



## NOTICE TO PROPOSERS

There may be one or more amendments to this ITB. In order to receive communication for any such amendments issued specifically to this ITB, the proposer must provide the information requested below to the Sumner County Board

## TABLE OF CONTENTS

1. Specification
2. Source Selection and Contract Award
3. Schedule of Events
4. Delivery of Proposals
5. Protests
6. New Vendors
7. Attachments
  - A. Bid Form/Certification
  - B. IRS Form W9
  - C. Attestation Re Personnel
  - D. Standard Terms and Conditions

1. Specification

SCS is soliciting bids for floor

3. Schedule of Events

RFP Issued



7.A Bid Form



Attn: Purchasing Supervisor  
 1500 Airport Road  
 Gallatin, TN 37066

Date \_\_\_\_\_

	DESCRIPTION	QUANTITY	PRICE PER UNIT	EXTENDED PRICE
<b>BASE BID</b>				
1	Floor Finish	1300 bx.		
2	Stripper	400 bx.		
<b>GRAND TOTAL</b>				
<b>ALTERNATE BID</b>				
1	Floor Finish	1300 bx.		
2	Stripper	400 bx.		
<b>GRAND TOTAL</b>				

By checking this box, Proposer agrees that SCS reserves the right to extend the terms, conditions and prices of this contract to other Institutions (such as State, Local and/or Public Agencies) who express an interest in participating in any contract that results from this ITB. Each of the piggyback Institutions will issue their own purchasing documents for the goods/service. Proposer agrees that SCS shall bear no responsibility or liability for any agreements between Proposer and the other Institution(s) who desire to exercise this option.

<b>NOTES:</b>

<b>AUTHORIZED SIGNATURE:</b>	
<b>PRINTED NAME:</b>	
<b>TITLE:</b>	
<b>COMPANY NAME:</b>	
<b>PHONE:</b>	
<b>EMAIL</b>	

7.B IRS Form W9

Form **W-9**  
(Rev. December 2014)  
Department of the Treasury  
Internal Revenue Service

**Request for Taxpayer  
Identification Number and Certification**

Give Form to the  
requester. Do not  
send to the IRS.

Print or type name (do not check appropriate box for federal tax classification, check only one) 1. Sole proprietor or partner

Individual sole proprietor  C corporation  S corporation  Partnership  Trust/estate  (Certain entities not individuals. See instructions on page 3.)

Print or type TIN (Taxpayer Identification Number)  Exemption from FATCA reporting

Page 4



## ATTACHMENT 7.C – Attestation Re Personnel

## ATTESTATION RE PERSONNEL USED IN CONTRACT PERFORMANCE

CONTRACTOR LEGAL ENTITY NAME:	
FEDERAL EMPLOYER IDENTIFICATION NUMBER: (or Social Security Number)	

The Contractor, identified above, does hereby attest, certify, warrant and assure that the Contractor shall not knowingly utilize the services of an illegal immigrant in the performance of this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant in the performance of this Contract, T.C.A. § 12-3-309.

SIGNATURE &amp; DATE:

\_\_\_\_\_  
*NOTICE: This attestation MUST be signed by an individual empowered to contractually bind the Contractor.*





9. **PROHIBITIONS/NO VENDOR CONTRACT FORM.** Acceptance of gifts from vendors is prohibited. T.C.A. §12-4-106. The contract documents for purchase under this ITB shall consist of the successful proposer's proposal and SCS's purchase order. The proposer may request exceptions to terms and conditions and/or request SCS to accept other terms and conditions by means of subsequent documents such as invoices, warranty agreements, license agreements, etc. All subsequent documents shall be open to revision for impermissible language. SCS reserves the right to render the proposal unresponsive and subject the proposal to rejection if successful terms cannot be negotiated.
10. **PROHIBITION ON HIRING ILLEGAL IMMIGRANTS.** Tennessee Public Chapter No. 878 of 2006, T.C.A. §12-3-309, requires that Contractor attest in writing that Contractor will not knowingly utilize the services of illegal immigrant.