Georgia's First Consolidated Government



### FINANCE DEPARTMENT

PURCHASING DIVISION

100 TENTH STREET, P. O. BOX 1340 COLUMBUS, GEORGIA 31902-1340 706-653-4105, FAX 706-225-3033

### Date: May 16, 2018

| REQUEST<br>FOR BIDS: | Qualified vendors are invited to submit sealed bids, subject to conditions and instructions as specified, for the furnishing of:   |
|----------------------|--|
| RFB NO:<br>18-0057   | COLOR PHOTOCOPIERS<br>(ANNUAL CONTRACT)  |
| GENERAL<br>SCOPE     | Provide, repair and maintain color photocopiers which will be utilized by multiple Departments within the Columbus Consolidated Government at various City locations.  |
|                      | June 13, 2018 – 2:30 PM (EST)  |
| DUE DATE             | Bids must be received and date/time stamped on or before the due date by the Finance Department/Purchasing Division, 5 <sup>th</sup> Floor – Government Center, 100 10 <sup>th</sup> St, Columbus, GA. Bids will be opened during the 3:00 PM hour in the Conference Room of the Purchasing Division. Bidders are not required, but are invited, to attend the bid opening.                                      |
|                      | IMPORTANT INFORMATION  |
| ADDENDA              | Any and all addenda will be posted on the Purchasing Division's web page, at <a href="https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm">https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm</a> . It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a quote. |
| NO BID<br>RESPONSE   | Refer to the form on <b>page 3</b> if you are not interested in this invitation.   |



Andrea J. McCorvey Purchasing Manager

### IMPORTANT INFORMATION e-Notification

*Effective December 31, 2014,* Columbus Consolidated Government (the City) discontinued mailing postcard notifications to its registered vendors. The City is using the Georgia Procurement Registry e-notification system. You must register with the Team Georgia Market Place/Georgia Procurement Registry to receive future procurement notifications via

http://doas.ga.gov/state-purchasing/suppliers/gettingstarted-as-a-supplier

If you have any questions or encounter any problems while registering, please contact the Team Georgia Marketplace Procurement Helpdesk:

Telephone: 404-657-6000Fax:404-657-8444Email:procurementhelp@doas.ga.gov

|   | STATEMENT OF "NO BID"  |  |  |  |  |
|---|--|--|--|--|--|
| <u>Complete</u>                               | Complete and return this form immediately if you do not intend to Bid:   |  |  |  |  |
| Email:<br>Fax:<br>Mail:                       | bidopportunities@columbusga.org<br>(706) 225-3033, Attn: Heather Scheuttig, Buyer<br>Columbus Consolidated Government<br>Purchasing Division<br>P. O. Box 1340<br>Columbus, GA 31902-1340  |  |  |  |  |
| -   | undersigned decline to bid on your <b>RFB No. 18-0057</b> for <b>Color Photocopiers</b> for the reason(s):   |  |  |  |  |
| There<br>We a<br>We a<br>Spec<br>We a<br>Othe | Specifications too "tight", i.e. geared toward one brand or manufacturer only (explain below) There is insufficient time to respond to the Invitation for Bids. We do not offer this product or service. We are unable to meet specifications. We are unable to meet bond requirements. Specifications are unclear (explain below). We are unable to meet insurance requirements. Other (specify below) Remarks: |  |  |  |  |
|   | COMPANY NAME:  |  |  |  |  |
|   | AGENT:   |  |  |  |  |
|   | DATE:  |  |  |  |  |
|   | TELEPHONE NUMBER:  |  |  |  |  |
|   | EMAIL ADDRESS:   |  |  |  |  |
|   |  |  |  |  |  |

#### **GENERAL PROVISIONS**

**THESE GENERAL PROVISIONS SHALL BE DEEMED AS PART OF THE BID SPECIFICATIONS.** The provisions of the Procurement Ordinance for the Consolidated Government of Columbus, Georgia as adopted and amended by Council shall apply to all invitations for bids and award of all contracts and is specifically incorporated herein by this reference. A copy of the ordinance is on file in the Purchasing Division.

**1. TERM "CITY."** The term "City" as used throughout these documents will mean Consolidated Government of Columbus, GA.

2. **PREPARATION OF FORM**. Bid proposals shall be submitted on the forms provided by the City. All figures must be written in ink or typewritten. Figures written in pencil or erasures are not acceptable. However, mistakes may be crossed out, corrections inserted adjacent thereto, initialed in ink by the person signing the proposal. If there are discrepancies between unit prices quoted and extensions, the unit price will prevail. Failure to properly sign forms, in ink, will render bid incomplete.

**3. EXECUTION OF THE BID PROPOSAL**. Execution of the bid proposal will indicate the bidder is familiar and in compliance with all local laws, regulations, ordinances, site inspections, licenses, dray tags, etc.

**4. BID SUBMISSION. Bids must be submitted in a sealed envelope or package**. The exterior of the envelope or package must reference the bidder's name and address, the bid number, bid title, and must indicate the contents represent a "bid" or "no bid" submission. Failure to properly identify the bid submission may result in rejection of the bid.

5. BID DUE DATE. The bid submission must arrive in the Purchasing Division on or before the stated due date and time. Upon receipt, bids will be time and date stamped. Bids will remain sealed and secured until the stated due date and time for the bid opening.

6. BID OPENING. The Purchasing Division Manager or Purchasing staff appointee will open bids. The bid amount and other pertinent information as determined by the Purchasing Division Manager will be read and recorded. The bids as recorded at the bid opening represent draft tabulation and may include incorrect price extensions or transcription errors, and are subject to change if conflicting information is discovered during analysis of the bid responses. A bid tabulation will be made available to bidders after extensions have been checked and all other specification compliance has been determined. In the essence of time, bidders may not be allowed to review bids at the bid opening. However, bidders will be allowed to make appointments to review the bids at a later date.

7. LATE BIDS. It is the responsibility of the bidder to ensure bids are submitted by the specified due date and time. Bids received after the stated date and time will be returned, unopened, to the bidder. The official clock to determine the date and time will be the time/date stamp located in the Finance Department. All bids received will be time and date stamped by the official clock. The City will not be held responsible for the late delivery of bids due to the U.S. Mail Service, or any other courier service.

8. RECEIPT OF ONE SEALED BID. In the event only one sealed bid is received, no formal bid opening shall take place. First, the Purchasing Division shall conduct a survey of vendors to inquire of "no bid" responses and non-responsive vendors. If, from the survey, it is determined by the Purchasing Division that specifications need revision, the one bid received will be returned, unopened, to the responding vendor, with a letter of explanation and a new bid solicitation prepared. If it is determined that other vendors need to be contacted, the bid due date will be extended, and the one bid received will remain sealed until the new bid opening date. The vendor submitting the single bid will receive a letter of explanation. If it is determined the one bid received is from the only responsive, responsible bidder, then the bid shall be opened by the Purchasing Division Manager or designee, in the presence of at least one other witness. The single bid will be evaluated by the using agency for award recommendation.

**9. RECEIPT OF TIE BIDS**. In the event multiple responsive, responsible bidders are tied for the lowest price and all other terms and requirements are met by the all tied bidders, the award recommendation shall be as follows:

- a. Award to the local bidder, if one of the bidders has its principal place of business in Columbus, Georgia.
- b. If all or none of the bidders has its principal place of business in Columbus, Georgia, then award the bid to the bidder who has received the award previously.
- c. If neither bidder received the award previously, and neither of the tied bidders has its principal place of business in Columbus, Georgia, then the bid award shall be equally divided between the tied bidders.
- d. If it is not feasible to divide the award, and if all or none of the tied bidders has its principal place of business in Columbus, Georgia, and neither was awarded the bid previously, then all bids will be rejected and the bid will be re-advertised.

**10. RECEIPT OF MULTIPLE BIDS. Unless otherwise stated in the bid specifications, the City will accept one and only one bid per vendor.** Any unsolicited multiple bid(s) will not be considered. If prior to the bid opening, more than one bid is received from the same vendor, the following will occur: (1) the bidder will be contacted and required to submit written acknowledgment of the bid to be considered; (2) the additional bid(s) will be returned to the bidder unopened. If at the bid opening more than one bid is enclosed in a single bid package, the City will consider the vendor non-responsive and bids will be returned to the bidder.

**11. CONDITION AND PACKAGING.** Unless otherwise defined in the bid specifications, it is understood and agreed that any item offered or furnished shall be new, in current production and in first class condition, that all containers shall be new and suitable for storage or shipment, and that prices include standard commercial packaging.

**12. FREIGHT/SHIPPING/HANDLING CHARGES.** All freight, shipping, and handling charges shall be included in the bid price. The City will pay no additional charges.

13. CORRECTION OR WITHDRAWAL OF BID/CANCELLATION OF AWARDS. Corrections or withdrawals of inadvertently erroneous bids before or after bid opening, or cancellation of awards of contracts based on such bid mistakes may be permitted where appropriate. Mistakes discovered before bid opening may be modified or bid withdrawn by written notice received in the office of Purchasing prior to the time of the bid opening. After bid opening, no changes in bid prices or other provisions of bids prejudicial to the interest of the City or fair competition shall be permitted. In lieu of bid correction, a low bidder alleging a material mistake of fact may be permitted to withdraw its bid if the mistake is clearly evident, or if the bidder submits evidence that clearly and convincingly demonstrates that a mistake was made. All decisions to permit corrections or withdrawals of bids or to cancel awards or contracts based on bid mistakes will be supported by the written determination of the Purchasing Officer.

14. ADDENDA AND INTERPRETATIONS. If it becomes necessary to revise any part of this bid, a written addendum will be provided to all bidders. The City is not bound by any oral representations, clarifications, or changes made to the written specifications by City employees, unless such clarification or change is provided to the bidders in written addendum form from the Purchasing Officer. Bidders will be required to acknowledge receipt of the addenda (if applicable) in their sealed bid proposal. The vendor may provide an initialed copy of each addendum or initial the appropriate area on the bid form (pricing page). Failure to acknowledge receipt of the addenda (when applicable) will render bid incomplete. It is the bidder's responsibility to ensure that they have received all addenda.

**15. BID EVALUATION AND AWARD.** During the evaluation of bids, the City reserves the right to request clarification of bid responses and to request the submission of references, if deemed necessary for a complete evaluation of bid responses. Award will be made to the responsive and responsible bidder whose bid is most economical according to criteria designated in the solicitation. The determination of the lowest responsive and responsible bidder may involve all or some of the following factors: prices, conformity to specifications, financial ability to meet the contract, previous performance, facilities and equipment, availability of repair parts, experience, delivery promise, terms of payment, compatibility as required, other cost, and other objective and accountable factors, if any, (which are further described in the specifications). The City shall be the judge of the factors and will make the award in the best interest of the City.

**16. TIME FOR CONSIDERATION.** Bids must remain in effect for at least sixty (60) days after date of receipt to allow for evaluation.

**17. BID SECURITY AND PERFORMANCE BOND**. **Bid security (Bid Bond)** shall be required for all competitive sealed bids for construction contracts when the price is estimated by the Purchasing Officer to exceed \$10,000. Bid security shall be a bond provided by a surety company authorized to do business in the State, or in the form of a certified check. Such bonds may also be required on construction contracts under \$10,000 or other procurement contracts when circumstances warrant. Bid security shall be in an amount equal to at least five percent (5%) of the bid amount. The City will accept a copy of a bid bond at the bid opening. However, if a copy of a bid bond is submitted, the bidder must submit to the Purchasing Division the identical original document within five (5) days after the bid opening. If the original document is not received within the five (5) days, the bid will <u>not</u> be considered. When a construction contract is awarded in excess of \$25,000, the successful bidder will be required to furnish a **Performance Bond** executed by a surety company authorized to do business in the State. The performance bond shall be equal to one hundred percent (100%) of the price specified in the bid.

**18. SUBCONTRACTING**. Should bidder intend to subcontract all or any part of the work specified, name(s) and address(es) of sub-contractor(s) must be provided in bid proposal (use additional sheet if necessary). The bidder shall be responsible for subcontractor(s) full compliance with the requirements of the bid specifications. **THE** 

#### COLUMBUS CONSOLIDATED GOVERNMENT WILL NOT BE RESPONSIBLE FOR PAYMENTS TO SUBCONTRACTORS.

19. DISQUALIFICATION OF BIDDERS AND REJECTION OF BIDS. Bidders may be disgualified and rejection of bid proposals may be recommended by the City for any (but not limited) to the following reasons:

- (A) Receipt after the time limit for receiving bid proposals as stated in the bid invitation.
- (B) Any irregularities contrary to the General Provisions or bid specifications.
- (C) Unbalanced unit price or extensions.
- (D) Unbalanced value of items.
- (E) Failure to use the proper forms furnished by the Consolidated Government.
- (F) Failure to complete the proposal properly
- (G) Omission of warranty, product literature, samples, acknowledgment of addenda or other items required to be included with bid proposal.
- (H) Failure to properly sign forms in ink.

#### The City reserves the right to waive any minor informality or irregularity. The City reserves the right to reject any and all bids.

20. BRAND NAMES "OR EQUAL". Whenever in this invitation any particular material, process and/or equipment are indicated or specified by patent, proprietary or brand name of manufacturer, such wording will be deemed to be used for the purpose of facilitating description of the material, process and/or equipment desired by the City. It is not meant to eliminate bidders or restrict competition in any bid process. Any manufacturers' names, drawings, trade names, brand names, specifications and/or catalog numbers used herein are for the purpose of description and establishing general quality levels. Bidders may propose equivalent equipment, services or manufacturer. Any proposal that is equivalent to or surpasses stated specifications will be considered. Determination of equivalency shall rest solely with the City. Please Note: Due to existing equipment, specific manufacturers may be required to facilitate compatibility.

21. ASSIGNMENT OF CONTRACTUAL RIGHTS. It is agreed that the successful bidder will not assign, transfer. convey or otherwise dispose of the contract or its right, title or interest in or to the same, or any part thereof, without previous consent of the City and any sureties.

22. DISCOUNTS. Terms of payments offered will be reflected in the space provided on the bid proposal form. Cash discounts will be considered net in the bid evaluation process. All terms of payment (cash discounts) will be taken and computed from the date of delivery of acceptable material or services, or the date of receipt of the invoice, whichever is later.

23. TAXES. The City is exempt from State Retail Tax and Federal Excise Tax. Tax Exemption No. GA Code Sec. 48-8-3. Federal ID No. 58-1097948.

24. FEDERAL, STATE AND LOCAL LAWS. All bidders will comply with all Federal, State, and Local laws and ordinances, relative to conducting business in Columbus, Georgia.

When bid inclusions are required, such as warranty information, product 25. BID INCLUSIONS. literature/specifications, references, etc. The inclusions should reference all aspects of the specific equipment or service proposed by the bidder. Do not include general descriptive catalogs. References to literature or other required inclusions submitted previously do not satisfy this provision. Bids found to be in non-compliance with these requirements will be subject to rejection.

26. NON-COLLUSION. By signing and submitting this bid, bidder declares that its agents, officers or employees have not directly or indirectly entered into any agreements, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this bid. In the event, said bidder is found guilty of collusion, the company and agents will be removed from the City's bid list for one full year and any current orders will be canceled.

**INDEMNITY.** The successful bidder agrees, by entering into this contract, to defend, indemnify and hold 27. City harmless from any and all causes of action or claims of damages arising out or under this contract.

**DISADVANTAGED BUSINESS ENTERPRISE.** Disadvantaged Business Enterprises (minority or women 28. owned businesses) will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of race, color, creed, sex, sexual orientation, gender identity or national origin in consideration for an award. It is the policy of the City that disadvantaged business enterprises and minority

business enterprises have an opportunity to participate at all levels of contracting in the performance of City contracts to the extent practical and consistent with the efficient performance of the contract.

**29. AFFIRMATIVE ACTION PROGRAM - NON-DISCRIMINATION CLAUSE.** The City has an Affirmative Action Program in connection with Equal Employment Opportunities. The successful bidder will comply with all Federal and State requirements concerning fair employment and employment of the handicapped, and concerning the treatment of all employees, and will not discriminate between or among them by reason of race, color, age, religion, sex, sexual orientation, gender identity, national origin or physical handicap.

**30. AWARDS TO LOCAL BUSINESSES**. Except for construction contracts, awards will be made to responsive and responsible local businesses proposing a cost not more than two percent (2%) above the low bid or quote for contracts involving an expenditure of \$25,000.00 or less and made to responsive and responsible local businesses proposing a cost not more than one percent (1%) above the low bid or quote for contracts involving an expenditure greater than \$25,000.00. (Ordinance No. 95-5). **\*\*STATE OR FEDERALLY FUNDED PROJECTS EXCLUDED**\*\*

**31. RIGHT TO PROTEST.** A protest with respect to an Invitation for bids or Request for Proposals shall be submitted in writing no less than five (5) days **prior** to the opening of bids or the closing date of proposals to the Purchasing Officer. If the matter is not resolved, then an appeal may be filed with the City Manager or City Council.

**32.** FAILURE TO QUOTE. Vendors choosing not to submit a bid are requested to return a Statement of "No Bid".

**33. PRODUCT/EQUIPMENT DEMONSTRATION - SITE VISIT.** During the evaluation of bids, the City reserves the right to request a demonstration or site visit of the product, equipment or service offered by a bidder. The demonstration or site visit shall be at the expense of the bidder. Bidders who fail to provide demonstration or site visit, as requested, will be considered non-responsive.

**34. CANCELLATION PROVISIONS.** When such action is in the best financial interest of the City, contracts for supplies to be purchased or services to be rendered under an annual (term) contract basis may be canceled and readvertised at the discretion of the Purchasing Officer and in accordance with contract terms.

After the receipt of a product or piece of equipment, it is found that said item does not perform as specified and required, payment for said product or equipment will be withheld. The successful vendor will be notified of the non-performance in writing. After notification, the successful vendor will have ten (10) calendar days, from the date of notification, to deliver product or equipment that performs satisfactorily. If a satisfactory product is not delivered within 10 calendar days, from the notification date, the City will cancel the contract (purchase order) and award to the next low, responsive, responsible bidder. The vendor will be responsible for the pick-up or shipment of the unsatisfactory equipment or product.

**35. QUESTIONS.** Questions concerning specifications must be submitted, in writing, at least 5 (five) working days (Monday-Friday) prior to receipt date. Questions received less than five working days prior to receipt date will not be considered.

**36. SAMPLES.** When samples are required to be included with the proposal response, the bidder will be responsible for the following:

1) **Unless otherwise specified**, bidders are required to submit exact samples of item(s) bid. Do not submit sample of "like" item(s).

2) Affix an identification label to each individual sample to include bidder's name, bid name and number.

3) Make arrangements for the return of sample after the bid award. All shipping costs will be the responsibility of the bidder. If bidder does not make arrangements for return of sample, within 60 days after award, the sample will be discarded.

**37. GOVERNING LAW.** The parties agree that this Agreement shall be governed by the laws of Georgia, both as to interpretations and performance.

**38. PAYMENT DEDUCTIONS.** The City reserves the right to deduct, from payments to awarded vendor(s), any amount owed to the City for various fees, to include, but not limited to: False Alarm fees, Ambulance fees, Occupation License Fees, Landfill fees, etc.

**39. PAYMENT TERMS.** The City's standard payment term is usually net 30 days, after successful receipt of goods or services. Payment may take longer if invoice is not properly documented or not easily identifiable, goods/services are not acceptable, or invoice is in dispute.

#### NOTICE TO VENDORS

Columbus Council, by Ordinance 92-60 has prohibited any business that is owned by any member of Columbus Council or the Mayor, or any business in which any member of Columbus Council or the Mayor has a substantial pecuniary interest from submitting a bid for goods or services to the Consolidated Government of Columbus, Georgia.

Likewise, by Ordinance 92-61, no business which is owned by any member of any board, authority or commission, subordinate or independent entity, or any business in which any member of any board, authority or commission, subordinate or independent entity has substantial pecuniary interest may submit a bid to the Consolidated Government if such bid pertains to the board, authority or commission.

### DO YOU HAVE QUESTIONS, CONCERNS OR NEED CLARIFICATION ABOUT THIS SOLICITATION?

### COMMUNICATION CONCERNING ANY SOLICITATION CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITTEN FORM AND ADDRESSED TO THE PURCHASING DIVISION.

ALL QUESTIONS OR CLARIFICATIONS CONCERNING THIS SOLICITATION SHALL BE SUBMITTED IN WRITING. THE CITY WILL NOT ORALLY OR TELEPHONICALLY ADDRESS ANY QUESTION OR CLARIFICATION REGARDING BID/PROPOSAL SPECIFICATIONS. IF A VENDOR VISITS OR CALLS THE PURCHASING DIVISION WITH SUCH QUESTIONS, HE OR SHE WILL BE INSTRUCTED TO SUBMIT THE QUESTIONS IN WRITING.

### ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. BIDDERS SHALL NOT CONTACT CITY EMPLOYEES, DEPARTMENT HEADS, USING AGENCIES, EVALUATION COMMITTEE MEMBERS OR ELECTED OFFICIALS WITH QUESTIONS OR ANY OTHER CONCERNS ABOUT THE SOLICITATION. QUESTIONS, CLARIFICATIONS, OR CONCERNS SHALL BE SUBMITTED TO THE PURCHASING DIVISION IN WRITING. IF IT IS NECESSARY THAT A TECHNICAL QUESTION NEEDS ADDRESSING, THE PURCHASING DIVISION WILL FORWARD SUCH TO THE USING AGENCY, WHO WILL SUBMIT A WRITTEN RESPONSE.

THE PURCHASING DIVISION WILL FORWARD WRITTEN RESPONSES TO THE RESPECTIVE BIDDER OR IF IT BECOMES NECESSARY TO REVISE ANY PART OF THIS SOLICITATION, A WRITTEN ADDENDUM WILL BE ISSUED TO ALL BIDDERS.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE BIDDERS IN A WRITTEN ADDENDUM FROM THE PURCHASING MANAGER.

BIDDERS ARE INSTRUCTED TO USE THE ENCLOSED "QUESTION/CLARIFICATION FAX FORM" TO FAX OR EMAIL QUESTION.

ANY REQUEST, AFTER A SOLICITATION HAS CLOSED AND PENDING AWARD, MUST ALSO BE SUBMITTED IN WRITING TO THE PURCHASING DIVISION.

### QUESTION/CLARIFICATION FORM

DATE:

TO: Heather Scheuttig, Buyer Email : <u>bidopportunities@columbusga.org</u> Fax : (706) 225-3033

RE: Color Photocopiers (Annual Contract); RFB No. 18-0057

Questions/clarification requests must be submitted at least (5) *business* days before the due date:

| From |                  |   |            |               |     |  |
|------|------------------|---|------------|---------------|-----|--|
|      | Company Name     | V | Website    |               |     |  |
|      |                  |   |            |               |     |  |
|      | Representative   | I | Email Addı | * <b>A</b> SS |     |  |
|      | Representative   | 1 |            | 1035          |     |  |
|      |                  |   |            |               |     |  |
|      | Complete Address | ( | City       | State         | Zip |  |
|      |                  |   |            |               |     |  |
|      | Telephone Number | I | Fax Numbe  | ar .          |     |  |
|      | relephone Number | 1 |            | /1            |     |  |
|      |                  |   |            |               |     |  |

### GENERAL SPECIFICATIONS COLOR PHOTOCOPIERS (ANNUAL CONTRACT) RFB No. 18-0057

### I. SCOPE OF WORK

A. The Consolidated Government of Columbus, Georgia (the City) invites bidders to submit bid responses to provide, repair and maintain color copiers on a rental basis. The color photocopiers will be utilized by multiple Departments within the Columbus Consolidated Government at various City locations.

# B. The City will enter into contract only with the vendor submitting a response to this RFB. The City will submit payments only to the vendor submitting the bid. The City will not accept or sign a third-party finance/lease agreement for any part of the proposed equipment.

- C. The City reserves the right to add, or remove, color photocopiers from this contract at any time.
- D. All lease/rental agreements shall end when this contract ends.

### II. TERM OF CONTRACT

A. The term of the contract shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods.

Notice of intent to renew will be given to the contractor in writing by the City Purchasing Division Director, normally sixty days before the expiration date of the current contract. This notice shall not be deemed to commit the City to a contract renewal.

It should be noted that multi-year contracts may be continued each fiscal year only after funding appropriations and programs approval have been granted by the Council of the Consolidated Government of Columbus, GA. In the event the necessary funding is not approved, the affected multi-year contract becomes null and void, effective July 1<sup>st</sup> of the fiscal year for which such approval has been denied.

### **B.** Termination for Convenience

For the protection of both parties, either party giving 30 days' prior notice in writing to the other party may cancel this contract.

### III. ESCALATION CLAUSE

Contract pricing shall remain fixed for the initial two (2) year(s) term of the contract. After the initial term, Contractor may request a price escalation by submitting a fully documented request for a review of the pricing. Such escalation shall not exceed a 5% increase. Price escalation requests must be submitted by January 30<sup>th</sup> so as to allow Departments to factor the increases into their budgets for the next fiscal year, which will begin July 1.

The Using agency(cies) and Purchasing Manager will review the request and shall approve or disapprove the increases based on budget constraints and other price

## comparisons. If approved, the price increase shall not commence until the next fiscal year, which will begin July 1.

If for any reason the contractor has a price increase that exceeds five percent (5%), the price increase will be evaluated on a case-by-case basis. The City and the Contractor will have the option to discuss and make adjustments to the requested increase. If either party declines approval of the adjustments, the contract will be considered cancelled on the scheduled expiration date of the contract.

### IV. BRAND NAME DISCLOSURE

It is not the intent of Columbus Consolidated Government (City) to restrict competition in any purchasing process. Any manufacturers' names, drawings, trade names, brand names, information and/or catalog numbers used herein are for purpose of description and establishing general quality levels. Such references are not intended to be restrictive; any equivalent products of any manufacturer may be offered. Any bid that is equivalent to or surpasses these specifications will be considered; determination of equivalency shall rest solely with the City.

### V. COOPERATIVE CONTRACT PURCHASE OPTION

The City reserves the right to make this purchase via any comparable Cooperative Contract, if the contract cost is lower and meets the City's requirements.

### VI. QUESTIONS/ADDENDA

Questions and requests for clarification must be submitted **within five (5) business days** of the due date (see pages 9 & 10). Changes to the specifications (if any) will be provided in the form of an addendum, which will be posted on the web page of the Finance Department/Purchasing Division of Columbus Consolidated Government at <u>https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid\_Opportunities.ht</u> <u>m</u>. It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a quote.

### VII. INSURANCE

The contractor shall be required, at their own expense, to furnish to the City of Columbus Purchasing Division, evidence showing the insurance coverage to be in force throughout the term of the contract. Insurance requirements are listed on the attached **Insurance Checklist (Form C). The limits shown are minimum limits. Vendor shall indicate the actual limit they will provide for each insurance requirement. The bidder shall complete the Insurance Checklist and include with bid response. Certificate of Insurance is acceptable.** The Insurance Checklist will indicate to the City, the bidder's ability and agreement to provide the required insurance, in the event of contract award.

The successful candidate shall provide the required Certificates of Insurance within <u>10</u> <u>business days</u> after award notification. The Certificates of Insurance will be included with the contract documents prior to signing.

### VIII. GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT/E-VERIFY

In accordance with the Georgia Security and Immigration Compliance Act/E-Verify, every public employer, every contractor of a public employer, and every subcontractor of a public employer's contractor must register and participate in a federal work authorization

program (see <u>http://www.dol.state.ga.us/spotlight/sp\_sb\_529\_new\_rules.htm</u>). To access your E-Verify Company Identification Number, see <u>https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES</u>. A properly completed, notarized E-Verify Affidavit **(Form D)** must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.

### IX. INDEMNIFICATION

The Contractor covenants to save, defend, hold harmless, and indemnify the City, and all of its officers, departments, agencies, agents, and employees (collectively the "City") from and against any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees), charges, liability, or exposure, however caused, resulting from, arising out of, or in any way connected with the Contractor's intentional, negligent, or grossly negligent acts or omissions in performance or nonperformance of its work called for by the Contract Documents.

### X. BID SUBMISSION REQUIREMENTS:

Each bidder shall include the following information with bid submission. Bidder shall submit **THE ORIGINAL AND 1 IDENTICAL COPY(IES)**. The City reserves the right to request any omitted information, <u>WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE</u>. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information (*to exclude E-Verify*). If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete":

- A. Bid Form (Form E)
- B. Bidder's Response Page (Form A)
- C. Client Work History (Form B)
- C. Insurance (Refer to page 12, section VII, regarding Form C)
- D. E-Verify/GSICA Form (Refer to page 12, Section VIII, regarding Form D)
- E. Product Literature
- F. Product Warranty
- G. Sample Invoice
- H. Sample Lease/Rental Agreement
- I. Contract Signature Page (Form F)
- **J. Addenda:** Vendors must include acknowledgment of receipt of addenda (**if any**) in their sealed bid. Provide an initialed copy of each addendum or initial the appropriate area on bid form (pricing page). Addenda will be posted at

<u>https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid\_Opportunities.htm</u>. Vendors are responsible for periodically visiting the web page, to check for addenda, prior to the bid due date and before submitting a bid.

THE FOLLOWING ITEMS WILL BE REQUIRED OF THE AWARDED VENDOR(S) PRIOR TO CONTRACT SIGNING OR ISSUANCE OF PURCHASE ORDER. AFTER NOTIFICATION, THE AWARDED VENDOR(S) WILL HAVE FIVE (5) BUSINESS DAYS TO PROVIDE THE INFORMATION BELOW, OR THE NEXT RESPONSIVE, RESPONSIBLE BIDDER WILL BE RECOMMENDED FOR AWARD.

1) **Business License:** Vendors located in Muscogee County shall submit a current <u>copy</u> of their City of Columbus Business License (Occupation License). If the business is not located in Muscogee County and has proof of being properly licensed by a municipality in Georgia, and paid applicable occupation taxes in that city, the vendor will not be required to pay occupation taxes in Columbus, Georgia.

If the business location is not in Georgia, vendor must provide a current copy of their active

Articles of Incorporation from the State and/or a current business license from the City/State in which business is located.

If you have questions regarding this requirement, please contact Yvonne Ivey, Revenue Manager: 706-225-3091.

### 2) W-9 Request for Taxpayer Identification Number and Certification (Form E)

Bids must be delivered <u>sealed</u> in an envelope or package. The envelope or package should reference the bidder's name, full address and the bid number and/or bid name. Mail or hand-deliver bid to:

Columbus Consolidated Government Purchasing Division **RE: RFB No. 18-0057– Color Photocopiers (Annual Contract)** 

 (Mail) P. O. Box 1340 Columbus, GA 31902-1340
 (Deliver) 5<sup>th</sup> Floor – Finance Department 100 10<sup>th</sup> Street Columbus, Georgia 31901

BIDS MUST REACH THE OFFICE OF THE PURCHASING DIVISION <u>NO LATER THAN 2:30</u> <u>PM</u> ON BID OPENING DATE. BIDS RECEIVED AFTER 2:30 PM WILL NOT BE ACCEPTED UNDER ANY CIRCUMSTANCES.

### XI. AWARD/DELIVERY/INVOICE

- A. <u>Award</u>: This contract will be awarded in total to the lowest responsive, responsible bidder. The City will be the judge of the factors and will make the award accordingly.
- C. <u>Delivery</u>: The copiers(s) shall be delivered to the location indicated. All shipping, delivery and/or freight charges must be included in the Unit Price. Columbus Consolidated Government will pay no additional shipping, delivery, and/or freight charges.
- D. <u>Invoices</u>: The invoice(s) shall reference department/location of color photocopier and the bid number (RFB No. 18-0057) and the service provided. The successful vendor shall forward invoice(s) to the following address:

Columbus Consolidated Government Accounting Division P. O. Box 1340 Columbus, Georgia 31902-1340

### XII. TERMINATION OF CONTRACT

A. Default: If the contractor refuses or fails to perform any of the provision of this contract with such diligence as will ensure its completion within the time specified in this contract, or any extension thereof, otherwise fails to timely satisfy the contract provisions, or commits any other substantial breach of this contract, the Purchasing Division Director may notify the contractor in writing of the delay or non-performance and if not cured within ten (10) days or any longer time specified in writing by the Purchasing Division Director, such director may terminate the contractor's right to proceed with the contract or such part of the contract as to which there has been delay or a failure to properly perform.

In the event of termination in whole or in part the Purchasing Division Director may procure similar supplies or services, from other sources, in a manner and upon terms deeded appropriate by the Purchasing Division Director. The contractor shall continue performance of the contract to the extent it is not terminated and shall be liable for excess costs incurred in procuring similar goods or services.

B. Compensation: Payment for completed services delivered and accepted by the City shall be at the contract price. The City may withhold from amounts due the contractor such sums as the Purchasing Division Director deem necessary to protect the City against loss because of outstanding liens or claims of former lien holders and to reimburse the City for the excess costs incurred in procuring similar goods and services.

C. Excuses for Nonperformance or Delayed Performances: Except with respect to defaults of subcontractors, the contractor shall not be in default by reason of any failure in performance of this contract in accordance with its terms, if the contractor has notified the Purchasing Division Director within 15 days after the cause of the delay and the failure arises out of causes such as: acts of God; acts of public enemy; acts of the City and any other governmental entity in its sovereign or contractual capacity; fires; floods; epidemics; quarantine restrictions; strikes or other labor disputes; freight embargoes; or unusually severe weather. If the failure to perform is caused by the failure of a subcontractor to perform or to make progress, and if such failure arises out of causes similar to those set forth above, the contractor shall not be deeded in default, unless the supplies or services to be furnished by the subcontractor were reasonably obtainable from other sources in sufficient time to permit the vendor to meet the contract requirements.

Upon request of the vendor, the Purchasing Division Director shall ascertain the facts and extent of such failure, and, if such director determines that any failure to perform was occasioned by any one or more of the excusable causes, and that, but for the excusable cause, the contractor's progress and performance would have met the terms of the contact, the delivery schedule shall be revised accordingly.

### DETAILED SPECIFICATIONS COLOR PHOTOCOPIERS (ANNUAL CONTRACT) RFB No. 18-0057

### I. VENDOR REQUIREMENTS

This service shall include high quality, responsive repair/maintenance services, all replacement consumables (including the toner), all replacement parts (minor or major), and labor. This service will be in the form of an annual contract payable in twelve (12) monthly payments.

- A. The unit(s) offered shall have all of the following, but are not limited to these capabilities:
  - 1. Enlarge/Reduce copies from 50% reduction to 400% (multi-page) enlargement.
  - 2. Able to print on 20lb Bond Paper up to Card Stock (Approx. 110lbs.)
  - 3. Interface with existing computers to enable color printing of electronic media. (Note: Interface server MUST have at least 1 Gigabyte RAM Memory on board and large capacity hard drive for spooling)
  - 4. Prints double sided copies.
  - 5. Has at least 600 dpi print quality 600 x 1800).
  - 6. Standard paper sizes ranging from 8 1/2 x11" to 11"x17".
  - 7. Minimum color copy production speed of 45 ppm (Print Shop 70 ppm).
  - 8. Copier shall be equipped with an automatic document feeder; capability for multiple stacking (sorting); 2000 sheet 8 ½ x 11" larger capacity paper deck.
  - 9. Gigabit ethernet network interface.
  - 10. Scan to email, to folder and media.
  - 11. Secure printing features such as "locked secure print".
  - 12. High capacity paper storage for at least 2000 sheets.
  - 13. 1000 sheet finisher with standard stapling, sorting and collating.
- B. Required service response time will be 24 hours. For example, service calls placed on Monday will be worked no later than Tuesday. In the event the machine cannot be repaired on sight in two days, it will require a replacement machine.
- C. The successful bidder shall install <u>new equipment upon award of the contract</u>. Any upgrades or additions during the term of the contract can be refurbished/rebuilt equipment.
- D. The successful bidder will train City personnel, as required during the life of the contract or any extension, as key operators at the equipment installation, in the proper use and care of the equipment.
- E. The copier must interface with existing computers network via gigabit ethernet.
- F. The estimated yearly copy volume on the color copier will be approximately 120,000 copies on 8 ½" x 11", and 10,000 copies on 11"x17". The monthly copy volumes are approximately 10,000 copies. The volume stated herein is given as a general guide for bidding. The City reserves the right to increase or decrease

copies at any time. The City will pay a per copy cost each month; we will not pay a guaranteed minimum monthly cost.

- G. The average run length varies between 15 minutes to an hour per use.
- H. The average percent of volume on heavier stocks is approximately 10%
  - Two-sided approximately 40%
  - Large format 55%
  - Maximum intended paperweight for two-sided copying approximately 110 lb. (card stock)
- I. All computers are using the operating system Windows 10 Enterprise.
- J. Minimum acceptable speed for color copy production is 45 PPM (pages per minute). Due to the increase in color copies, the **Print Shop** will require a faster print speed (70ppm).

### II. VENDOR INFORMATION

- A. The City will not enter into contract with a third-party finance company under any circumstances. The City will only deal with, enter into contract and submit payment(s) to an established dealer that will service and provide the requested product.
- B. Units offered under this advertisement shall be new, standard production of the latest Design in current production. Material shall be good commercial quality for the intended service and shall be produced by use of current manufacturing processes. Material shall be treated to resist rust, corrosion and wear. Component shall be manufacturer's heaviest duty, current production model and not modified for bid purposes.
- C. To describe the firm, its experience and service, bidders must respond to the vendor information listed on **Form A**.
- D. Bidders may provide additional information, which would assist in describing the firm and its abilities. However, if the specific questions and requests for information cited on Form A are not addressed, the response will be considered incomplete.

### III. CURRENT COPIER LISTING

Below are the color photocopiers currently in place and the property of the current contractor, which will be removed to fulfill the requirements of the new contract.

A. Print Shop:

Canon imageRunner Advance C7065 (2 machines) (Note: The Print Shop requests to upgrade to the Canon imageRunner Advance C7500 II Series, or equivalent).

- B. Engineering: Canon imageRunner Advance C5045 (2 machines)
- C. Planning: Canon imageRunner Advance C5045 (1 machine)
- D. Public Works:

Canon imageRunner Advance C2230 (1 machine)

The awarded contractor must install the machines as requested in the RFB specifications (Detailed Specifications, page 16, section I. Vendor Requirements). The City reserves the right to add or remove machines and/or departments throughout the course of this contract.

### IV. UPGRADES AND ADD-ONS

During the course of the contract, the City reserves the right to upgrade existing copiers and/or add additional copiers, if the requirements and usage dictate the need, which may increase or decrease volume. All lease/rental agreements shall end when this contract ends.

### V. INSTALLATION

After award notification from the City, Contractor shall coordinate the installation date of proposed copiers with the Print Shop (Parish Green – <u>pgreen@columbusga.org</u>), Engineering (Donna Newman – <u>dnewman@columbusga.org</u>), Planning (Rick Jones – <u>rjones@columbusga.org</u>), and Public Works (Don Osborne – <u>osborne.donald@columbusga.org</u>).

### VI. MAINTENANCE

Qualified Contractor maintenance personnel shall perform equipment maintenance on copier and all copier accessories during regular office hours. Regular hours vary, but are generally 8:00 AM to 5:00 PM, Monday through Friday. The Contractor is not required to provide services on the following recognized holidays: New Year's Day; Martin Luther King Day; Memorial Day; Independence Day; Labor Day; Columbus Day; Veteran's Day; Thanksgiving and the day after Thanksgiving; Christmas Day; and any other day the City may acknowledge as a holiday.

### VII. DAMAGES

Damage due to fire, rain, abuse or vandalism will be the responsibility of the Consolidated Government of Columbus and will not be covered under this contract. Such damage is to be reported to the User Department for appropriate action.

### VIII. COPY ALLOWANCE

Contactor will develop a suitable method for recording the number of bad copies or copies run in the course of maintenance being performed.

### FORM A

### BIDDER'S RESPONSE PAGE COLOR PHOTOCOPIERS (ANNUAL CONTRACT) RFB NO. 18-0057

### VENDOR INFORMATION

A. The work to be accomplished under this Contract requires technical expertise. In reviewing proposals to determine who is the most responsive, responsible, qualified offeror, the City will take into consideration the extent to which the proposal conforms to the specifications and the qualifications of the offeror to satisfactorily implement the requirements of the Contract. The City specifically reserves the right to reject any proposals for which the offeror fails to demonstrate the ability to provide the service required in a responsible manner. The following information shall be provided to allow the City to determine whether the vendor is qualified to provide/perform the work specified. **This information must be notarized:** 

### PLEASE SUBMIT THE FOLLOWING INFORMATION ON FIRM'S LETTERHEAD.

- 1. Name of Offeror/Company
- 2. Permanent main office address
- 3. When organized
- 4. If a corporation, when/where incorporated
- 5. How many years have you been engaged in this type of service under your present company/trade name?
- 6. Offeror shall complete the Insurance Checklist (**Form C**) and include with bid response. A Certificate of Insurance is acceptable.
- 7. Number of qualified technicians currently employed in the Muscogee County area. How many copiers can one technician adequately service per month? Use this section to make any statement regarding training requirements, job qualifications, continuing education, etc., for service personnel. Resumes are not required, but you may submit brief job histories if desired, or point out in narrative form any particular accomplishments or qualifications which you feel would be representative of your firm's expertise and ability to perform the work.
- Provide three clients for which such services have been provided. The references shall include the business name, contact person, complete address, telephone/fax number, and number of copiers and technicians used to maintain the service (Form B).
- 9. Have you ever failed to complete a project and/or defaulted on a contract? If so specify when, where and with whom.
- 10. Have you ever been a party to or otherwise involved in any action or legal proceeding involving matters related to race, color, nationality or religion? If so, give full details.
- 11. Have you ever been accused of discrimination based upon race, color, nationality, or religion in any action or legal proceeding, including any proceeding related to any Federal or State Agency? If so, give full details.

The undersigned hereby authorizes and represents any person, firm or corporation to furnish any information requested by the Consolidated Government of Columbus, Georgia, in verification of the recitals comprising this Vendor's Information.

#### (Continued)

"Print" or "Type" Name of Bidder

Date

Signature of Offeror

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_, \_\_\_, 201\_\_ in \_\_\_\_\_(city), \_\_\_\_\_(state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 201\_\_.

NOTARY PUBLIC

My Commission Expires:



### CLIENT WORK HISTORY

| Company Name/Contact | Complete Address                  | Telephone/Fax<br>Numbers                                  |
|----------------------|-----------------------------------|---|
| 1.                   |                                   |   |
|                      |                                   |   |
| E-Mail Address:      | Number of Color Copiers provided: | Number of Technicians<br>assigned to provide<br>services: |

| Company Name/Contact | Complete Address                  | Telephone/Fax Number                         |
|----------------------|-----------------------------------|--|
| 2.                   |                                   |  |
|                      |                                   |  |
|                      |                                   |  |
|                      |                                   |  |
| E-mail Address:      | Number of Color Copiers provided: | Number of Technicians<br>assigned to provide |
|                      |                                   | services:                                    |

| Complete Address                  | Telephone/Fax Number                                      |
|-----------------------------------|---|
|                                   |   |
|                                   |   |
|                                   |   |
|                                   |   |
| Number of Color Copiers provided: | Number of Technicians<br>assigned to provide<br>services: |
|                                   | Complete Address Number of Color Copiers provided:        |

### FORM C

### SOLICITATION ID: RFB NO. 18-0057

### **COLOR PHOTOCOPIERS**

### (ANNUAL CONTRACT)

### **INSURANCE CHECKLIST**

### CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND ENDORSEMENTS INDICATED BY "X"

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

|   | <b>Required</b> Coverage(s)             | Limits                           | Bidders         |
|---|---|----------------------------------|-----------------|
|   |   | (Figures denote minimums)        | Limits/Response |
| Χ | 1. Worker's Compensation and            | STATUTORY                        |                 |
|   | Employer's Liability                    | REQUIREMENTS                     |                 |
|   | <b>Comprehensive General Liability:</b> |                                  |                 |
| Χ | 2. General Liability                    | \$1 Million CSL BI/PD each       |                 |
|   | Premises/Operations                     | occurrence, \$1 Million annual   |                 |
|   |   | aggregate                        |                 |
|   | 3. Independent Contractors and Sub      | \$1 Million CSL BI/PD each       |                 |
|   | - Contractors                           | occurrence, \$1 Million annual   |                 |
|   |   | aggregate                        |                 |
| Χ | 4. Products Liability                   | \$1 Million CSL BI/PD each       |                 |
|   |   | occurrence, \$1 Million annual   |                 |
|   |   | aggregate                        |                 |
|   | 5. Completed Operations                 | \$1 Million CSL BI/PD each       |                 |
|   |   | occurrence, \$1 Million annual   |                 |
|   |   | aggregate                        |                 |
| Χ | 6. Contractual Liability (Must be       | \$ 1 Million CSL BI/PD each      |                 |
|   | shown on Certificate)                   | occurrence, \$1 Million annual   |                 |
|   |   | aggregate                        |                 |
|   | Automobile Liability:                   |                                  |                 |
|   | -                                       |                                  |                 |
| Χ | 7. Owned/Hired/Non-Owned                | \$1 Million BI/PD each Accident, |                 |
|   | Vehicles/ Employer non-ownership        | Uninsured Motorist               |                 |
|   | Other:                                  |                                  |                 |
|   | 8. Miscellaneous Errors and             | \$1 Million per occurrence/claim |                 |
|   | Omissions                               | -                                |                 |
| Χ | 9. Umbrella/Excess Liability            | \$1 Million Bodily Injury,       |                 |
|   |   | Property Damage and Personal     |                 |
|   |   | Injury                           |                 |

| <b>Required</b> Coverage(s) |  | Limits   | Bidders         |
|-----------------------------|--|--|-----------------|
|                             |  | (Figures denote minimums)                                      | Limits/Response |
|                             | 10. Personal and Advertising Injury                                    | \$1 Million each offense, \$1                                  |                 |
|                             | Liability  | Million annual aggregate                                       |                 |
|                             | 11. Professional Liability   | \$1 Million per occurrence/claim                               |                 |
|                             | 12. Architects and Engineers   | \$1 Million per occurrence/claim                               |                 |
|                             | 13. Asbestos Removal Liability   | \$2 Million per occurrence/claim                               |                 |
|                             | 14. Medical Malpractice  | \$1 Million per occurrence/claim                               |                 |
|                             | 15. Medical Professional Liability                                     | \$1 Million per occurrence/claim                               |                 |
|                             | 16. Dishonesty Bond  |  |                 |
|                             | 17. Builder's Risk   | Provide Coverage in the full                                   |                 |
|                             |  | amount of contract   |                 |
|                             | 18. XCU (Explosive, Collapse,  |  |                 |
|                             | Underground) Coverage  |  |                 |
|                             | 19. USL&H (Long Shore Harbor   |  |                 |
|                             | Worker's Compensation Act)   |  |                 |
|                             | 20. Contractor Pollution Liability                                     | \$2 Million per occurrence/claim                               |                 |
|                             | 21. Environmental Impairment   | \$2 Million per occurrence/claim                               |                 |
|                             | Liability  |  |                 |
| Χ                           | 22. Carrier Rating shall be Best's Rating of A-VII or its equivalents  |  |                 |
| Χ                           | 23. Notice of Cancellation, non-renewal or material change in coverage |  |                 |
|                             | shall be provided to City at least 30 days prior to action.            |  |                 |
| Χ                           | 24. The City shall be named Addition                                   | 24. The City shall be named Additional Insured on all policies |                 |
| Χ                           | 25. Certificate of Insurance shall show                                | Certificate of Insurance shall show Bid Number and Bid Title   |                 |
|                             | 26. Pollution:   | \$2 Million per occurrence/claim                               |                 |

\*If offeror's employees will be using their privately-owned vehicles while working on this contract and are privately insured, please state that fact in the **<u>Bidders Limits/Response</u>** column of the insurance checklist.

### **BIDDER'S STATEMENT:**

If awarded the contract, I will comply with contract insurance requirements and provide the required Certificate(s).

BIDDER NAME:

| AUTH. SIGNATURE: |  |
|------------------|--|
|                  |  |

### \*\*\*COMPLETE THIS PAGE AND RETURN WITH BID \*\*\*

### **VENDOR INFORMATION REGARDING**

## GEORGIA SECURITY AND IMMIGRATION COMPLIANCE and

House Bill 87, also known as, The Illegal Immigration Reform and Enforcement Act of 2011

Section 3 of House Bill 87 amends O.C.G.A. §13-10-91. O.C.G.A. §13-10-91(b)(1) states, in part, "A public employer shall not enter into a contract ... for the physical performance of services unless the contractor registers and participates in the federal work authorization program."

## Accordingly, the affidavits on the pages that follow relate to documentation you must provide the City.

All contractors must complete the attached "CONTRACTOR AFFIDAVIT"\*\*\*\*. Additionally, if you utilize subcontractors, they must complete the "SUBCONTRACTOR AFFIDAVIT" and or the "SUB-SUBCONTRACTOR AFFIDAVIT."

\*\*\*In lieu of the affidavit required by this subsection, a contractor, subcontractor, or subsubcontractor who has no employees and does not hire or intend to hire employees for purposes of satisfying or completing the terms and conditions of any part or all of the original contract with the public employer shall instead provide a copy of the state issued driver's license or state issued identification card of such contracting party and a copy of the state issued driver's license or identification card of each independent contractor utilized in the satisfaction of part or all of the original contract with a public employer. A driver's license or identification card shall only be accepted in lieu of an affidavit if it is issued by a state within the United States and such state verifies lawful immigration status prior to issuing a driver's license or identification card.

Information is available at: <u>http://www.dol.state.ga.us/spotlight/sp\_sb\_529\_new\_rules.htm</u>

### FORM D

### "GEORGIA SECURITY AND IMMIGRATION COMPLIANCE" Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization number and date of authorization are as follows:

Company ID Number (*numerical, 4-7 digits*) Date of Authorization
\*\*See <u>https://e-verify.uscis.gov/emp/vislogin.aspx?JS=YES</u> to access your E-Verify Company Identification Number.

Date of Authorization

Name of Contractor

<u>Color Photocopiers (Annual Contract); RFB No. 18-0057</u> Name of Project

<u>Columbus Consolidated Government</u> Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_, \_\_\_, 201\_\_ in \_\_\_\_\_(city), \_\_\_\_\_(state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 201\_\_.

NOTARY PUBLIC My Commission Expires:

A properly completed, notarized E-Verify Affidavit must be included with sealed proposal; failure to do so will render the firm's proposal non-responsive and ineligible for further consideration.

### "GEORGIA SECURITY AND IMMIGRATION COMPLIANCE" Subcontractor Affidavit under O.C.G.A. § 13-10-91(b)(4)

By executing this affidavit, the undersigned *subcontractor* verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract for

(Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract) and

(*Name of Contractor*)

on behalf of *Columbus Consolidated Government* has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned sub-subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned sub-subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the sub-subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-subcontractor shall submit, at the time of such contract, this affidavit to

(*Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract*) Additionally, the undersigned sub-subcontractor will forward notice of the receipt of any affidavit from a subsubcontractor to \_\_\_\_\_\_

(*Name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract*) Sub-subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Sub-subcontractor <u>Color Photocopiers (Annual Contract); RFB No. 18-0057</u> Name of Project <u>Columbus Consolidated Government</u> Name of Public Employer I hereby declare under penalty of perjury that the foregoing is true and correct. Executed on \_\_\_\_\_, \_\_\_, 201\_\_ in \_\_\_\_\_(city), \_\_\_\_\_(state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_,201\_\_.

NOTARY PUBLIC My Commission Expires:

### FORM E

| Depart  | W-9<br>November 2017)<br>ment of the Treasury<br>I Revenue Service  | Request for Taxpayer<br>Identification Number and Certificat<br>Go to www.irs.gov/FormW9 for instructions and the latest info  |                       | Give Form to the<br>requester. Do not<br>send to the IRS.   |  |
|---|---|--|-----------------------|---|--|
|   |   | on your income tax return). Name is required on this line; do not leave this line blank.<br>Iisregarded entity name, if different from above   |                       |   |  |
| Is on page 3.                                       | following seven boxes.  |  |                       | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):<br>Exempt payee code (if any) |  |
| Print or type.<br>See Specific Instructions on page | ■ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ |  | Do not check Exemptio | Exemption from FATCA reporting code (if any)  |  |
| ecif  | Other (see ins  | tructions)   | (Applies to ac        | counts maintained outside the U.S.)   |  |
| See Sp  | 6     City, state, and ZIP code     Requester's name and address (optional)                                   |  |                       | s (optional)  |  |
|   | 7 List account num  | ber(s) here (optional)   |                       |   |  |
| Pa  |   | ver Identification Number (TIN)  |                       |   |  |
| backı<br>reside                                     | up withholding. For<br>ent alien, sole prop<br>es, it is your employ  | propriate box. The TIN provided must match the name given on line 1 to avoid individuals, this is generally your social security number (SSN). However, for a rietor, or disregarded entity, see the instructions for Part I, later. For other yer identification number (EIN). If you do not have a number, see <i>How to get a</i> | Social security num   | -   |  |
| Note  | If the account is in  | more than one name see the instructions for line 1. Also see What Name and   | Employer identificat  | tion number   |  |

Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Number To Give the Requester for guidelines on whose number to enter.

#### Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

| Sign<br>Here | Signature of<br>U.S. person ► | Date ► |  |
|--------------|-------------------------------|--------|--|
|              |                               |        |  |

#### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other
- transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

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By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

· An individual who is a U.S. citizen or U.S. resident alien;

• A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;

An estate (other than a foreign estate); or

• A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

 In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;

 In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and

• In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

#### **Backup Withholding**

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,

2. You do not certify your TIN when required (see the instructions for Part II for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See Exempt payee code, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships, earlier.

#### What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

#### Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

#### Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

### **Specific Instructions**

#### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. Individual. Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. Partnership, LLC that is not a single-member LLC, C corporation, or S corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. Disregarded entity. For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded for Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

#### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

#### Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

| IF the entity/person on line 1 is a(n)   | THEN check the box for   |
|--|--|
| Corporation  | Corporation  |
| <ul> <li>Individual</li> <li>Sole proprietorship, or</li> <li>Single-member limited liability<br/>company (LLC) owned by an<br/>individual and disregarded for U.S.<br/>federal tax purposes.</li> </ul>   | Individual/sole proprietor or single-<br>member LLC  |
| <ul> <li>LLC treated as a partnership for<br/>U.S. federal tax purposes,</li> <li>LLC that has filed Form 8832 or<br/>2553 to be taxed as a corporation,<br/>or</li> <li>LLC that is disregarded as an<br/>entity separate from its owner but<br/>the owner is another LLC that is<br/>not disregarded for U.S. federal tax<br/>purposes.</li> </ul> | Limited liability company and enter<br>the appropriate tax classification.<br>(P= Partnership; C= C corporation;<br>or S= S corporation) |
| Partnership  | Partnership  |
| Trust/estate   | Trust/estate   |

#### Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

#### Exempt payee code.

 Generally, individuals (including sole proprietors) are not exempt from backup withholding.

• Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.

 Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.

 Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)

2-The United States or any of its agencies or instrumentalities

3-A state, the District of Columbia, a U.S. commonwealth or

possession, or any of their political subdivisions or instrumentalities

4-A foreign government or any of its political subdivisions, agencies, or instrumentalities

5-A corporation

6-A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

 $7-\mathrm{A}$  futures commission merchant registered with the Commodity Futures Trading Commission

8-A real estate investment trust

9-An entity registered at all times during the tax year under the Investment Company Act of 1940

10-A common trust fund operated by a bank under section 584(a) 11-A financial institution

12-A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section  $\ensuremath{4947}$ 

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

| IF the payment is for  | THEN the payment is exempt for  |
|--|---|
| Interest and dividend payments   | All exempt payees except<br>for 7   |
| Broker transactions  | Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012. |
| Barter exchange transactions and patronage dividends   | Exempt payees 1 through 4   |
| Payments over \$600 required to be<br>reported and direct sales over<br>\$5,000 <sup>1</sup> | Generally, exempt payees 1 through 5 <sup>2</sup>   |
| Payments made in settlement of<br>payment card or third party network<br>transactions        | Exempt payees 1 through 4   |

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A-An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B-The United States or any of its agencies or instrumentalities

C-A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D-A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E-A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G-A real estate investment trust

 $\rm H-A$  regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I-A common trust fund as defined in section 584(a)

J-A bank as defined in section 581

K-A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

#### Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

#### Line 6

Enter your city, state, and ZIP code.

#### Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See What Name and Number To Give the Requester, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

#### Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

#### What Name and Number To Give the Requester

| For this type of account:  | Give name and SSN of:   |
|--|---|
| 1. Individual  | The individual  |
| <ol> <li>Two or more individuals (joint<br/>account) other than an account<br/>maintained by an FFI</li> </ol>                               | The actual owner of the account or, if<br>combined funds, the first individual on<br>the account <sup>1</sup> |
| 3. Two or more U.S. persons<br>(joint account maintained by an FFI)  | Each holder of the account  |
| <ol> <li>Custodial account of a minor<br/>(Uniform Gift to Minors Act)</li> </ol>  | The minor <sup>2</sup>  |
| <ol> <li>a. The usual revocable savings trust<br/>(grantor is also trustee)</li> </ol>   | The grantor-trustee <sup>1</sup>  |
| b. So-called trust account that is not<br>a legal or valid trust under state law   | The actual owner <sup>1</sup>   |
| <ol> <li>Sole proprietorship or disregarded<br/>entity owned by an individual</li> </ol>   | The owner <sup>3</sup>  |
| <ol> <li>Grantor trust filing under Optional<br/>Form 1099 Filing Method 1 (see<br/>Regulations section 1.671-4(b)(2)(i)<br/>(A))</li> </ol> | The grantor*  |
| For this type of account:  | Give name and EIN of:   |
| <ol> <li>Disregarded entity not owned by an<br/>individual</li> </ol>  | The owner   |
| 9. A valid trust, estate, or pension trust   | Legal entity <sup>4</sup>   |
| 10. Corporation or LLC electing<br>corporate status on Form 8832 or<br>Form 2553   | The corporation   |
| 11. Association, club, religious,<br>charitable, educational, or other tax-<br>exempt organization   | The organization  |
| <ol> <li>Partnership or multi-member LLC</li> <li>A broker or registered nominee</li> </ol>  | The partnership<br>The broker or nominee  |

| For this type of account:  | Give name and EIN of: |
|--|-----------------------|
| 14. Account with the Department of<br>Agriculture in the name of a public  | The public entity     |
| entity (such as a state or local<br>government, school district, or<br>prison) that receives agricultural<br>program payments  |                       |
| <ol> <li>Grantor trust filing under the Form<br/>1041 Filing Method or the Optional<br/>Form 1099 Filing Method 2 (see<br/>Regulations section 1.671-4(b)(2)(i)(B))</li> </ol> | The trust             |

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

\*Note: The grantor also must provide a Form W-9 to trustee of trust. Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

#### Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

- To reduce your risk:
- Protect your SSN,
- · Ensure your employer is protecting your SSN, and
- · Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft. The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at *spam@uce.gov* or report them at *www.ftc.gov/complaint*. You can contact the FTC at *www.ftc.gov/idtheft* or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see *www.IdentityTheft.gov* and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

#### **Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

**FORM F** 

### BID FORM COLOR PHOTOCOPIERS (ANNUAL CONTRACT) RFB NO. 18-0057

### **IMPORTANT INFORMATION:**

PLEASE SUBMIT ONE ORIGINAL AND ONE IDENTICAL COPY OF EACH BID

By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, <u>WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE</u>. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information, to exclude E-Verify. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete". Use the following check-list to verify the items are included in sealed bid:

□ Bid Form □ Bidder's Response Page □ Client Work History □ Proof of Insurance □ E-Verify

□ Product Literature □ Product Warranty □ Sample Invoice □ Sample Lease/Rental Agreement

□ Contract Signature Page □ Addenda

Initial below to acknowledge receipt of the following addenda (if any):

Addendum No. 1 \_\_\_\_\_ Addendum No. 2 \_\_\_\_\_ Addendum No. 3 \_\_\_\_\_

The undersigned hereby declares that he/they have carefully examined the specifications herein referred to and will provide all equipment, services and terms of the Columbus Consolidated Government for the following:

| Description  | Manufacturer/<br>Model | (Color)<br>*Cost Per Copy | (Black/White)<br>*Cost Per Copy |
|--|------------------------|---------------------------|---------------------------------|
| Color Copiers w/o Paper  |                        | \$                        | \$                              |
| Print Shop Color Copier w/o Paper<br>(Canon C7500 II Series or equivalent) |                        | \$                        | \$                              |

\* Cost per copy shall include all related expenses associated with maintaining the copiers in good working order while under contract. The City will pay a cost per copy each month. The City will *not* pay a guaranteed minimum monthly cost.

The undersigned agrees to deliver the color photocopiers to the appropriate divisions within

\_\_\_\_\_ days after notification of City Council award.

### **VENDOR NAME & SIGNATURE:**

If certified as a DBE or WBE, list the certifying agency: \_\_\_\_\_

### \*\*\* COMPLETE THIS PAGE AND RETURN WITH BID \*\*\*

### CONTRACT SIGNATURE PAGE COLOR PHOTOCOPIERS (ANNUAL CONTRACT) RFB No. 18-0057

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all equipment, terms and services of the Columbus Consolidated Government.

|   | By:                                 |
|---|-------------------------------------|
| Witness as to the signing of the contract   | By:                                 |
| Witness as to the signing of the contract   | Print Name and Title of Signatory   |
| (Corporate seal, if applicable)             | Company:                            |
| Company Ordering Address                    | Company Payment Address             |
| Contact:                                    | Contact:                            |
| Contact Email                               | Contact Email                       |
| TelephoneFax                                | Telephone:Fax                       |
| CONSOLIDATED GOV<br>Accepted this_ day of20 | ERNMENT OF COLUMBUS, GEORGIA        |
| Isaiah Hugley, City Manager                 | Clifton C. Fay, City Attorney       |
| ATTEST:                                     |                                     |
| Tiny B. Washington, Clerk of Council        | _                                   |
| **COMPLETE AND RETUR                        | RN THIS PAGE WITH SEALED RESPONSE** |

# ☑ <u>CHECKLIST</u> ☑ Color Photocopiers RFB No. 18-0057

CHECK OFF EACH ITEM AS THE NECESSARY ACTION IS COMPLETED:

- ☑ 1. THE **CONTRACT SIGNATURE PAGE** HAS BEEN SIGNED.
- ☑ 2. PRICING HAS BEEN CHECKED.
- ☑ 3. ADDENDA (IF ANY) HAVE BEEN SIGNED.
- ☑ 4. ALL SUBMISSION REQUIREMENTS ARE INCLUDED.
- ☑ 5. THE MAILING ENVELOPE HAS BEEN ADDRESSED TO:

Columbus Consolidated Government Purchasing Division – Attn: Heather Scheuttig

| 5 <sup>th</sup> Floor, Tower Bldg. | OR: | P.O. Box 1340                |
|------------------------------------|-----|------------------------------|
| 100 10 <sup>th</sup> Street        |     | Columbus, Georgia 31902-1340 |
| Columbus, Georgia 31901            |     | -                            |

☑ 6. THE MAILING ENVELOPE HAS BEEN SEALED **AND** MARKED WITH THE:

BID TITLE: Color Photocopiers (Annual Contract) BID NUMBER: RFB 18-0057 OPENING DATE: June 13, 2018

### $\bigcirc$ PLEASE CONSIDER THE ENVIRONMENT $\bigcirc$

✓ 7. Please <u>ONLY</u> submit what is required; keep the remaining pages of this bid document for your records/recycle.

### \* Opening date subject to change by Addendum

This checklist is for informative purposes only and is not intended to be a part of the formal bid document.