Request for Quote

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

CREATION DATE : 08-AUG-13
BID NUMBER: 7492370
TITLE: JANITORIAL SERVICES-QUONSET ARMORY #1

BLANKET START : 01-OCT-13
BLANKET END : 30-JUN-15
BID CLOSING DATE AND TIME:05-SEP-2013 11:15:00

BUYER: Cadoret, David
PHONE #: N/A

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

SHIP TO
MS SPECIAL INSTRUCTIONS
SEE BELOW
SEE BELOW, RI N/A
US

Requistion Number:

Note to Bidders: THERE WILL BE A MANDATORY PRE-BID CONFERENCE AS PER ATTACHED. THE PRE BID WILL BE HELD IN CONJUNCTION WITH BID 7492369 FOR THE QUONSET ARMORY #2. BOTH OF THESE LOCATIONS WILL BE AWARDED TO ONE VENDOR (TOTAL LOW FOR BOTH LOCATIONS). ANY ONE SUBMITTING A BID MUST ATTEND BOTH PRE BIDS.

Line	Description	Quantity	Unit	Unit Price	Total
1	10/1/13 - 6/30/14 QUONSET ARMORY #1 MONTHLY PRICE FOR SERVICES DESCRIBED IN ATTACHMENT "B" AS ROUTINE SERVICES I.E. WEEKLY, MONTHLY, YEARLY	9.00	Month		
2	7/1/14 - 6/30/15 QUONSET ARMORY #1 MONTHLY PRICE FOR SERVICES DESCRIBED IN ATTACHMENT "B" AS ROUTINE SERVICES I.E. WEEKLY, MONTHLY, YEARLY	12.00	Month		
3	10/1/13 - 6/30/14 QUONSET ARMORY #1 TOTAL PRICE FOR SERVICES DESCRIBED IN ATTACHMENT "B" AS FLOOR CARE SERVICES (STRIP, SEAL & FINISH) AS REQUIRED	2.00	Semiannual		
4	7/1/14 - 6/30/15 QUONSET ARMORY #1 TOTAL PRICE FOR SERVICES DESCRIBED IN ATTACHMENT "B" AS FLOOR CARE SERVICES (STRIP, SEAL & FINISH) AS REQUIRED	2.00	Semiannual		
5	10/1/13-6/30/14 QUONSET ARMORY #1 SUBMIT A SEPERATE PRICE FOR SERVICES DESCRIBED IN ATTACHMENT "B" AS FLOOR CARE SERVICES (STRIP, SEAL, & FINISH) ON A PER SQ FT BASIS FOR ADDITIONAL STRIPPING AS REQUIRED BY THE AGENCY COORDINATOR	1.00	Square Foot		
6	7/1/14-6/30/15 QUONSET ARMORY #1 SUBMIT A SEPERATE PRICE FOR SERVICES DESCRIBED IN ATTACHMENT "B" AS FLOOR CARE SERVICES (STRIP, SEAL, & FINISH) ON A PER SQ FT BASIS FOR ADDITIONAL STRIPPING AS REQUIRED BY THE AGENCY COORDINATOR	1.00	Square Foot		
7	10/1/13-6/30/14 COST OF PERFORMANCE BOND IF BID EXCEEDS $50,000. WILL HAVE NO BEARING ON AWARD	1.00	Each		
8	7/1/14-6/30/15 COST OF PERFORMANCE BOND IF BID EXCEEDS $50,000. WILL HAVE NO BEARING ON AWARD	1.00	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

State of Rhode Island

Department of Administration
Division of Purchases
One Capitol Hill
Providence, RI 02908

REQUEST FOR QUOTE (RFQ) – BID# 7492370

JANITORIAL SERVICES-QUONSET ARMORY #1

SUBMISSION DEADLINE: Thursday, September 05, 2013 at 11:15 AM (ET)

PRE-BID CONFERENCE: ☐ NO
☒ YES **Tuesday, August 27, 2013 at 9:00 AM (ET)**

Mandatory: ☐ NO
☒ **YES:** Any vendor who intends to submit a bid proposal in response to this solicitation must have its designated representative attend the mandatory pre-bid conference. The representative must register at the pre-bid conference and disclose the identity of the vendor whom he/she represents. Because attendance at the pre-bid conference is mandatory, a vendor's failure to attend and register at the pre-bid conference shall result in disqualification of the vendor's bid proposal as non-responsive to the solicitation.

Location: **Quonset Armory #1**
115 Airport St
No Kingstown, RI
This pre bid will be held in conjunction with bid number 7492369, Quonset Armory #2. Both locations will be awarded to one vendor (total low for both locations). It will be necessary to go through a secured gate. Your vehicle may be subject to being searched. Please have proper identification. All interested parties will meet with a representative of the Militia and State Purchasing at the main gate. Once we leave the main gate area you will no longer be able to sign in for the prebid(s).

Buyer Name: **David A. Cadoret**
Title: **Chief Buyer**

SURETY REQUIRED: **NO**

BOND REQUIRED: **YES**

PUBLIC COPY (R.I. Gen. Law 37-2-18(j): This requirement applies to all public works projects (vertical and horizontal) exceeding Five Hundred Thousand ($500,000) dollars and any combination of base bid plus all alternates.

DISK BASED BID: ☒ **NO**
☐ **YES:** See attached Disk Based Bidding Information

THIS IS NOT A BIDDER CERTIFICATION FORM

State of Rhode Island

Department of Administration
Division of Purchases
One Capitol Hill
Providence, RI 02908

NOTE TO VENDORS:
Vendors must register on-line at the Rhode Island Division of Purchases website at www.purchasing.ri.gov. Offers received without the completed four-page Rhode Island Vendor Information Program (RIVIP) Generated Bidder Certification Cover Form attached may result in disqualification.

Disk Based Bidding Information

File Format

All disk based bid files are ZIP files that you can open using the WinZip 8.1 software. The ZIP file will contain one or more files based on the type of Bid/RPF.

Downloading the Disk Based Bid

Bids that have a file for download are marked with a "D" in the Info field of the bid search results. The "D" will be an active link to the WinZip file until the bid reaches its opening date. Clicking on the active "D" link will allow you to open or save the ZIP file associated with the bid. Opening the WinZip file will download a copy to your computer's temporary directory.

Opening the Disk Based Bid

Once downloaded, you can open the ZIP file with WinZip and view the Microsoft Office files contained within the WinZip file. Immediately save (extract) the individual files to an appropriate directory on your computer, such as "Desktop" or "My Documents".

FOR THE DEPARTMENT OF TRANSPORTATION AND OTHER SPECIFIC PROJECTS:

Completing the Disk Based Bid

Once the Microsoft Office files are properly saved, open the individual files and enter the required information in the appropriate fields. Save each file again to capture the new information you entered.

Submitting the Disk Based Bid

Save the completed files to a CD or diskette. Label the CD or diskette with the Bid/RFP number and bidder's name (company name, not contract name). Submit as instructed in the Bid or RFP solicitation document.

THIS IS NOT A BIDDER CERTIFICATION FORM

State of Rhode Island
Department of Administration / Division of Purchases
One Capitol Hill, Providence, Rhode Island 02908-5855
Tel: (401) 574-8100 Fax: (401) 574-8387

BID 7492370
Janitorial Services-Quonset Armory #1
Additional Information

This bid will be awarded in conjunction with bid #7492369, Quonset Armory #2. Award will be based on total low for both locations.

Interested vendors MUST attend both pre bid conferences.

Bid all lines (exception: bond lines). If price left blank or listed as zero (0) dollars bid will be deemed non-responsive and not considered. No charge (n/c) or included (incl) is acceptable.

On lines 3-4 of request for quote: price listed in unit price should be a total price for services described in attachment b as floor care services. If bid as per sq ft price bid will be deemed to be non-responsive and not considered.

Lines 5-6 should be bid as per sq ft price.

This bid is only for services one day a week. Day of week work to be performed to be determined. There are no daily chores listed on attachment B.

Department of Administration / Division of Purchases
One Capitol Hill, Providence, Rhode Island 02908-5855
Web Site: www.purchasing.ri.gov

ATTACHMENT "A"

JANITORIAL SERVICES

GENERAL - This covers Janitorial Services for the location identified in the Purchase in accordance with the term and description of services contained in ATTACHMENT "B" of the referenced bid.

RESPONSIBILITIES OF THE CONTRACTOR - The contractor shall:

A. Furnish all labor, supervision, materials, and equipment to satisfactorily perform the janitorial services covered by this Request at the frequency and during the times specified in the description of work contained in ATTACHMENT "B".

B. Furnish all coordinating management, training, technical personnel, and special projects personnel as may be required during the term of the contract - these personnel shall be the direct agents and employees of the contractor, and may include, if required, a non-working resident supervisor who shall be the contractor's chief manager and agent in the performance of the services to be rendered hereunder;

C. If required for the location, furnish its personnel with suitable identical uniforms approved by the State for use in performance of their duties herein;

D. Instruct its personnel to go about their work in a quiet manner, always respectful of the rights of the State - profanity and obscenity will not be permitted, and lunch periods, coffee breaks and smoking shall be restricted to designated areas;

E. Require all personnel to wear a name tag (supplied by the contractor during the performance of their duties;

F. Prohibit its employees from disturbing paper on desk tops and other work surfaces, opening desk drawers and cabinets, or using telephones or other office equipment. NOTE: IF WASHING OF DESK TOPS AND/OR OTHER WORK SURFACES IS REQUESTED IN ATTACHMENT "B", THE AGENCY COORDINATOR WILL DIRECT EMPLOYEES, AT THE APPROPRIATE TIME, TO REMOVE ALL PAPERS, EQUIPMENT AND PERSONAL ITEMS FROM THE AREA SO THAT THE CLEANING CAN BE ACCOMPLISHED BY THE CONTRACTOR;

G. Provide the necessary supplies and materials for the proper performance of the services described by this Request.

H. Furnish and maintain all necessary cleaning equipment, needed to adequately perform the required services as described in ATTACHMENT "B";

Equipment or supplies which, in the opinion of the State, is of improper type or design (etc.), or otherwise inadequate or inappropriate for the purpose intended shall be removed from the premises and replaced by equipment or supplies approved by the agency coordinator for the State.)

I. Assure that contractor personnel comply with the requirements of the R.I. Department of Environmental Management's State Office Recycling Program and the Regulations for Reduction and Recycling of Commercial and Non-Residential Solid Waste, which include:

1. separate collection of source separated recyclables,
2. maintaining the separation of recyclables from other rubbish,
3. placing recyclables in designated bags, or other containers,
4. any other duties necessary to maintain the recyclability of collected materials;

J. Insure that bottles and containers containing hazardous or toxic materials shall be properly marked and stored at all times; and

K. In addition to the work specified herein, the following duties shall be assumed by contractor personnel:

1. Upon arrival at the work site, provide/complete SIGN-IN SHEETS/ TIME CARDS, copies of which will be retained by both the Contractor and the Building Superintendent;

2. Report fires, hazardous conditions, and items in need of repair or replacement including but not limited to lights, faucets, toilets, etc.,

3. Close windows and turn off lights when not in use,

4. Lock rooms in security areas after cleaning, returning keys to the designated office,

5. Return personal items lost or discarded in the building to the designated office, and

6. Lock doors and otherwise secure the building upon leaving the premises.

L. 1. Vendor must provide a current list of workers. Additionally, vendor must provide a clear copy of the worker's current driver's license or R. I. identification card.

2. Vendor must provide the names of any newly hired employee forty-eight 48) hours in advance to agency.

3. All vendor employees/representatives must be cleared through BCI before being authorized to work in the building. All BCIs to be performed at the vendor's expense.

4. Vendor must notify agency upon termination of an employee.

5. Vendor must comply with all State and Federal laws.

CONTRACTOR PERSONNEL - The following requirements apply to all personnel of the contractor who may be directly involved in the work:

A. Personnel shall be physically able to perform their assigned tasks, and shall be free from any communicable disease (the State reserves the right to require that personnel be given a physical examination by a licensed physician without cost to the State, with a certificate of such examination furnished to the State's agency coordinator prior to the beginning of the employee's service);

B. Personnel shall be capable employees, thoroughly trained and qualified in the work assigned to them; and

C. All site personnel shall be subject to such security clearance as the State may require.

The contractor shall provide the agency coordinator with the name, and date of birth for all employees involved in the work.
The contractor shall agree that if any of the contractor's personnel assigned to the work prove not to be acceptable to the State for any just cause (including, but not limited to criminal conviction of any type), the State shall request the removal of the employee(s) involved, and acceptable replacements shall be provided by the contractor without dispute.

AGENCY COOPERATION - The State shall provide to the contractor:

A. Use of and access to storage space and janitors' closets on the premises all storage areas will be maintained by the contractor in a neat and orderly condition); and

B. The necessary use of all utilities, including water, sewer, electricity, and in-house telephone service - however, the contractor shall insure that telephones are reserved for business purposes only.

INDEMNITY AND INSURANCE

The successful bidder(s) shall indemnify and save and keep the State harmless against any and all losses, costs of damages, claim expenses, or claims arising from the damage of the property of others occurring as a result of the work covered by this Request.

Additionally, the successful bidder(s) shall show evidence of coverage with a company or companies licensed to provide business insurance in the State, with minimum coverage as follows:

COMPREHENSIVE GENERAL LIABILITY INSURANCE

Bodily Injury	$1,000,000 each occurrence $1,000,000 annual aggregate
Property Damage	$500,000 each occurrence $500,000 annual aggregate

WORKERS' COMPENSATION INSURANCE

Coverage B	$100,000

or evidence of self-insurance or other representations of financial responsibility satisfactory to the State, at the discretion of the Purchasing Agent. Evidence of coverage must be provided by successful bidder(s) within 48 hours of request. It is a mandatory requirement for award.

INSPECTION OF WORK - The contractor is expected to be self-monitoring with respect to the performance of work against this contract and its quality. Additionally:

A. The contractor shall submit a DAILY REPORT to the State's agency coordinator identifying areas cleaned and services performed, and

B. Once each week (or on such other schedule as may be acceptable to the State), the agency coordinator and the contractor's supervisor shall make an inspection tour of the building to identify any deficiencies in performance, and to define any corrective action as may be required. The State also reserves the right to make inspections without the contractor when deemed necessary. THE SUBMISSION/COMPLETION OF THE ABOVE DESCRIBED REPORTS WILL BE STRICTLY ENFORCED.

(NOTE: Documentation of such inspections shall constitute due notice to the Contractor of discrepancies or deficiencies. Failure to respond to such notice and to permanently remedy the discrepancies or deficiencies in a prompt and timely manner shall constitute breach, and form grounds for termination, at the discretion of the State, within thirty (30) days of written notice issued by the Division of Purchases.)

Copies of the Daily Reports of the quality of performance will be retained by the agency coordinator and the contractor. Daily Reports will be distributed to the Division of Purchases as a "back-up" to Complaint Reports (DP-65), when necessary.

PENALTIES - All Contracts must be complaint free within 60 days of inception or they are subject to immediate cancellation and possible suspension of the Vendor. Poor performance or lack of performance after the first 60 days will be addressed in the same manner.

MODIFICATION AND TERMINATION - The State reserves the right to modify the level(s) of service required for any location/building covered by this Request and to make equitable adjustment to rates or fees as a result, or to suspend or terminate services in their entirety at any time during performance, thirty (30) days following written notice to the Contractor.

SUBMISSIONS MUST INCLUDE THE FOLLOWING IN ORDER TO BE CONSIDERED RESPONSIVE:

A. The Certification Cover Form (4 pages) signed by an owner, or authorized agent of the owner, of the firm making the offer.

B. A price offer, Request for Quote, complete in all aspects.

C. ATTACHMENT "A" is for vendor information and does not need to be submitted with proposal.

D. ATTACHMENT "B" is for vendor information and does not need to be submitted with proposal.

E. A technical proposal, ATTACHMENT "C", for each location for which a price offer has been made, complete in all respects.

F. There is no ATTACHMENT "D".

G. Attachment "E" is for vendor information and does not need to be submitted with proposal.

H. Costing page worksheet, ATTACHMENT "F", complete in all respects.

RI DIVISION OF PURCHASES

REQUESTS FOR BIDS – JANITORIAL SERVICES

ATTACHMENT "B" – AGENCY WORKSHEET

GENERAL INFORMATION/SPECIFICATIONS

DATE: 10 July 2012

AGENCY: Quonset Armory #1

LOCATION: 115 Airport St, NK< RI

AGENCY COORDINATOR: Dana Thibault PHONE # 275-4657

STATE "ESTIMATED SQUARE FOOTAGE OF ALL AREAS TO BE CLEANED": 10,000
(SUPPLY FLOOR PLAN, IF AVAILABLE) BREAKDOWN –TILE ____
CARPET ____
VCT ____

A. IS AN "INITIAL CLEANUP" FOR A THIRTY (30) DAY PERIOD NECESSARY BASED ON THE CURRENT CONDITION OF THIS BUILDING?
YES ☐ NO ☒

B. CONTRACT PERIOD – FROM: 10/1/13 TO: 30 June 2015

ROUTINE CLEANING

C. SPECIFY TIME FRAME WITHIN WHICH WORK MUST BE DONE: (indicate AM or PM)
FROM: 8 am TO: 4 pm

D. DAYS OF WEEK WORK TO BE PERFORMED:
MON ☐ TUE ☐ WED ☐ THU ☐ FRI ☐ SAT ☐ SUN ☐

NOTE: SCHEDULED WORK DAYS/WORK HOURS THAT ARE NOT WORKED FOR ANY REASON, INCLUDING, BUT NOT LIMITED TO, HOLIDAYS, BAD WEATHER, POWER FAILURES, VENDOR EMPLOYEE ABSENCE, ETC., MUST BE DEDUCTED FROM VENDOR'S INVOICE BEFORE SUBMITTING IT TO THE STATE. THE DEDUCTION SHALL BE CALCULATED BY DIVIDING THE MONTHLY RATE BY EITHER THE MONTHLY SERVICE DAYS OR MONTHLY SERVICE HOURS, AS MAY BE APPLICABLE TO THE INSTANCE.

SPECIAL CLEANING

E. REGULAR SERVICE OF DAY PORTER DURING THE DAYTIME HOURS FOR THE PURPOSE OF CONTINUAL CLEANING OF BATHROOM, BREAK ROOMS, OR WHATEVER IS REQUIRED – A DAY PORTER IS IN ADDITION TO REGULAR CLEANING (indicate AM or PM):
FROM: _____ TO: _____
DAYS OF WEEK WORK FOR DAY PORTER:
MON ☐ TUE ☐ WED ☐ THU ☐ FRI ☐ SAT ☐ SUN ☐

F. DEPOSIT WASTE IN OUR RECEPTACLES (DUMPSTERS): YES ☒ NO ☐

NOTE: ALL PLASTIC BAGS MUST BE SUPPLIED BY THE VENDOR – NO EXCEPTIONS ALLOWED.

G. REMOVE ALL WASTE DAILY FROM BUILDING AND GROUNDS: YES ☒ NO ☐

H. RESTROOMS, TELEPHONES AND WATER FOUNTAINS MUST BE DISINFECTED PER SPECIFICATION NO. 6620-005 TYPE III, DATED 6/3/99.

I. NO PROPANE POWERED EQUIPMENT IS ALLOWED IN STATE BUILDINGS – NO EXCEPTIONS ALLOWED.

CHECKLIST FOR JANITORIAL SERVICES

SERVICE REQUIRED FREQUENCY OF SERVICE	DAILY	TIMES WEEKLY	TIMES MONTHLY	TIMES YEARLY
ROUTINE SERVICES				
1. EMPTY ALL WASTEBASKETS, RECEPTACLES AND REPLACE LINERS AS NEEDED;	☐	1 x wk	____	____
2. WASH ALL WASTEBASKETS IN OFFICE(S) AS NEEDED;	☐	1 x wk		
3. WASH ALL WASTE RECEPTACLES IN LUNCHROOMS;	☐	1 x wk	____	____
4. DUST ALL OFFICE FURNITURE AND EQUIPMENT – FILES, ETC.;	☐	1 x wk	____	____
5. DUST ALL BUILDING SURFACES WITHIN REACH – WINDOW SILLS, DOOR AND WINDOW FRAMES, PANELS, WALLS, ROOM DIVIDERS, CHAIR RAILS, BASEBOARDS, MOLDINGS, HANDRAILS, LEDGES, ETC., USING A TREATED CLOTH;			____	____
6. WASH AND SANITIZE ALL DRINKING FOUNTAINS USING GERMICIDAL CLEANER;	☐	1 x wk	____	____
7. DUST ALL HIGH PARTITIONS, PIPES, VENTS, MOLDINGS, ETC.;			____	____
8. DAMP WASH AND POLISH ALL BUILDING SURFACES WITHIN REACH – WINDOW SILLS, DOOR AND WINDOW FRAMES, PANELS, WALLS, ROOM DIVIDERS, CHAIR RAILS, BASEBOARDS, MOLDINGS, HANDRAILS, LEDGES, ETC., USING A TREATED CLOTH;			____	____
9. DUST ALL BLINDS;				____
10. REMOVE FINGERPRINTS, MARKS AND SMUDGES FROM WOODWORK, WALLS AND PARTITIONS;	☐	____	____	____
11. CLEAN AND POLISH BRIGHT METAL WORK;	☐	____	____	____
12. VACUUM ALL VENTS (EXPOSED GRILL WORK);			____	____
13. WASH RUBBER FLOOR MATS;	☐	____	____	____
14. CLEAN CHALKBOARDS AND CHALK TRAYS, DRY METHOD;	☐	____	1 X Mo	____
15. WASH LIGHT FIXTURES;			____	____
16. WALL WASHING: STAIRWAY			____	X
HALLWAY			____	X
CORRIDOR			____	X
CLASSROOM			____	X
OFFICE			____	X
OTHER AREAS – SPECIFY: _____				

CHECKLIST FOR JANITORIAL SERVICES

SERVICE REQUIRED FREQUENCY OF SERVICE	DAILY	TIMES WEEKLY	TIMES MONTHLY	TIMES YEARLY
17. WASH ALL ENTRY GLASS – DOORS (INSIDE AND OUTSIDE), PARTITIONS, DIVIDERS, ETC.;	☐	1 x wk	____	____
18. WASH ALL EXPOSED GLASS SURFACES – GLASS PARTITIONS, INTERIOR GLASS DOORS, DISPLAY CASES, DIRECTORY BOARDS, MIRRORS, GLASS DRAFT WINDOWS SHIELDS, ETC.;	☐	____	____	____
19. REPLACE BURNED OUT LIGHTS FROM AGENCY'S STOCK;	☐	____	____	____
20. SWEEP STOOPS AND SIDEWALK AREAS (ONLY AREAS LISTED); _____ _____	☐	____	____	____
21. POLICE AREA ADJACENT TO BUILDING AND REMOVE BOTTLES, PAPERS, CIGARETTE BUTTS, ETC.;	☐	____	____	____
LAVATORIES: 22. CLEAN RESTROOMS – FLOORS, URINALS, TOILET BOWLS, SEATS, COMPARTMENTS, FIXTURES AND WALLS WITH A QUARTENARY GERMICIDAL SOLUTION, WHICH IS EPA REGISTERED ACCORDING TO GSA PROCEDURES;	☐	1 x wk	____	____
FLOORS: 23. SWEEP AND/OR DUST MOP ALL FLOOR SURFACES WITH TREATED MOPS;	☐	1 x wk	____	____
24. SWEEP AND DUST STAIRS, LANDINGS AND HANDRAILS: FRONT: _____ OTHERS SPECIFY: _____	☐	1 x wk	____	____
25. WET MOP ALL TRAFFIC LANES – ENTRIES, HALLS, ETC.;	☐	1 x wk	____	____
26. WET MOP ALL OFFICES, CLASSROOMS, ETC.;	☐	1 x wk	____	____
27. WET MOP STAIRS AND LANDINGS – FRONT: _____ OTHERS, SPECIFY: _____	☐	1 x wk	____	____

CHECKLIST FOR JANITORIAL SERVICES

SERVICE REQUIRED FREQUENCY OF SERVICE	DAILY	TIMES WEEKLY	TIMES MONTHLY	TIMES YEARLY
28. VACUUM ALL CARPETING IN TRAFFIC AREAS, STAIRS, LANDINGS, CORRIDORS, ENTRANCES;	☐	1 x wk	____	____
29. VACUUM ALL CARPETING IN OFFICES, CLASSROOMS, ETC.; SPECIFY: _____	☐	1 x wk	____	____
30. SPOT CLEAN ALL CARPETING, AS NECESSARY TO REMOVE SPILLS, SMALL AREAS, ETC.;	☐	1 x wk	____	____
31. SPRAY CLEAN AND MACHINE POLISH ALL NON-CARPETED FLOORS IN TRAFFIC LANES, CORRIDORS, ENTRANCES, ETC.;	☐	1 x wk	____	____
32. SPRAY AND MACHINE POLISH ALL OTHER NON-CARPETED FLOOR AREAS: _____	☐	1 x wk	____	____

JANITORIAL SERVICES – FLOOR MAINTENANCE

FLOOR SERVICE: STRIP, SEAL AND FINISH

A. MACHINE STRIP AND REFINISH ALL NON-CARPETED FLOORS IN TRAFFIC AREAS, CORRIDORS, ENTRANCES, ETC.

B. MACHINE STRIP AND REFINISH ALL NON-CARPETED FLOORS IN CLASSROOMS, OFFICES, ETC.

SPECIFY: 2 x year _____

NOTE:

AGENCY MUST SPECIFY THE TYPE OF FLOOR CLEANING CHEMICALS AND EQUIPMENT THAT WILL BE USED AT THE SPECIFIC LOCATION. THE OFFICE OF PURCHASES RECOMMENDS A "HIGH SPEED FLOOR CARE SYSTEM". YOU CAN SPECIFY ANY ONE OF THESE "SYSTEMS" LISTED OR ANY SYSTEM EQUAL TO THOSE LISTED.

FREQUENCY OF FLOOR SERVICE WILL BE DIRECTED BY THE AGENCY COORDINATOR AND MUST BE IN ACCORDANCE WITH THE MANUFACTURER'S RECOMMENDED INSTRUCTIONS FOR PROPER MAINTENANCE.

LIST CHEMICALS:

STRIPPER: Bare Knuckles

SEALER: Iron Stone

FINISH: High Noon Finisher

RESTORER: High Noon Restorer

CLEANER: Sundance

LIST EQUIPMENT:

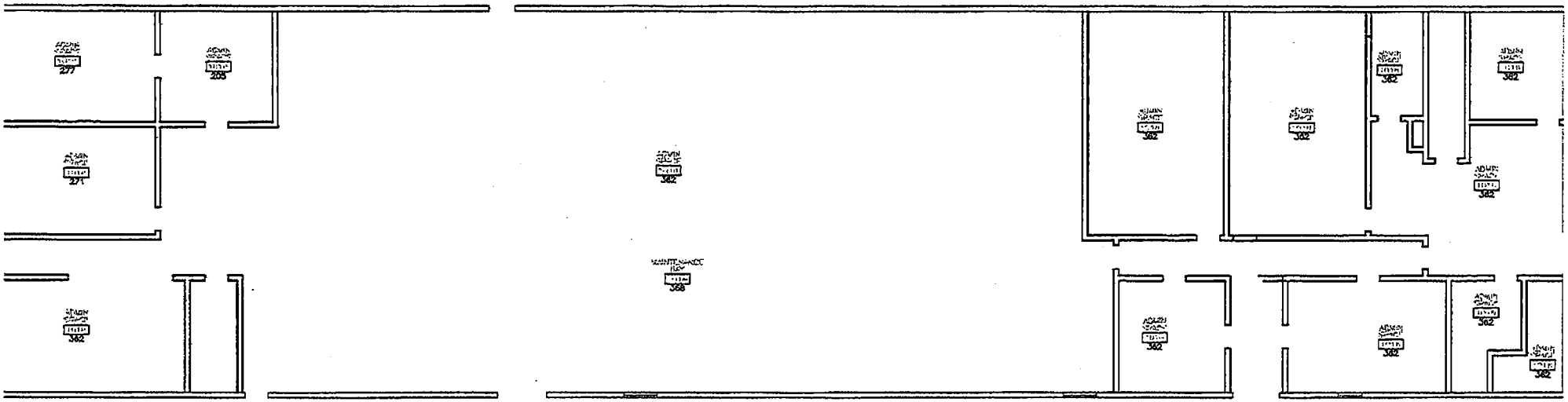
MANUFACTURER BRAND: _____

MODEL #: _____

SIZE: _____

RPM: _____

Bio Arm #1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MAINTENANCE
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State of Rhode Island
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ATTACHMENT C-SPECIFICATIONS (JANITORIAL SERVICES)

BIDDER_____**BID NUMBER**_____

QUONSET ARMORY #1, 115 AIRPORT ST., NO KINGSTOWN, RI

1. Labor Rate (per man-hour) Charged in this Offer: $_____

2. Certificate of Insurance enclosed: [ ] Yes [ ] No

   Name of Carrier: _____

3. Number of employees to be assigned to this requirement:

   3A. On a full-time basis: _____3B. On a part-time basis:_____

4. Total number of man-hours planned to be used for this requirement:

   _____Per Week Full Time_____ Part Time _____

5. Will you have an on site supervisor at this location at all times?

   _____

6. If Yes to 5, will this supervisor do janitorial work as well as supervise or strictly do supervisory duties?

   _____

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ATTACHMENT C-SPECIFICATIONS (JANITORIAL SERVICES)

BIDDER_____**BID NUMBER**_____

QUONSET ARMORY #1, 115 AIRPORT ST., NO KINGSTOWN, RI

7. Equipment proposed for use on this requirement - NOTE: FLOOR CLEANING EQUIPMENT AND CHEMICALS MUST BE AS SPECIFIED, OR EQUAL TO, TYPE STATED IN ATTACHMENT "B". THE OFFICE OF PURCHASES RESERVES THE RIGHT TO DECIDE EQUALITY:

Description/Model Year	Brand/Model No.	No. of Units

NOTE: EQUIPMENT OFFERED MUST BE LESS THAN FIVE (5) YEARS OLD UNLESS CONTRACTOR CAN PROVIDE PROOF THAT THE WARRANTY EXCEEDS FIVE (5) YEARS.

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ATTACHMENT C-SPECIFICATIONS (JANITORIAL SERVICES)

BIDDER_____**BID NUMBER**_____

QUONSET ARMORY #1, 115 AIRPORT ST., NO KINGSTOWN, RI

8. Material/supplies to be used on this requirement - NOTE: FLOOR CLEANING SUPPLIES MUST BE AS SPECIFIED, OR EQUAL TO, THOSE STATED IN ATTACHMENT "B". THE OFFICE OF PURCHASES RESERVES THE RIGHT TO DECIDE EQUALITY:

Manufacturer	Brand /Model No.	Qty/Week

9. Other (similar) Contracts Undertaken (other than for the State):

Client Contract/Year	Description	Value
Tel. #		
Tel. #		
Tel. #		

State of Rhode Island
Department of Administration / Division of Purchases
One Capitol Hill, Providence, Rhode Island 02908-5855
Tel: (401) 574-8100 Fax: (401) 574-8387

ATTACHMENT C-SPECIFICATIONS (JANITORIAL SERVICES)

BIDDER_____BID NUMBER_____

QUONSET ARMORY #1, 115 AIRPORT ST., NO KINGSTOWN, RI

10. Other (similar) Contracts Undertaken (for the State):

Agency	Location	Purchase Order

11. Has your firm (Have you) been subject to suspension, debarment, or criminal conviction by the State of Rhode Island, or any other jurisdiction? YES [ ] NO [ ]

12. Has the State ever terminated contracts with your firm for cause? YES [ ] NO [ ]

13. Has your firm ever withdrawn from a contract with the State during its performance? YES [ ] NO [ ]

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BIDDER_____BID NUMBER_____

QUONSET ARMORY #1, 115 AIRPORT ST., NO KINGSTOWN, RI

If you have answered "Yes" to any of the foregoing, please explain the circumstances below:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

CERTIFICATION BY BIDDER:

Authorized Representative	Signature
Title	Date

Attachment "E"

STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
OFFICE OF PURCHASES
ONE CAPITOL HILL
PROVIDENCE, RI 02908

SPECIFICATION NO. 6620-005 Germicidal Detergents
Date: 6/3/99 Supersedes: 4/20/98

1. SCOPE AND CLASSIFICATION:
1 1 This specification covers Germicidal Detergents for use by all State Agencies requiring "hospital-type" disinfectants as defined by the Environmental Protection Agency (EPA) for registration under Federal Insecticide, Fungicide and Rodenticides Act and other applicable Federal Requirements

1.2 Classification:
Type I. phenolic, Liquid
Type II. Quaternary Ammonium Compound, Liquid or Dry
Type III. Quaternary Ammonium Compound, Liquid or Dry with Odor Counteractants

2 Applicable Specifications:
2.1 The following Specifications, Acts, Laws and Test Methods, of the issues in effect on date of invitation for bids, form a part of this specification

3 Requirements:
3 1 Information to be furnished:
3.1 1 Labels: The bidder shall submit two manufacturer's labels of the product, which he is offering for consideration listing the following information

a. Product name or trade name
b Manufacturer's name and address
c. Active Ingredients
d Directions for use and recommended dilutions.
e Any precautions necessary in using and handling the product
f EPA registration number
g All information pertinent to Federal and State Laws affecting the labeling of disinfectants

3.1.2 Technical Specification -- Test Reports: Bidder shall submit certified test data confirming the germicidal effectiveness at the use dilution recommended on the label of the product offered under this specification Tests shall be in accordance with the AOAC latest official test method with efficacy against:

Mycobacterium Tuberculosis var bois (BGG) - (for Type I only)
Staphylococcus Aureau -- ATCC 6538
Pseudomonas Aeruginosa – ATCC 10708
Trichophyton Mentagrophytes
Methecillin Resistant Staphylococcus Aureau (MRSA)

3 1 3 Virucidal Activities: when used in accordance with the least favorable use dilution indicated on the label, product shall be viricidal for strains of: Herpes, Vaccinia and Influenza A2, HIV-Contact time shall be ten (10) minutes

3.1.4 All biological testing shall be done in the presence of 5% (Blood) serum and 400 PPM hard water These claims shall be registered with the U S E P A

3.1.5 Descriptive Literature: The bidder shall submit (in duplicate) brochures, booklets, circulars and/or other descriptive literature outlining suggested dilutions and the complete uses of the product offered for consideration

3.1.6 Approval for use on conductive flooring: The product must be classified as to use on electrically conductive flooring by any nationally operated laboratory, recognized and equipped to perform this service and accepted as such by the Division of Purchases

3.1.7 Certification: Certified statement, furnished by the manufacturer on their standard letterhead and signed by an officer or other responsible official, stating that the product offered and proposed to be supplied meets or exceeds all the requirements of this specification

3.2 MATERIALS:
3.2.1 Type I – Shall be a combination of multi-non-selective phenolic compounds and synthetic biodegradable detergents in a concentrated form intended as a concurrent disinfecting and cleaning agent This product shall be made from uniformly high grade materials and ingredients; shall provide broad spectrum disinfection and shall not impart acrid and disagreeable odors

3.2.1.1 Use-Dilution: Confirmation at 10 minute kill The highest use dilution specified on the label shall be germicidal for both Salmonella Choleraesuis (ATCC-10708) and Staphylococcus Aureau (ATCC 6538) under the condition of the current A.O A C Use dilution method. The recommended use dilution shall be able to kill Trichophyton Mentagrophytes and the A O A C test strain Pseudomonas Aeruginosa (PRO-10) when tested according to the current A O A C. test method and shall be able to kill the virulent strain of Mycobacterium Tuberculosis Var Bois (BGG) when tested according to the method currently acceptable to the EPA The product shall be registered effective in the presence of 5% (blood) serum and 400 PPM hardwater as ($CaCO_3$)

3.2.1 2 It is recommended that a test method demonstrate Tuberculocidal activity by using Animal Passage Methods at the use dilution specified on the label. The product shall be registered effective in the presence of 5% (blood) serum and 400 PPM hard water as ($CaCO_3$)

3.2.2 **TYPE II** – Shall be a combination of surface – active quaternary ammonium germicides and detergent cleansers in a concentrated form, for use as a combination cleaning and disinfecting agent for normal cleaning and disinfection The product shall give positive germ-kill on both gram positive and gram negative organisms when diluted in accordance with the manufacturer's instructions and used as directed The product shall be registered effective in the presence of 5% (blood) serum and 400 PPM hardwater (as $CaCO_3$)

3.2.2.1 Use-Dilution: Confirmation at 10 minute kill. The highest use dilution specified on the label shall be germicidal for Salmonella Choleraesuis (ATCC 10708) Staphylococcus Aureus (ATCC 6538) M R.S A. and Pseudomonas Aeruginosa (PRO-10) under the conditions of the current A O A C Use dilution confirmation test method The product shall be registered effective in the presence of 5% (blood) serum and 400 PPM hardwater (as $CaCO_3$)

3.2.3. **Type III** – Shall be a combination of surface active quaternary ammonium germicides, non-ionic surfactants, organic chelating agent and odor counteractants, in a concentrated liquid form, intended for use as a multi-purpose disinfectant, detergent and deodorizer The product shall give positive germ kill on both gram positive and gram negative organisms when diluted in accordance with the manufacturers instructions and when used as directed

3.2 3.1 Use Dilution: Confirmation at 10-minute kill. The highest use dilution specified on the label shall be germicidal for Salmonella Choleraesuis (ATCC 10708) Staphylococcus Aureus (ATCC 6538) and Pseudomonas Aeruginosa (PRO-10) under the conditions of the current A O A C use

dilution Confirmation test method, and shall demonstrate efficacy in 5% (blood) serum and 400 PPM Hardwater

3.3 Stability – Shall be stable and effective in hard water; shall not break down in the presence of proteinaceous material; and shall have a storage life of one year without excessive loss of antimicrobial potency and detergency or detergent activity

3.4 PH of Use Dilution – shall be within the range of 2 5 to 3 5 or 10 0 to 11 0 when prepared with distilled water at 20 c

3.5 Flash Point – Shall show a closed cup flash point of over 100F when tested by any standard flash point method

3.6 Conductivity – Shall not adversely affect the conductivity of conductive surgical and obstetrical floors

3.7 Cleaning Efficiency – the germicidal detergent at the recommended use dilution shall not be harmful to any type flooring, painted or varnished surfaces It shall be free rinsing and shall exhibit a cleaning efficiency of at lease 95% when tested in accordance with Interim Federal Specification P-D 220

3.8 Toxicity – The acute oral toxicity, LD50, of the concentrate shall not be lower than 2 5 grams per kilogram of body weight when tested by method described in Regulations of Enforcement of the Federal Insecticide, Fungicide and Rodenticides Act

3 9 Dermatitis – No recommended use dilution shall be more irritant than 1% solution of Liquid Cresolis Saponatus NF when applied to the skin of a closely clipped adult albino rabbit on a pad of cotton gauze (1 inch square, 2 layers thick) for a period of eight hours at the rate of one milliliter of solution per pad

4 PACKAGING AND DELIVERY:

4.1 Packaging: Germicidal Detergent shall be furnished in the following size factory sealed containers as requested by the Agencies in the invitation to bid The product shall neither affect, nor be affected by, the containers in which it is furnished for a period of one (1) year from date of delivery. The unit of purchase shall be U S liquid gallons One-gallon plastic jugs
Five gallon metal, plastic or combination metal and plastic cans fitted with pouring spout

4.2 Marking: Unless otherwise specified in the invitation for bids, all packages shall be marked on a side or end with the following:

a. Product Name or Trade Name
b. Manufacturer's name and address
c. Active ingredients
d. Directions for use and recommended dilutions
e. Any precautions necessary in using and handling the product
f. EPA Registration Number
g. All information pertinent to Federal and State laws affecting the Labeling of Disinfectants

5 SAMPLING, INSPECTION AND TEST PROCEDURE:
5 1 Sampling: Random sampling will be made at the delivery point by taking a sample from each regular delivery to determine that markings, materials and weight comply with this specifications

5 2 Testing: This product may be tested as deemed necessary by Division of Purchases, in accordance with Section 3 In the even samples fail to meet all conditions and requirements of the specification, the cost of the testing shall be borne by the supplier

6. NOTE:
6.1 Basis of Award: Award will be made to the lowest responsible bidder meeting all of the requirements of this specification and evaluated as such by the proper authority in the Division of Purchases using a use dilution cost per gallon factor against the widest spectrum of bacteria If use dilution rate varies with each organism the least favorable to the bidder will be utilized in establishing the basis for cost

6.2 Material Safety Data Sheet: Each contractor must furnish not less than two copies of a Material Safety Data sheet (Form OSHA-20) for each substance outlined in the State Labor Laws, Chapter 28 21

6.3 FAILURE TO SUBMIT CERTIFICATIONS FOR NECESSARY INFORMATION ON THE PRODUCT BID UPON SHALL BE SUFFICIENT CAUSE FOR REJECTION OF BID

This specification shall, until revised or rescinded, apply to each future purchase and contract for the commodity described herein Copies of State of Rhode Island Specifications may be obtained from: Division of Purchases, Standards Unit, One Capitol Hill, Providence, RI 02908

Copies of Standards of the American Society for Testing and Materials may be obtained from: American Society for Testing Materials, 1916 Race Street, Philadelphia, PA 19103

Copies of AOAC Official Test Methods may be obtained from The Association of Official Analytical Chemist, Box 540 Benjamin Franklin Station, Washington, DC 20044

Copies of Federal documents may be obtained from Superintendent of Documents, U S Printing Office,
Washington, DC 20042

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JANITORIAL SERVICES
COSTING PAGE WORKSHEET
FOR THE PERIOD 10/1/13-9/30/14
(ROUTINE SERVICES ONLY)
ATTACHMENT F

VENDOR NAME: _____

LOCATION: QUONSET ARMORY #1

BID NUMBER 7492370

DIRECT LABOR

ITEM #1	CATEGORY	$/MAN HOUR	MAN HRS/WK	MAN HRS/YR	TOTAL DOLLARS/YR
1	JANITORS ( )				
2	SUPERVISOR ()				
3	DAY PORTER ()				

TOTAL (SUM 1 THRU 3) A

PAYROLL RELATED

ITEM #2	CATEGORY	PERCENTAGE		TOTAL DOLLARS/YR
1	F.I.C.A.	7.65	% x A	
2	F.U.T.	0.8	% x A	
3	S.U.T	3.6	% x A	
4	WORK. COMP.	10.55	% x A	
5	LIABILITY	3.45	% x A	
6	JUT	0.1	% x A	

TOTAL PAYROLL RELATED (SUM 1-6) B _____

TOTAL "A" AND "B" C _____

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JANITORIAL SERVICES
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ATTACHMENT F

OTHER OPERATING COSTS

ITEM #3	CATEGORY	PERCENTAGE		TOTAL DOLLARS/YR
1	SUPPLIES	_____	% x A	_____
2	EQUIP.	_____	% x A	_____
3	EQUIP. REPAIRS	_____	% x A	_____
4		_____	% x A	_____
5		_____	% x A	_____

TOTAL OTHER OPERATING COST (SUM 1-5)	D	_____
GRAND TOTAL OPERATING COST (C + D)	E	_____
OVERHEAD _____ % x E	F	_____
GRAND TOTAL OPERATING & OVERHEAD (E + F)	G	_____
PROFIT _____ % x G	H	_____
GRAND TOTAL OPERATING, OVERHEAD & PROFIT (G + H)	I	_____

Contract Terms and Conditions

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Terms and Conditions

BID STANDARD TERMS AND CONDITIONS

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.

DELIVERY PER AGENCY

DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.

MULTI YEAR AWARD

THIS IS A MULTI-YEAR BID/CONTRACT. PER RHODE ISLAND STATE LAW 37-2-33, CONTRACT OBLIGATIONS BEYOND THE CURRENT FISCAL YEAR ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.

RIVIP INFO - BID SUBMISSION REQUIREMENTS

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. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

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.

AWARD

THE STATE, AT ITS SOLE DISCRETION, SHALL RESERVE THE RIGHT TO MAKE ONE OR MULTIPLE AWARDS FOR THIS REQUIREMENT AND/OR TO REJECT ANY OR ALL BIDS.