

## Estimated Cost - \$3,062,200/8 years ROID1600002 - Verification of Availability

#### October 6, 2015

SBD is attempting to place a Small Business Measure on RQID1600002. 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 <u>a copy of your firm's resume or list of projects or list 3 similar projects on the last page of this document.</u>

# The deadline to respond to this Verification of Availability is 4:00 PM, Friday, October 9, 2015.

#### **Tyrone White**

Contract Certification Specialist Miami-Dade County Small Business Development Division

©Office: (305) 375-3123 BFax: (305) 375-3160 Email: twj@miamidade.gov



"Help stimulate Miami's economy by supporting Small Businesses"

#### **VERIFICATION OF AVAILABILITY TO BID**

INTERNAL SERVICES DEPARTMENT (ISD) SMALL BUSINESS DEVELOPMENT (SBD) DIVISION COMMUNITY SMALL BUSINESS ENTERPRISE PROGRAM 111 N.W. 1ST STREET, 19<sup>th</sup> 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:	ID Cards, Printers, Supplies and Accessories							
PROJECT NUMBER:	RQID1600002							
Estimated Contract Amount: \$3,062,200/8 years								
(Scope of work and minimum	requirements	for this project is atta	ched.)					
NAME OF FIRM			_					
ADDRESS		CITY	ZIP CODE					
Certification Expires:DATE								
Telephone: ()								
PRINT NAME AND T	ITLE							
SIGNATURE OF COMPAN	IY REPRESEN	TATIVE	DATE					
Currently Awarded Projects (Name of Project and Owner)	Project Completion Date	Contract Amount	Anticipated Awards					

#### **VERIFICATION OF AVAILABILITY TO BID**

CONTRACT TITLE: ID Cards, Printers, Supplies and Accessories

PROJECT NUMBERS: RQID1600002

ESTIMATED CONTRACT AMOUNT: \$3,062,200,000/58 years

#### 2.1 PURPOSE

This Request to Qualify (RTQ) will establish a pool of pre-qualified Bidders capable of providing the County with ID cards, printers, supplies and accessories. Entry into the pre-qualification pool is not a contract between Miami-Dade County and any member of the pool, but rather is an acknowledgement that the pool member satisfies the pre-qualification criteria set forth below for membership in the pool. The pool will remain open for the term of the RTQ, enabling Bidders to qualify at any time after the initial RTQ submission opening date.

DEFINITIONS

Submittal – shall refer to the form submitted in response to this Request to Qualify. Submitter – shall refer to anyone responding to this Request to Qualify.

RFQ – Request for quotation

Can your firm satisfy the purpose of this solicitation?

Yes No

(If yes, please provide a copy of your firm's resume or list of projects or list 3 similar projects on the last page of this document)

#### <u>2.2</u> <u>TERM</u>

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 RFQ documents. The pre-qualification pool shall expire on the last day of the last month of the eight (8) year period.

#### 2.3 QUALIFICATION CRITERIA

Submitters shall submit all of the qualifying documents with their submittal form. However, the County may, at its sole discretion and in its best interests, allow Submitters to supplement documents in order to satisfy the prequalification criteria. It shall be the sole prerogative of the County to determine the number of Submitters that will be included under the pool.

**2.3.1** Bidders shall maintain office staff who are authorized to discuss matters pertaining to the quoted items, who are cognizant of the industry and industry standards. Bidders shall provide the following information in the bid submittal form:

Name of contact

Company's main phone number

Company's facsimile

Contact phone number if different from company's phone number

E-mail address and cellular number (if applicable) for Primary (required)

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. and 5:00 P.M. (Eastern Standard Time).

#### 2.4 "EQUAL" PRODUCT CAN BE CONSIDERED UPON RECEIPT OF SPECIFIED DATA

The manufacturer's name, brand name and/or model number information contained in this solicitation are being used for the sole purpose of establishing the minimum requirement of level of quality, standard of performance, and design and is in no way intended to prohibit the offer of another manufacturer's items of equal material unless otherwise indicated on the Bid/Proposal Submission Form.

This specific solicitation requires submission of the following documentation to enable County evaluation of "equal" products:

2.4.2 The County will be sole judge of equality, based on the best interests of the County, and its decision in this regard will be final. Items labeled "No Substitute" on the County's Bid Submission Form are the only products that will be accepted under this solicitation.
Can your firm provide an "equal" product? Yes No
2.5 BACK ORDERS MUST BE FILLED WITHIN (10) CALENDAR DAYS  If the Bidder cannot deliver an ordered item in accordance with the scheduled delivery date due to a current existing backorder of that item with the bidder's manufacturer or distributor; the bidder shall insure that such back orders are filled within ten calendar days from the initial scheduled delivery date for the item. The bidder shall not invoice the County for back ordered items until such back orders are delivered and accepted by the County's authorized representative. It is understood and agreed that the County may, at its discretion, verbally cancel back orders after the grace period identified in this paragraph has lapsed, seek the items from another bidder, and charge the incumbent bidder under this contract for any re-procurement costs. If the bidder fails to honor these re-procurement costs, the County may terminate the contract for default.
2.6 DELIVERY REQUIREMENTS  Bidder shall make deliveries within the number of days specified in the RFQ. All deliveries shall be made in accordance with good commercial practice and shall be adhered to by the Bidder; except in such cases where the delivery will be delayed due to acts of nature, strikes, or other causes beyond the control of the Bidder. In these cases, the Bidder shall notify the County of the delays in advance of the original delivery date so that a revised delivery schedule can be appropriately considered by the County.  Should a Bidder, to whom a contract is awarded, fail to deliver within the time period specified in the purchase order or after any negotiated delivery date has lapsed, the County reserves the right to cancel the order. If the order is cancelled, it is hereby understood and agreed that the County has the authority to purchase the goods elsewhere and to charge that Bidder with any re-procurement costs; the County may terminate the Bidder from the prequalification pool for default.  Certain County employees may be authorized in writing to pick-up materials under this pool document. Bidders shall require presentation of this written authorization and shall maintain a copy of the authorization. If the Bidder is in doubt about any aspect of material pick-up, Bidder shall contact the appropriate user department to confirm the authorization.

## Can your firm satisfy the delivery requirements? Yes \_\_\_\_\_ No \_\_\_\_

2.7 PACKING SLIP/DELIVERY TICKET

Bidders shall enclose a complete packing slip or delivery ticket with any items to be delivered in conjunction with this bid solicitation. The packing slip/ delivery ticket shall be attached to the shipping carton(s) which contain the items

and shall be made 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.

The first state of the state of
Can your firm satisfy the packing slip/delivery ticket requirements? Yes No
2.8 ACCEPTANCE OF PRODUCT BY THE COUNTY  The products to be provided hereunder shall be delivered to the County, and maintained if applicable to the contract, in full compliance with the specifications and requirements set forth in this contract. If a Bidder-provided product is determined to not meet the specifications and requirements of this contract, either prior to acceptance or upon initial inspection, the item(s) will be returned to the Bidder at Bidder's expense. At the County's own option, the Bidder shall either provide a direct replacement for the item, or provide a full credit for the returned item. The Bidder shall not assess any additional charge(s) for any conforming action taken by the County under this clause.
2.9 EXEMPTION TO CERTAIN CLAUSES  The following clauses are not applicable to this RTQ as well as subsequent RFQ issued to pre-qualified Bidders:
Section 1, Paragraph 1.22 Insurance Requirements. Section 1, Paragraph 1.31, Health Insurance Portability and Accountability Act (HIPPA). Section 1, Paragraph 1.32, Charter County Transit System Sales Surtax Section 1, Paragraph 1.46, Specialty Security Requirements at Miami-Dade Aviation, Water and Sewer, Transit and Seaport Departments.
RFQs issued off this RTQ may be done by federally funded agencies, including Public Housing and Community Development Department. As federally funded agencies, certain clauses within this request to qualify will not apply to subsequent RFQs:
Section 1, Paragraph 1.11 (Local Preferences), Section 1, Paragraph 1.28 (Office of the Inspector General Fee), Section 1, Paragraph 1.36 (County User Access Program-UAP), Section 1, Paragraph 1.44 (Small Business Contract Measures), Section 1, Paragraph 1.45 (Local Certified Service-Disabled Veteran's Business Enterprise Preference).
2.10 COMPLIANCE WITH FEDERAL REGULATIONS DUE TO USE OF FEDERAL FUNDING  Since the goods, services, that will be acquired under this solicitation will be purchased, in part or in whole, with federal funding, it is hereby agreed and understood that Section 60-250.4, Section 60-250.5 and Section 60-741.4 of Title 41 of the United States Code, which addresses Affirmative Action requirements for disabled workers, is incorporated into this solicitation and resultant contract by reference.
SECTION 3 – TECHNICAL SPECIFICATIONS
3.1 SCOPE OF WORK  This RTQ will establish a pool of pre-qualified Bidders for future pricing competition through spot market quotes to provide ID cards, printers, supplies and accessories for various Miami-Dade County departments.  The below sample items for this RTQ shall include, but are not limited to, the following:  Laminated ID Pouches  Accessories for ID Pouches  Edisure Printers, Ribbons and Transfer Film  ID Cards

Can your firm satisfy the scope of work?

Yes \_\_\_\_ No \_\_\_\_

### **Contractor Qualifications Questionnaire**

provide the aforementioned g line on the left side of this qu	st SBD in identifying the qualified contractors that can ood(s)/service(s). Indicate yes "Y" or no "N" on the empty uestionnaire and forward it completely filled out to this e-gov or via fax (305) 375-3160 attention Mr. Tyrone White.
	has experience completing projects with a similar size neets the requirements of the PROPOSER (if any) and quired.
PRIME/SUB DOES NO and/or services required by	OT have experience providing the required good(s) this solicitation.
I certify that to the best of n	ny knowledge all the information provided is verifiable and correct.
Name of Firm:	Certification #:
Representative's Name:	
Title:	Signature:
Please respond by <b>4:00</b> I	PM, Friday, October 9, 2015.
Any questions, feel free to contac	et 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

## SIMILAR PROJECTS AS PRIME OR SUB-CONTRACTOR

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 #:	()	<b>-</b>	/		
Contract Amount:	\$				
Scope of Service(s	):				
Project Title: Client Name: Contact #: Contract Amount: Scope of Service(s	\$				
REASONS & COMMENTS					