



DISPOSABLE INSERTS

Program Estimated Cost – \$600,000.00

FB-02000- Verification of Availability

May 26, 2022

SBD is attempting to place a Small Business Measure on **FB-02000**. Please review this document to determine if your firm would be able **provide the contract's scope of services 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 10:00 A.M., MAY 31, 2022.

Laquita Oliver

SBD Capital Improvement Project Specialist

Small Business Development Division

Miami-Dade County Internal Services Department

111 NW 1st Street, 19th Floor, Miami, FL 33128

☎ Office: (305) 375-2292 | 📠 Fax: (305) 375-3160

Email: lquitao@miamidade.gov

Connect With Us on [Twitter](#) | [Facebook](#) | [Instagram](#)



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

Please familiarize yourself with the Project Review Process Website:

VERIFICATION OF AVAILABILITY TO BID

INTERNAL SERVICES DEPARTMENT (ISD)

SMALL BUSINESS DEVELOPMENT (SBD) DIVISION

SMALL BUSINESS ENTERPRISE PROGRAM

111 N.W. 1ST STREET, 19th FLOOR

MIAMI, FLORIDA 33128

PHONE: 375-2292

CONTRACT SPECIALIST: **Laquita Oliver**

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: DISPOSABLE INSERTS

PROJECT NUMBER: FB-02000

Estimated Contract Amount: \$600,000.00

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

NAME OF FIRM

ADDRESS

CITY

ZIP CODE

Certification Expires: _____

Telephone: (_____) _____ - _____

PRINT NAME AND TITLE

SECTION 2
SPECIAL TERMS AND CONDITIONS

2.1 **PURPOSE**

The purpose of this solicitation is to establish a contract for the purchase of disposable inserts for the Miami-Dade County Corrections and Rehabilitation Department on an as-needed basis.

DOES YOUR FIRM UNDERSTAND SECTION 2.1 IN ITS ENTIRETY? ___ 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 Purchase Order issued by the County. The contract shall expire on the last day of the five (5) year term.

DOES YOUR FIRM UNDERSTAND SECTION 2.2 IN ITS ENTIRETY? ___ YES ___ NO

2.3 **METHOD OF AWARD**

Award of this contract will be made to the lowest priced responsive, responsible Bidder in the aggregate. In order to be considered for award, Bidder(s) shall offer pricing for all items listed in this solicitation. If a Bidder fails to submit an offer for all items, its offer may be deemed non-responsive.

DOES YOUR FIRM UNDERSTAND SECTION 2.3 IN ITS ENTIRETY? ___ YES ___ NO

2.4 **BID SUBMITTAL REQUIREMENT**

To be considered for an award recommendation, Bidders shall provide the documentation requested below:

- a) Bidder(s) shall provide the contact information of a designated representative who can be reached during the County's business hours (8:00am to 5:00pm), Mondays through Fridays to address matters relating to the contract. Bidder(s) shall provide the representative's name, title, phone number, and email address.

DOES YOUR FIRM UNDERSTAND SECTION 2.4 IN ITS ENTIRETY? ___ YES ___ NO

2.5 **PRICING**

The rates shall remain fixed for a period of one (1) year (initial term) after the commencement of the contract. Rates may change annually based on the Producer Price Index industry group data for all other plastics product manufacturing-Consumer/institutional/commercial fabricated plastics products, not seasonally adjusted. Awarded Bidder shall submit rate adjustment requests at least thirty (30) days prior to the end of each twelve (12) month period.

The period used to calculate the adjustment will include no more than twelve (12) months, starting from the effective date of the contract, using the index above and include as many months as published (available) in the twelfth (12th) month, including preliminary [P] numbers during the current twelve (12) months, as not all months may be available for calculation. If the County authorizes an adjustment, the awarded rate(s) will be multiplied times the index percentage change, and the new awarded rate(s) for the next twelve (12) months. The rate adjustment, if any, will take effect on the first month of the next twelve (12) month period.

The County reserves the right to apply any reduction in pricing for each contract year based on the downward movement of the applicable index.

DOES YOUR FIRM UNDERSTAND SECTION 2.5 IN ITS ENTIRETY? ___ YES ___ NO

2.6 PRODUCTS**A. EQUALS**

The mention of a particular manufacturer's brand name in Section 3, Technical Specifications, does not imply that the particular brand name is the only one that will be considered for purchase. This reference is intended solely to establish the minimum quality that will be acceptable. If an equal product is to be considered by the County in accordance with Section 3, Technical Specifications, the product shall be equal in quality, presentation, and quantity to the item(s) specified in the solicitation. Equal products must be clearly identified by Bidder(s) in Section 4, Pricing, and must include the brand name. Failure to provide this information may result in rejection of the offer.

The determination as to whether an alternate product is or is not equal shall be made solely by Miami-Dade County, and such determination shall be final and binding upon all Bidders. Miami-Dade County reserves the right to request and review additional information and samples to make a determination.

B. SAMPLES

Bidder(s) may be required to submit a sample of equal products proposed for evaluation by, and at no cost to the County. If samples are required, the County will notify Bidder(s) of such in writing and will specify the deadline for submission. Each individual sample shall be clearly labeled with the Bidder's name, bid number, bid title, item number, manufacturer's name and brand name. If the Bidder(s) fails to submit the sample properly labeled, within the specified date stipulated in the notice, the County may - not consider the Bidder's bid. All samples shall become the property of Miami-Dade County. Any samples submitted shall create an express warranty that the whole of the goods to be provided by the Bidder(s) during the contract period shall conform to the samples submitted.

DOES YOUR FIRM UNDERSTAND SECTION 2.6 IN ITS ENTIRETY? YES NO

2.7 DELIVERY

All deliveries shall be made in accordance with good commercial practice and all required delivery time frames identified in the Purchase Order shall be adhered to by the awarded Bidder, except in such cases where the delivery will be delayed due to acts of nature, strike, or other causes beyond the awarded Bidder. The County shall be notified of any delays in advance of the original scheduled delivery so that a revised delivery date can be appropriately considered.

Should the awarded Bidder fail to deliver the products within the time stipulated in the Purchase Order, the County reserves the right to cancel the order on a default basis. If the order is so terminated, it is hereby understood and agreed that the County has the authority to purchase the products elsewhere and to charge the awarded Bidder with any re-procurement costs. If the awarded Bidder fails to honor these re-procurement costs, the County may terminate the contract for default.

Certain County employees may be authorized in writing to pick-up products under this contract. The awarded Bidder shall require presentation of this written authorization and shall maintain a copy of the authorization. If the awarded Bidder is in doubt about any aspect of product pick-up, the awarded Bidder shall contact the appropriate user department liaison to confirm the authorization.

DELIVERY LOCATION

Awarded Bidder shall deliver products to the following County facility:

Food Services Bureau
1351 NW 78 Ave (Maya Building)

Miami, FL. 33126

Other delivery locations, within Miami-Dade County boundaries, may be added during the term of the contract.

CAN YOUR FIRM MEET THE DELIVERY REQUIREMENTS AS MENTIONED ABOVE IN SECTION 2.7 IN ITS ENTIRETY? YES NO

2.8 ACCEPTANCE OF PRODUCTS

The products to be provided shall be maintained in full compliance with industry standards and the specifications and requirements set forth in this solicitation. If products provided are found to be defective or determined not to meet the specifications and requirements of this solicitation, at the County's sole discretion, either prior to acceptance or upon initial inspection, the product will be returned to the awarded Bidder, at the awarded Bidder's expense. At the County's own option, the awarded Bidder shall either provide a direct replacement for the product, or provide a full credit for the returned product. The awarded Bidder shall not assess any additional charge(s) for any conforming action taken by the County under this paragraph.

DOES YOUR FIRM UNDERSTAND SECTION 2.8 IN ITS ENTIRETY? YES NO

2.9 ADDITIONAL PRODUCTS

While the County has listed all major products within this solicitation which are utilized by the County department in conjunction with its operations, there may be similar product(s) that must be purchased by the County during the term of this contract. Under these circumstances, a County representative will contact the awarded Bidder to obtain a price quote for the similar product(s). The County reserves the right to award these similar product(s) to the awarded Bidder, based on the price quoted, to negotiate pricing, or to acquire the product(s) through a separate solicitation.

CAN YOUR FIRM PROVIDE ADDITIONAL PRODUCTS WHEN NEEDED? YES NO

2.10 SUBSTITUTE PRODUCTS

Substitute brands or models may be considered during the contract period for discontinued products. The awarded Bidder shall not deliver any substitute product as a replacement to an awarded brand or model without express written consent from the County. Substitute product(s) must meet the specifications noted in Section 3, be of equal or better quality, and priced the same as the awarded product(s). Excessive substitution requests may be cause to cancel the contract.

DOES YOUR FIRM UNDERSTAND SECTION 2.10 IN ITS ENTIRETY? YES NO

2.13 LEGAL REQUIREMENT FOR POLLUTION CONTROL

It is the intent of these specifications to comply with all environmental protection and pollution control provisions contained in [Chapter 24 of the Code of Miami-Dade County](#). This ordinance is made a part of these specifications by reference and may be obtained, if necessary, by the Bidder online at Municode.com. You may contact Department of Regulatory and Economic Resources, Division of Environmental Resources Management at (305) 372-6789 if you need further assistance.

DOES YOUR FIRM UNDERSTAND SECTION 2.13 IN ITS ENTIRETY? YES NO

SECTION 3
TECHNICAL SPECIFICATIONS

3.1 SCOPE OF WORK

Awarded Bidder shall supply and deliver disposable inserts to Miami-Dade Corrections and Rehabilitation Department (MDCR) on an as needed basis. The disposable inserts will be used in the serving of food to inmates at the County's correctional facilities. The inserts are placed into reusable plastic trays and food is served onto the disposable inserts. After use, the insert is disposed of while the tray is cleaned for re-use. Two categories of inserts will be used, one for high heat and one for cold.

DOES YOUR FIRM UNDERSTAND SECTION 3.1 IN ITS ENTIRETY? YES NO

3.2 PRODUCTS TO BE PROVIDED

3.2.1 High Heat Dishes

Inserts shall be made of FDA approved styrene or compatible plastic and must firmly fit in the appropriate section of the server. The disposable inserts may be used by the County for hot or cold food items. The disposable inserts must be capable of withstanding the rethermalization process nested in servers resting on rethermalization shelves that include a hot plate.

CAN YOUR FIRM PROVIDE THIS ITEM? YES NO

3.2.1a

Side Dish – approximately overall dimensions are 5.1 inches in length by 3.9 inches in width by 1.0 inches in height. Part Number Aladdin Temp Rite (Aladdin) (A07A) or Dinex (HH1)

CAN YOUR FIRM PROVIDE THIS ITEM? YES NO

3.2.1b

Entrée Dish – 1 cavity, approximately overall dimensions 7.6 inches in length by 5.1 inches in width by 1.0 inches in height. Part Number Aladdin (A44) or Dinex (HH8)

CAN YOUR FIRM PROVIDE THIS ITEM? YES NO

3.2.1c

Rectangular Soup Bowl – approximately overall dimensions 4.7 inches in length by 3.7 inches in width by 1.7 inches in height. The bowl shall have the capacity of approximately 10 ounces (brim fill) and 8 ounces (normal fill) level. Part Number Aladdin (B19) or Dinex (HH20)

CAN YOUR FIRM PROVIDE THIS ITEM? YES NO

3.2.1d

Soup Bowl Lid – must fit soup bowl. Approximately overall dimensions 4.9 inches in length by 3.8 inches in width by 0.3 inches in height. Part Number Aladdin (B82) or Dinex (HH30)

CAN YOUR FIRM PROVIDE THIS ITEM? YES NO

3.2.2 Cold Dishes

Inserts shall be made of polystyrene and have a textured finish and nest in the appropriate section of the server. Disposable inserts may be used for cold items without leakage.

CAN YOUR FIRM PROVIDE THIS ITEM? ___ YES ___ NO

3.2.2a

Entrée Dish – one cavity, approximate overall dimensions 7.6 inches in length by 5.1 inches in width by 1.0 inches in height. Part Number Aladdin (A01A) or Dinex (TT8)

CAN YOUR FIRM PROVIDE THIS ITEM? ___ YES ___ NO

3.2.2b

Side Dish – one cavity, approximately overall dimensions 5.1 inches in length by 3.9 inches in width by 1.0 inches in height. Part Number Aladdin (A05A) or Dinex (TT1)

CAN YOUR FIRM PROVIDE THIS ITEM? ___ YES ___ NO

SECTION 4
BID SUBMITTAL (FYI ONLY; PLEASE COMPLETE AT THIS TIME)

<p><u>SUBMITTAL REQUIREMENT</u></p> <p>TO BE COMPLETED BY ALL BIDDER(S)</p>

2.4(a)	<p>Bidder(s) shall provide the contact information of a designated representative that can be reached during the County’s business hours (8:00am to 5:00pm), Mondays through Fridays to address matters relating to the contract. Bidder(s) shall provide the representative’s name, title, phone number, and email address.</p> <p>Representative Name: _____</p> <p>Title: _____</p> <p>Phone Number: _____</p> <p>E-Mail Address: _____</p>	
--------	--	--

PRICING

Item	Estimated <u>Annual</u> Quantity	Description	Product Manufacturer, Brand Name and Product Number	Unit of Measure	Unit Price
3.2.1a		Hot Side Dish		Each	\$ _____ / Each
3.2.1b		Hot Entrée Dish		Each	\$ _____ / Each
3.2.1c		Hot Rectangular Soup Bowl		Each	\$ _____ / Each
3.2.1d		Hot Soup Bowl Lid		Each	\$ _____ / Each
3.2.2a		Cold Entrée Dish		Each	\$ _____ / Each
3.2.2b		Cold Side Dish		Each	\$ _____ / Each

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: lquitao@miamidade.gov

_____ PROPOSER (PRIME) has experience completing projects with a similar size and scope as this project, meets the requirements of the PROPOSER (if any) 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 **10:00 A.M., TUESDAY, MAY 31, 2022.**

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

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

SIMILAR PROJECTS AS

Please attach a copy of 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):

