lawsuits in the five (5) years prior to bid or proposal submittal that have been filed against the firm, its directors, partners, principals and/or board members based on a breach of contract by the firm; include the case name, number and disposition;
- (2) Provide a list of any instances in the five (5) years prior to bid or proposal submittal where the firm has defaulted; include a brief description of the circumstances;
- (3) Provide a list of any instances in the five (5) years prior to bid or proposal submittal where the firm has been debarred or received a formal notice of non-compliance or non-performance, such as a notice to cure or a suspension from participating or bidding for contracts, whether related to Miami-Dade County or not.

All of the above information shall be attached to the executed affidavit and submitted to the Procurement Contracting Officer (PCO)/ AE Selection Coordinator overseeing this solicitation. The Vendor/Contractor attests to providing all of the above information, if applicable, to the PCO.

Contract No. :		Federal Employer Identification Number (FEIN):	
Contract Title:			
Printed Name of Affiant	Printed Title of Affiant	Signature of Affiant	
Name of Firm			
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

Question and Answers for Solicitation #FB-00890 - Electronic Test Equipment Repair Services & Maintenance

Overall Solicitation Questions

There are no questions associated with this Solicitation.