

# Request for Quote

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 ONE CAPITOL HILL  
 PROVIDENCE RI 02908

**CREATION DATE :** 11-APR-13  
**BID NUMBER:** 7461370,1  
**TITLE:** MEAL PREPARATION SERVICES FOR - STATE POLICE TRAINING ACADEMY

**BLANKET START :** 01-JUL-13  
**BLANKET END :** 31-JAN-14  
**BID CLOSING DATE AND TIME:** 17-APR-2013 11:15:00

**BUYER:** McGurn, Cheryl A  
**PHONE #:** N/A

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 DOA CONTROLLER  
 ONE CAPITOL HILL, 4TH FLOOR  
 SMITH ST  
 PROVIDENCE, RI 02908  
 US

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 DPS STATE POLICE TRAINING ACADEMY  
 64 WINDSOR ROAD  
 FOSTER, RI 02825  
 US

**Requisition Number:** 1302179  
 Note to Bidders: AMENDMENT #1  
 ADDS MANDATORY PRE-BID ATENDANCE SHEET  
 AND ANSWER TO QUESTION ON PAYMENT PROCEDURE

MEAL PREPARATION SERVICES PER THE ATTACHED SPECIFICATIONS

BIDDERS ARE REQUIRED TO SUBMIT A TWO WEEK MEAL PLAN WITH THIS BID SOLICIATION.

THERE WILL BE A MANDATORY PRE-BID ON APRIL 10, 2013 AT 10:00 AM AT THE RI STATE POLICE ACADEMY, 64 WINSOR RD, FOSTER, RI. MEET AT THE FRONT OF THE BUILDING.

FOR QUESTIONS CONCERNING THIS BID CONTACT:  
 BUYERS E-MAIL - CHERYL.MCGURN@PURCHASING.RI.GOV

Amendment Description: AMENDMENT #1

Line	Description	Quantity	Unit	Unit Price	Total
1	BREAKFAST	5,000.00	Each		
2	LUNCH	5,500.00	Each		
3	DINNER	4,000.00	Each		

Delivery: \_\_\_\_\_

Terms of Payment: \_\_\_\_\_

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer

**BID 7461370**

**TERMS AND CONDITIONS FOR THIS BID**

**INSURANCE REQUIREMENTS**

AN INSURANCE CERTIFICATE IN COMPLIANCE WITH PROVISIONS OF ITEM 31 (INSURANCE) OF THE GENERAL CONDITIONS OF PURCHASE IS REQUIRED FOR COMPREHENSIVE GENERAL LIABILITY, AUTOMOBILE LIABILITY, AND WORKERS' COMPENSATION AND MUST BE SUBMITTED BY THE SUCCESSFUL BIDDER(S) TO THE DIVISION OF PURCHASES PRIOR TO AWARD. THE INSURANCE CERTIFICATE MUST NAME THE STATE OF RHODE ISLAND AS CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED. FAILURE TO COMPLY WITH THESE PROVISIONS MAY RESULT IN REJECTION OF THE OFFEROR'S BID. ANNUAL RENEWAL CERTIFICATES MUST BE SUBMITTED TO THE AGENCY IDENTIFIED ON THE PURCHASE ORDER. FAILURE TO DO SO MAY BE GROUNDS FOR CANCELLATION OF CONTRACT.

NOTE: IF THIS BID COVERS CONSTRUCTION, SCHOOL BUSING, HAZARDOUS WASTE, OR VESSEL OPERATION, APPLICABLE COVERAGES FROM THE FOLLOWING LIST MUST ALSO BE SUBMITTED TO THE DIVISION OF PURCHASES PRIOR TO AWARD: \* PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS) - \$1 MILLION OR 5% OF ESTIMATED PROJECT COST, WHICHEVER IS GREATER. \* BUILDER'S RISK INSURANCE - COVERAGE EQUAL TO FACE AMOUNT OF CONTRACT FOR CONSTRUCTION. \* SCHOOL BUSING - AUTO LIABILITY COVERAGE IN THE AMOUNT OF \$5 MILLION. \* ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL) - \$1 MILLION OR 5% OF FACE AMOUNT OF CONTRACT, WHICHEVER IS GREATER. \* VESSEL OPERATION - (MARINE OR AIRCRAFT) - PROTECTION & INDEMNITY COVERAGE REQUIRED IN THE AMOUNT OF \$1 MILLION.

**RIVIP INFO – BID SUBMISSION REQUIREMENTS**

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**LICENSE REQUIREMENTS**

VENDOR (OWNER OF COMPANY) IS RESPONSIBLE TO COMPLY WITH ALL LICENSING OR STATE PERMITS REQUIRED FOR THIS TYPE OF SERVICE. A COPY OF LICENSE/PERMIT SHOULD BE SUBMITTED WITH THIS BID. IN ADDITION TO THESE LICENSE REQUIREMENTS, BIDDER, BY SUBMISSION OF THIS BID, CERTIFIES THAT ANY/ALL WORK RELATED TO THIS BID, AND ANY SUBSEQUENT AWARD WHICH REQUIRES A RHODE ISLAND LICENSE(S), SHALL BE PERFORMED BY AN INDIVIDUAL(S) HOLDING A VALID RHODE ISLAND LICENSE.

**DELIVERY PER AGENCY**

DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.

**VENDOR SPECIFICATIONS**

ALL VENDORS MUST INCLUDE SPECIFICATIONS WITH BID PROPOSAL (EVEN THOSE BIDDING BRAND SPECIFIED). FAILURE TO SUBMIT SPECIFICATIONS WITH BID PROPOSAL

MAY RESULT IN DISQUALIFICATION OF BID. ITEMS IN CATALOGS MUST BE CLEARLY MARKED AND PAGES TABBED.

**PABID**

**BIDDING** (a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State. (b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered. (c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost. (d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request. **ORDERING** (a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period. (b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.

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**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

**MANDATORY PRE-BID MEETING  
BID # 7461370**

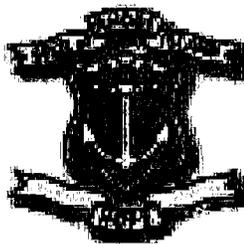
**STATE OF RHODE ISLAND PAYMENT QUESTION FROM PRE-BID ON 4/10/2013**

1. HOW TO SUBMIT INVOICES FOR CONTINUOUS PAYMENTS:

INVOICES SHOULD BE SUBMITTED TO:

THE DEPARTMENT OF PUBLIC SAFETY  
CENTRAL MANAGEMENT OFFICE  
311 DANIELSON PIKE  
NORTH SCITUATE RI 02857

THE INVOICES WILL BE PAID IN A TIMELY MANNER ONCE SUBMITTED.



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

**Bid #7461370 SIGN IN SHEET  
MANDATORY PREBID CONFERENCE**

**Project Name: MEAL PREPARATION SERVICES FOR – STATE POLICE TRAINING ACADEMY.**

**Date: APRIL 10, 2013 @ 10:00 AM**

1	NAME: LISA MATHIELLO	PHONE: 383-3631	COMPANY: PRANZI Catering
	FAX: 401-383-3637	ALT CONTACT #: 401-641-5419	E-MAIL: LISA@PRANZI.COM
2	NAME: NICK MATHIELLO	PHONE: 383-3631	COMPANY: PRANZI Catering
	FAX: 401-383-3637	ALT CONTACT #: 401-641-5419	E-MAIL: NICK@PRANZI.COM
3	NAME: DAVE EMERY	PHONE: 401-725-9280	COMPANY: EMERY'S CATERING LLC
	FAX: 401-723-3272	ALT CONTACT #: 578-5455	E-MAIL: DAVE@EMERYS-CATERING.COM
4	NAME: MATT RWEY <sup>Contract</sup>	PHONE: 725-9280	COMPANY: EMERY'S CATERING, LLC
	FAX: 729-9948	ALT CONTACT #: 725-9280	E-MAIL: MATT@EMERYS-CATERING.COM
5	NAME: JOHN PAPA	PHONE: 738-3334	COMPANY: GREENWOOD INN I
	FAX: 737-3472	ALT CONTACT #: 623-7132	E-MAIL: GREENWOODINN@MSN.COM
6	NAME: BRIAN DOHERTY	PHONE: 461-255-4243	COMPANY: BRIAN@CLUMBALK.CO.COM
	FAX: 401- <del>723</del> 9430	ALT CONTACT #: 723-4180	E-MAIL:
7	NAME:	PHONE:	COMPANY:
	FAX:	ALT CONTACT #:	E-MAIL: