



# Request for Quote

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

CREATION DATE : 16-JUN-14  
BID NUMBER: 7548719-2  
TITLE: SUPPLY HYDRATED LIME TO URI 8/1/14 - 7/31/17  
  
BLANKET START : 01-AUG-14  
BLANKET END : 31-JUL-17  
BID CLOSING DATE AND TIME: 08-JUL-2014 10:30:00

BUYER: Melillo, Charlotte A  
PHONE #: 401-574-8110

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URI ACCOUNTS PAYABLE  
CARLOTTI ADMINISTRATION BLDG  
75 LOWER COLLEGE ROAD, SUITE 1  
KINGSTON, RI 02881  
US

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URI FACILITIES RECEIVING  
ATTN: SEE BELOW  
SHERMAN BLDG  
KINGSTON, RI 02881  
US

Requisition Number: 1366699

Line	Description	Quantity	Unit	Unit Price	Total
1	8/1/14 - 7/31/17 SUPPLY HYDRATED LIME TO URI PER BID SPECIFICATIONS. QUESTIONS CONCERNING THIS RFQ SHOULD BE EMAILED TO: questions7@purchasing.ri.gov before June 27, 2014 at noon. 8/1/14 - 6/30/15 hydrated lime, price per 50 lb. bag	500.00	Each		
2	7/1/15 - 6/30/16 hydrated lime, price per 50 lb. bag	600.00	Each		
3	7/1/16 - 6/30/17 hydrated lime, price per 50 lb. bag	600.00	Each		
4	7/1/17 - 7/31/17 hydrated lime, price per 50 lb. bag	100.00	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 RI

RFQ 7548719 - 2

SUPPLY HYDRATED LIME TO URI CLOSING DATE: 6/4/14 10:30 AM

BLANKET REQUIREMENTS: 8/1/2014 - 7/31/2017

MULTI-YEAR CONTRACT TO SUPPLY AND DELIVER MONTHLY QUANTITIES OF HYDRATED LIME TO PUMP STATION #4 AT THE UNIVERSITY OF RHODE ISLAND.

CHEM-CAL BRAND HIGH CALCIUM HYDRATE OR APPROVED EQUIVALENT, PER ATTACHED SPECIFICATIONS.  
VENDORS BIDDING ALTERNATE BRANDS MUST PROVIDE SPECIFICATIONS FOR REVIEW AND APPROVAL.

THE PRODUCT SHALL BE OF THE QUALITY FOR ADDITION TO POTABLE WATER IN ORDER TO RAISE THE PH.

PRODUCT SHALL BE STORED IN A CLIMATE CONTROLLED AREA PRIOR TO DELIVERY AND PROTECTED FROM PESTS.

DELIVERY SHALL INCLUDE PLACING PALLETS ON A CONCRETE PAD.

## TYPICAL ANALYSIS SHEET



Produits de chaux et granulés calcaires/Lime and Limestone products  
 GRAYMONT (Q) INC, 25 - 206 rue de Lauzon, Boucherville (Québec) J4B 1E7, (450) 449-2262

PRODUCT: HIGH CALCIUM HYDRATED LIME

PRODUCTION FACILITY: Marbleton, Québec

## PRODUCT DESCRIPTION

A fine white powder made by reacting quicklime with sufficient water to convert the calcium oxide (CaO) to calcium hydroxide (Ca(OH)<sub>2</sub>).

## COMPOSITION AND TYPICAL CHEMICAL PROPERTIES

Available Lime Index as Calcium Hydroxide (Ca(OH) <sub>2</sub> ), (%)	92.8
Total Calcium as Calcium Oxide (CaO), (%)	73.4
Available Lime Index as Calcium Oxide (CaO), (%)	70.3
Magnesium Oxide (MgO), (%)	0.8
Silica (SiO <sub>2</sub> ), (%)	1.2
Ferric Oxide (Fe <sub>2</sub> O <sub>3</sub> ), (%)	0.2
Alumina (Al <sub>2</sub> O <sub>3</sub> ), (%)	0.4
Total Sulfur (S), (%)	0.17
Loss on Ignition, (%)	24.2
Calcium Carbonates, (CaCO <sub>3</sub> ), (%)	2.3
Moisture (H <sub>2</sub> O), (%)	0.7
Neutralizing Value (CaCO <sub>3</sub> = 100), (%)	129

## TYPICAL PHYSICAL PROPERTIES

Bulk Density (ASTM C 110), (kg/m <sup>3</sup> )	360 - 576
(lbs/ft <sup>3</sup> )	22 - 36
Blaine Specific Surface (ASTM C 204), (cm <sup>2</sup> /g)	23400
BET Surface Area, (m <sup>2</sup> /g)	14

## CLASSICAL REFERENCE DATA (CRC Handbook of Chemistry and Physics)

Specific Gravity	2.24
Solubility in Water (0 °C), (g/l)	1.86
pH (saturated solution) (25 °C)	12.484

## SIZE DISTRIBUTION

SIEVE (mm.)	SIEVE (U.S.A.)	% PASSING
0.600	N° 30	100
0.300	N° 50	99 - 100
0.150	N° 100	98 - 100
0.075	N° 200	95 - 100
0.045	N° 325	90 - 100

## NOTICE

\* The test data herein is based on average results on production samples. Product shipments are subject to normal variation. Accordingly, test data can not be taken as establishing maximum or minimum specifications.



ANSI / NSF 60  
 DRINKING WATER TREATMENT ADDITIVE  
 < 44 Y 4 >  
 MAXIMUM USE LEVEL: 650 mg/l.

State of Rhode Island  
PAYER'S REQUEST FOR TAXPAYER  
IDENTIFICATION NUMBER AND CERTIFICATION

THE IRS REQUIRES THAT YOU FURNISH YOUR TAXPAYER IDENTIFICATION NUMBER TO US. FAILURE TO PROVIDE THIS INFORMATION CAN RESULT IN A \$50 PENALTY BY THE IRS. IF YOU ARE AN INDIVIDUAL, PLEASE PROVIDE US WITH YOUR SOCIAL SECURITY NUMBER (SSN) IN THE SPACE INDICATED BELOW. IF YOU ARE A COMPANY OR A CORPORATION, PLEASE PROVIDE US WITH YOUR EMPLOYER IDENTIFICATION NUMBER (EIN) WHERE INDICATED.

**Taxpayer Identification Number (T.I.N.)**

Enter your taxpayer identification number in the appropriate box. For most individuals, this is your social security number.

**Social Security No. (SSN)**

**Employer ID No. (EIN)**

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**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**(REMITTANCE ADDRESS, IF DIFFERENT)** \_\_\_\_\_

**CITY, STATE AND ZIP CODE** \_\_\_\_\_

**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 either: (A) 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 (B) the IRS has notified me that I am no longer subject to backup withholding.

**Certification Instructions** -- You must cross out item (2) above if you have been notified by the IRS that you are subject to backup withholding because of under-reporting interest or dividends on your tax return. However, if after being notified by IRS that you were subject to backup withholding you received another notification from IRS that you are no longer subject to backup withholding, do not cross out item (2).

**PLEASE SIGN HERE**

**SIGNATURE** \_\_\_\_\_ **TITLE** \_\_\_\_\_ **DATE** \_\_\_\_\_ **TEL NO.** \_\_\_\_\_

**BUSINESS DESIGNATION:**

Please Check One: Individual  Medical Services Corporation  Government/Nonprofit Corporation   
Partnership  Corporation  Trust/Estate  Legal Services Corporation

**NAME:** Be sure to enter your full and correct name as listed in the IRS file for you or your business.

**ADDRESS, CITY, STATE AND ZIP CODE:** Enter your primary business address and remittance address if different from your primary address). If you operate a business at more than one location, adhere to the following:

- 1) Same T.I.N. with more than one location -- attach a list of location addresses with remittance address for each location and indicate to which location the year-end tax information return should be mailed.
- 2) Different T.I.N. for each different location -- submit a completed W-9 form for each T.I.N. and location. (One year-end tax information return will be reported for each T.I.N. and remittance address.)

**CERTIFICATION** -- Sign the certification, enter your title, date, and your telephone number (including area code and extension).

**BUSINESS TYPE CHECK-OFF** -- Check the appropriate box for the type of business ownership.

Mail to: Supplier Coordinator, One Capitol Hill, Providence, RI 02908

**Contract Terms and Conditions**

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**Terms and Conditions**

**BID STANDARD TERMS AND CONDITIONS**

**TERMS AND CONDITIONS FOR THIS BID**

**PURCHASE AGREEMENT BID**

**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.

**RIVIP INFO - BID SUBMISSION REQUIREMENTS**

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**MAILING ADDRESS FOR BID PROPOSALS ISSUED BY THE STATE OF RHODE ISLAND,  
DIVISION OF PURCHASES**

All Bid Proposals must be submitted by mail or hand delivered to:

- State of Rhode Island
- Department of Administration
- Division of Purchases, Second floor
- One Capitol Hill
- Providence, RI 02908-5855

**DIVESTITURE OF INVESTMENTS IN IRAN REQUIREMENT:**

No vendor engaged in investment activities in Iran as described in R.I. Gen. Laws §37-2.5-2(b) may submit a bid proposal to, or renew a contract with, the Division of Purchases. Each vendor submitting a bid proposal or entering into a renewal of a contract is required to certify that the vendor does not appear on the list maintained by the General Treasurer pursuant to R.I. Gen. Laws §37-2.5-3.

**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.

**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.