Quasi-Public

Rhode Island College

SECTION 1 - RIVIP VENDOR INFORMATION

Bid/RFP Number:

44606

Bid/RFP Title:

Carpet Installation-Roberts Hall Suite C-RIC

Bid Contact Person:

Purchasing

Bid Contact Phone:

401-456-8047

Opening Date & Time:

8/22/2017 2:00PM

RIVIP Vendor ID #:

80157

Vendor Name:

Johnston Floor Covering

Address:

32 Water street

Telephone:

4013018064

Fax:

E-Mail:

johnstonfloor@gmail.com

Contact Person:

Steve Russo

Title:

Owner

NOTE: 'AWARD OF CONTRACTS AND PURCHASE ORDERS SHALL BE SUBJECT, AT THE DISCRETION OF THE PURCHASING AGENT, TO THE OFFEROR COMPLETING AN ON-LINE RIVIP REGISTRATION at www.purchasing.state.ri.us. It is THE RESPONSIBILITY OF THE VENDOR to make on-line corrections/updates using the Vendor maintenance program on the RI Division of Purchases Web Site.

Submission Information

Submit offers as required within the Bid/RFP document. This contract is NOT a state bid.

Signature below commits vendor to the attached offer and certifies (1) that the offer has taken into account all solicitation amendments, (2) that the above statements and information are accurate, (3) that vendor understands and has complied with the requirements set forth.

Vendor's Signature: I/we certify that the above vendor information is correct and complete.

vendor information is correct and complete.

Date 8/21/17

Date 8/21/17

Print Name and Title of company official signing offer

Certification Form Page 1 of 1

Revised: 11/25/2002



RHODE ISLAND COLLEGE

PURCHASING DEPARTMENT

600 Mt. Pleasant Avenue, Building #5 Providence, Rhode Island 02908 Phone: 401-456-8047 Fax: 401-456-8528

INVITATION TO BID

SOLICITATION NUMBER: 44606

SOLICITATION TITLE: CARPET INSTALL—Roberts Hall Suite C—RIC

BID PROPOSAL SUBMISSION DEADLINE: August 22, 2017 at 2:00 PM

SURETY REQUIRED: NO

BOND REQUIRED: NO

Note to Bidders: Questions concerning this solicitation may be emailed to LDECESARE@ric.edu no later than 8/9/17 @ 2:00 PM (EST). Please reference the Bid # on all correspondence. Questions received if any, will be posted on the internet as an addendum to this solicitation. It is the responsibility of all interested parties to download the information.

FEIN:

1-1709522

VENDOR NAME:

hoston Flooring

ADDRESS:

Later St. John Stud

TELEPHONE: FAX:

CONTACT PERSON:

EMAIL:

TITLE:

NOTICE TO VENDORS:

Each bid proposal for a public works project must include a "public copy" to be available for public inspection upon the opening of bids. Bid proposals that do not include a copy for public inspection will be deemed nonresponsive. For further information on how to comply with this statutory requirement, see R.I. Gen. Laws §§ 37-2-18(b) and (i). Also see Procurement Regulations 5.11, and in addition, for highway and bridge projects, also see Procurement Regulations 5.13, accessible at www.purchasing.ri.gov .

SECTION 2 —DISCLOSURES

Bidders must respond to every statement. Bid proposals submitted without a complete response may be deemed nonresponsive.

Indicate "Y" (Yes) or "N" (No) for Disclosures 1-4, and if "Yes," provide details below

1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has been subject to suspension or debarment by any federal, state, or municipal governmental authority, or the subject of criminal prosecution, or convicted of a criminal offense within the previous 5 years. If "Yes," provide details below.

1. State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder or any parent, subsidiary, or affiliate has had any contracts with a federal, state, or municipal governmental authority terminated for any reason within the previous 5 years. If "Yes," provide details below.

Bidder o	State whether the Bidder, or any officer, director, manager, stockholder, member, partner, or other owner or principal of the
serving or quasi-	r any parent, subsidiary, or affiliate has been fined more than \$5000 for violation(s) of any Rhode Island environmental law(s) hode Island Department of Environmental Management within the previous 5 years. If "Yes," provide details below. State whether any officer, director, manager, stockholder, member, partner, or other owner or principal of the Bidder is or has served within the past two calendar years as either an appointed or elected official of any state governmental authority public corporation, including without limitation, any entity created as a legislative body or public or state agency by the
	issembly or constitution of this state. re details (continue on additional sheet if necessary):
	SECTION 3 – OWNERSHIP DISCLOSURE
Bidders nonresp	must provide all relevant information. Bid proposals submitted without a complete response may be deemed
If the Bi owners i required	dder is publicly held, the Bidder may provide owner information about only those stockholders, members, partners, or other hat hold at least 10% of the record or beneficial equity interests of the Bidder; otherwise, complete ownership disclosure is .
parent c	n officer, director, manager, stockholder, member, partner, or other owner or principle of the Bidder, and each intermediate ompany and the ultimate parent company of the Bidder. For each individual, provide his or her name, business address, a occupation, position with the Bidder, and the percentage of ownership, if any, he or she holds in the Bidder, and each diate parent company and the ultimate parent company of the bidder.
T	SECTION 4 -CERTIFICATIONS
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Indicate THE B	s must respond to every statement. Bid proposals submitted without a complete response may be deemed ponsive. Yes (Y) or No (N) and if No, provide details below: IDDER CERTIFIES THAT: The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may
Indicate THE B 1.	yes (Y) or No (N) and if No, provide details below: (DDER CERTIFIES THAT: The Bidder will immediately disclose, in writing, to the State Purchasing Agent any potential conflict of interest which may occur during the term of any contract awarded pursuant to the solicitation. The Bidder possesses all licenses and anyone who will perform any work will possess all licenses required by applicable federal, state, and local law necessary to perform the requirements any contract awarded pursuant to this solicitations and will maintain all required licenses during the term of any contract awarded pursuant to this solicitation. In the event that any required license shall lapse or be restricted or suspended, the Bidder shall immediately notify the State Purchasing Agent in

contingent on the award of a contract pursuant to this solicitation.	
6. This bid proposal is not a collusive bid proposal. Neither the Bidder, nor any of its owners, stockholders, members, partner principles, directors, mangers, officers, employees, or agents has in any way colluded, conspired, or agreed, directly or indirectly, with any other bidder or person to submit a collusive bid proposal in response to the solicitation or to refrain from submitting a bid proposal in response to the solicitation, or has in any manner, directly or indirectly, sought by agreement collusion or other communication with any other bidder or person to fix the price or prices in the bid proposal or the bid proposal of any other bidder, or to fix any overhead, profit, or cost component of the bid price in the bid proposal or the bid proposal of any other bidder, or to secure through any collusion conspiracy, or unlawful agreement any advantage against State of Rhode Island or any person with an interest in the contract awarded pursuant to this solicitation. The bid price in bid proposal is fair and proper and is not tainted by any collusion, conspiracy, or unlawful agreement on the part of the bidder, its owners, stockholders, members, partners, principals, directors, managers, officers, employees, or agents.	rom t or bid st the
7. The Bidder: (i) is not identified on the General Treasurer's list created pursuant to R.I. Gen. Laws 37-2.5-3 as a person or entity engaging in investment activities in Iran described in 37-2.5-2(b); and (ii) is not engaging in any such investment activities in Iran.	
8. The Bidder will comply with all of the laws that are incorporated into and/or applicable to any contract with the State of Rhode Island.	
Certification details (continue on additional sheet if necessary):	
Submission by the Bidder of a bid proposal pursuant to this solicitation constitutes an offer to contract with the State of Rhode Island through the Division of Purchases on the terms and conditions contained in this solicitation and the bid proposal. The Bidder certifies that: (1) the Bidder has reviews this solicitation and agrees to comply with its terms and conditions; (2) the bid proposal is based on this solicitation; and (3) the information submitted in the bid proposal (including this Bidder Certification Form) is accurate and complete. The Bidder acknowledges that the terms and conditions of this solicitation and the bid proposal will be incorporated into any contract awarded to the Bidder pursuant this solicitation and the hid proposal. The person signing below represents, under penalty of perjury, that he or she is further regarding the preparation and contents of this bid proposal and has been duly authorized to execute and submathis bid proposal on behalf of the Bidder.	nt to
BIDDER	
8/21/17	
Date: _ olaciti	

Signature in ink

Printed name and title of person signing on behalf of Bidder

Printed name and title of person signing on behalf of Bidder

Printed name and title of person signing on behalf of Bidder

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Printed name and title of person signing on behalf of Bidder

Name of Bidder

distribut states in the reception area.

orm W-9 (Rev. 3/7/11)

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 Social Security No. (SSN) Employer ID No. (EIN)
in the appropriate box. For most individuals, this is your social security number.
NAME Johnston Flooring
ADDRESS 32 Water St,
(REMITTANCE ADDRESS, IF DIFFERENT)
CITY, STATE AND ZIP CODE JOHN STON, RT 02919
CERTIFICATION: Under penalties of perjury, I certify that:
 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 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.
<u>Certification Instructions</u> 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 OPERATIONS
SIGNATURE TITLE Administrator DATE 8/21/17 TEL NO. 401-301-800
BUSINESS DESIGNATION:
Please Check One: Individual Medical Services Corporation Government/Nonprofit Corporation
Partnership Corporation 🄀 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

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.

information return will be reported for each T.I.N. and remittance address.)

Solicitation #: 44606

Solicitation Title: Carpet Install at Roberts Hall-Suite C

Rhode Island College

BID FORM

To:

Rhode Island College

Purchasing Office, Building 5 – East Campus 600 Mt. Pleasant Avenue, Providence, RI 02908

Bidder:

Legal name of entity LT

Address (street/city/state/zip)

johnston Floor Ognail.com

Contact name

Contact fax

1. BASE BID PRICE

The Bidder submits this bid proposal to perform all of the work (including labor and materials) described in the solicitation for this Base Bid Price (*including the costs for all Allowances, Bonds, and Addenda*):

(base bid price in figures printed electronically, typed, or handwritten legibly in ink),

Founder Thussu D Six Hungre And (base bid price in words printed electronically, typed, or handwritten legibly in ink)

Allowances

There are no allowances for this project.

Bonds

The Base Bid Price <u>includes</u> the costs for all Bid and Payment and Performance Bonds required by the solicitation.

Solicitation #: 44606 Solicitation Title: Carpet Install at Roberts Hall-Suite C Rhode Island College

Addenda

The Bidder has examined the entire solicitation (including the following Addenda), and the Base Bid Price <u>includes</u> the costs of any modifications required by the Addenda.

All Addenda must be acknowledged.
Addendum No. 1 dated:
Addendum No. 2 dated:
Addendum No. 3 dated:

2. <u>ALTERNATES</u> (Additions/Subtractions to Base Bid Price)

There are no alternates for this project.

3. UNIT PRICES

The Bidder submits these predetermined Unit Prices as the basis for any change orders approved in advance by the State. These Unit Prices include <u>all</u> costs, including labor, materials, services, regulatory compliance, overhead, and profit.

NONE

4. CONTRACT TIME

The Bidder offers to perform the work in accordance with the timeline detailed in the Scope of Work and summarized below:

Final completion:

September 22, 2017

Solicitation #: 44606

Solicitation Title: Carpet Install at Roberts Hall-Suite C

Rhode Island College

5. LIQUIDATED DAMAGES

The successful bidder awarded a contract pursuant to this solicitation shall be liable for and pay the State, as liquidated damages and not as a penalty, the following amount for <u>each</u> calendar day of delay beyond the date for substantial completion, as determined in the sole discretion of the State:

\$0 per calendar day

This bid proposal is irrevocable for 60 days from the bid proposal submission deadline.

If the Bidder is determined to be the successful bidder pursuant to this solicitation, the Bidder will promptly: (i) comply with each of the requirements of the Tentative Letter of Award; and (ii) commence and diligently pursue the work upon issuance and receipt of the purchase order from the State and authorization from the user agency.

The person signing below certifies that he or she has been duly authorized to execute and submit this bid proposal on behalf of the Bidder.

Solicitation #: 44606

Solicitation Title: Carpet Install at Roberts Hall-Suite C

Rhode Island College

BIDDER

Date: 8 21 17

Name of Bidder

Signature in ink

Louis Russo Operations Administrator Printed name and title of person signing on behalf of Bidder

<u>20722</u>

Bidder's Contractor Registration Number



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Labor and Training

Center General Complex 1511 Pontiac Avenue Cranston, RI 02920-4407 Telephone:

(401) 462-8000 Via RI Relay 711

Lincoln D. Chafee Governor Charles J. Fogarty Director

13. Comply with all applicable provisions of RIGL §37-13-1, et. seq;

Any questions or concerns regarding this CONTRACT ADDENDUM should be addressed to the contractor or subcontractor's attorney. Additional Prevailing Wage information may be obtained from the Department of Labor and Training at www.dlt.ri.gov/pw.

CERTIFICATION

I hereby certify that I have reviewed this CONTRACT ADDENDUM and understand my obligations as stated above.

By: //W/Ces

Title: PRESIDEN

Subscribed and sworn before me this 22 day of HVG

Notary Public

My commission exp

JOYCE MALO, NOTARY PUBLIC

STATE OF RI, AND PROVIDENCE PLAN

MY COMMISSION EXPIRES _

An Equal Opportunity Employer/Program, /Auxiliary aids and services are available upon request to individuals with disabilities.

TTY via RI Relay 711