

**TILLMAN COUNTY DISTRICTS #123
FLOORING REPLACEMENT – HEALTH DEPARTMENT
BID #4-2022**

NOTICE TO BID:

The Board of Tillman County Commissioners is accepting sealed bids for the replacement of flooring at the Tillman County Health Department. Specifications are available in the office of the Tillman County Clerk, 201 N. Main, Frederick, OK or by calling (580)335-3421 ext. 3. Bids shall be in writing and contain an Affidavit of Non-Collusion. The envelope should be plainly marked “**Bid #4-2022, TCHD Flooring**” on the lower left corner and mailed to the Tillman County Clerk, P.O. Box 992, Frederick, OK 73542 or delivered to the Tillman County Clerk, 201 N. Main, Frederick, OK. Bids will be accepted until bid opening time at **10:30 A.M., Monday, January 9, 2023**. The Commissioners will determine the lowest and best bid, and reserve the right to reject any or all bids.

GENERAL:

Bids must include all construction materials, equipment, and support staff.

Bids shall be in writing and submitted by mail to Tillman County Clerk, P.O. Box 992, Frederick, OK 73542 or delivered to Tillman County Clerk, 201 N. Main, Frederick, OK.

The envelope should be plainly marked “**Bid #4-2022, TCHD Flooring**” on the lower left corner.

Bids will be accepted until bid opening time at **10:30 A.M., Monday, January 9, 2023**.

A completed W-9, proof of current Liability and Workers Compensation insurance as well as an executed and notarized Affidavit of Non-Collusion must be included.

Award Criteria will include conformity with the specifications, bid price and delivery date.

While the proposed specifications are considered minimum, Tillman County reserves the right to accept or reject any and all bids, waive minor irregularities in the bids and to award this bid in the best interest of Tillman County.

To schedule a site-visit, please contact the Tillman County Health Department at 580-335-2163.

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The undersigned signatory for the bidder represents and warrants that he has full and complete authority to submit this proposal and to enter a contract if this proposal is accepted.

Total Bid Amount: \$ _____

Delivery/Start Date: _____

VENDOR: _____

CONTACT: _____ **PHONE:** _____

ADDRESS: _____

SIGNATURE: _____ **DATE:** _____

VENDOR'S STATEMENT:

Bid prices shall be valid for 90 days from the date of the Bid Opening

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INTENT

It is the intent of these specifications to describe flooring demolition and replacement in sufficient detail to enable the buyer to secure bids on comparable equipment. It is also the intent of these specifications to cover the furnishing and equipment. The equipment shall be new, unused except for sales demonstration purposes. The buyer reserves the right to consider quality and workmanship of the proposed equipment. Delivery time, operating characteristics, availability of service, and design and manufacturing experience will be considered. All bids will be evaluated based on compliance with these specifications and performance.

ACQUAINTANCE WITH SPECIFICATIONS

It is the responsibility of the bidder to review all the bidding requirements. Failure of a bidder to be acquainted with this information shall not relieve the bidder from any obligation of the bid requirements.

EQUIVALENT

These specifications are for the sole purpose of establishing minimum requirements of level of quality, standards of performance and design and is in no way intended to prohibit the bidding of any manufacturer's item of equal material. Purchaser shall be the sole judge of equality and this decision final.

EXCEPTION TO SPECIFICATIONS

Any exceptions to these specifications must be clearly pointed out. Otherwise, it will be considered that the items offered are in strict compliance with the written specifications and that the successful bidder will be responsible for installing equipment meeting these specifications. Any exceptions must be marked as such within the body of the bid and explained on a separate page marked "EXCEPTIONS".

GENERAL PRINCIPLES

This is an engineer, design, construct, and deliver type specification and it is not the intention of this agency to write out vendors or manufactures of similar or equal equipment of the types specified. It should be noted, however, that this specification is written around the specific needs of the department. It is the intent to standardize certain components thus specific brands have been specified in certain places. This has been done to establish a certain standard of quality. Other brands will be accepted providing the vendor/manufacturer details how another brand will meet or exceed the quality of the actual brand specified.

EMPLOYEE STATEMENT

It is mandated by the United States Government that all employees currently and to be employed during the duration of this contract are not discriminated against because of their race, creed, color, sex, nationality origin or disability. Furthermore, this agency must be satisfied that the primary manufacturer's labor pool is treated in a fair and equitable manner. Therefore, it will be the responsibility of the primary manufacturer to include a human resource statement upon request outlining employment status, working conditions, and benefits.

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SCOPE OF WORK

Furnish all labor and material as detailed in this scope of work for Bid Package

The following shall be included:

01 SCOPE SPECIFIC:

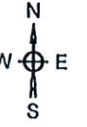
- 1.01 Contractor is responsible for accurate measurements of each room based on the flooring identified in TCHD floor plan document.
- 1.02 Contractor is responsible to furnish all labor, equipment and materials required to demolish old flooring and replace with new flooring.
- 1.03 Contractor is responsible for all labor and equipment to unload, stock, and delivery of this contractor's scope of work. Contractor may be required to move material to another area as the job progresses.
- 1.04 Flooring and adhesives shall meet requirements of the International Building Code (IBC), 2015 edition, the International Fire Code (IFC), 2015 edition, The Life Safety Code (NFPA 101), ADA 2010, NFPA, and good construction and life safety practices.
- 1.05 The bid will include TWO flooring types; ROLLED CARPET and VINYL PLANK
The Rolled Carpet at 1/4" CPT to 1/8". Carpet should color coordinate with vinyl planks
Vinyl Plank will be similar to Natures Reflections 6 Mil.

Upon bid award, flooring samples shall be provided to TCHD. Final decision as to color of flooring shall be made by TCHD.

- 1.06 Contractor will install color coordinated RUBBER DOORWAY TRIM at each transition areas.
- 1.07 Contractor will install color coordinated RUBBER COVE BASE similar to ROPPE 700 series throughout facility except areas new floor is not installed which will include; restrooms x 6, janitors' closet, closed records room and mechanical rooms x 3.

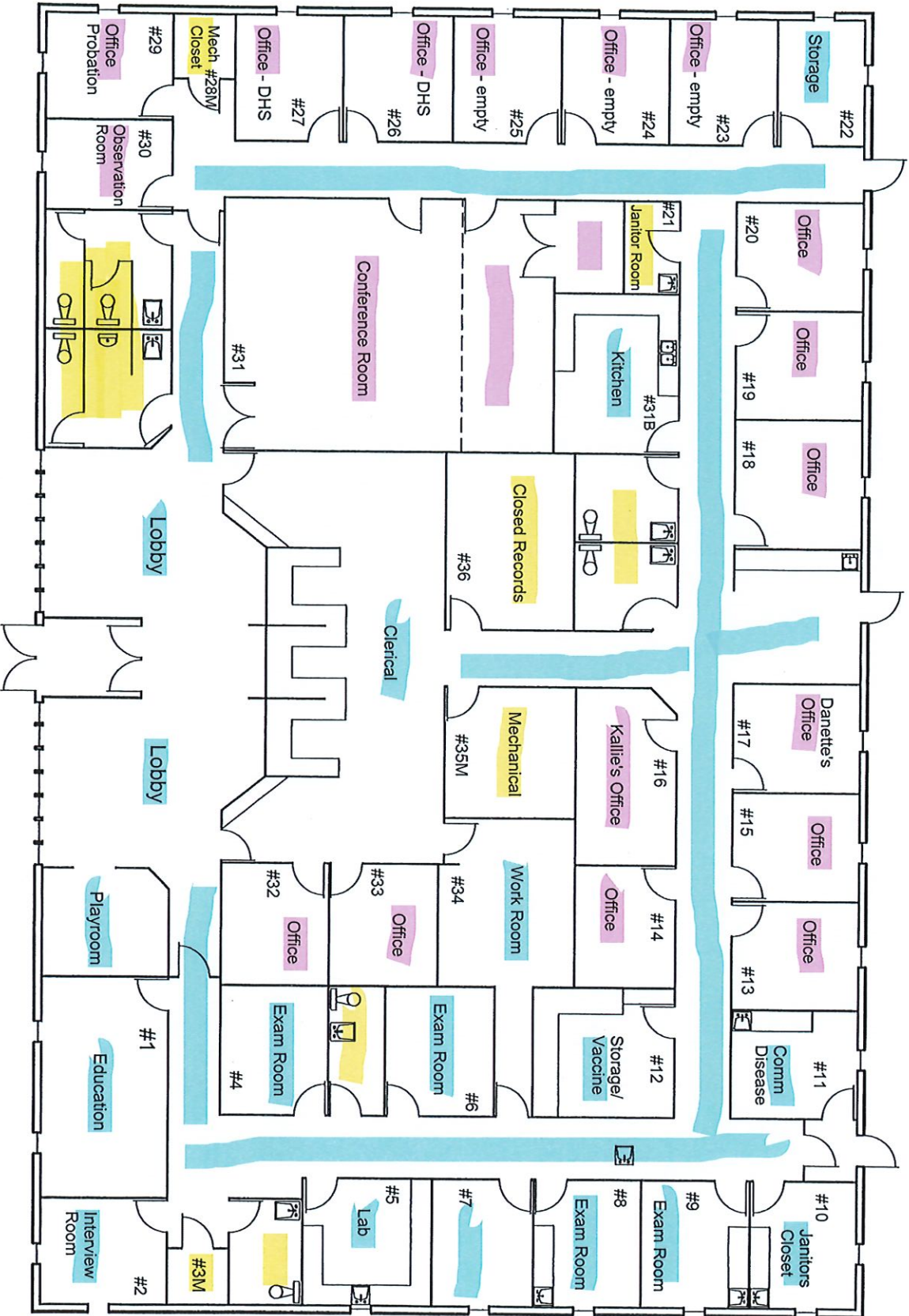
02 CLEANUP:

- 2.01 Contractor shall clean debris daily. This includes demoed material. When moving to a new area of the project, contractor shall move all materials. Contractor is responsible for entire cleanup and disposal of materials.
- 1.21 Shall protect floors, walls and other surfaces from damage.
- 1.22 Include final cleaning of flooring



Tillman County Health Department

1500 N. 10th, Frederick, OK, 73542



- Carpet
- Vinyl Planks
- Not Changing

TERMS AND CONDITIONS

1. Sealed bids will be opened in the Commissioner's Conference Room, Tillman County Courthouse, Frederick, Oklahoma, at the time and date shown on the invitation to bid form.
2. Late bids will not be considered. Bids must be received in sealed envelopes (one to an envelope) with bid number written on the outside of the envelope.
3. Unit prices will be guaranteed correct by the bidder.
4. Firm prices will be F.O.B. destination.
5. Purchases by Tillman County, Oklahoma, are not subject to state or federal taxes.
6. This bid is submitted as a legal offer and any bid when accepted by the County constitutes a firm contract.
7. Oklahoma laws require each bidder submitting a bid to a county for goods or services to furnish a completed and notarized Affidavit of Non-Collusion which is provided below.

AFFIDAVIT OF NON-COLLUSION

I, the undersigned, of lawful age, being first duly sworn on oath say the he (she) is the agent authorized by the bidder to submit the above bid. Affiant further states that the bidder has not been a party to any collusion among bidders in restraint of freedom of competition by agreement to bid at a fixed price or to refrain from bidding; or with any state official or employee as to quantity; quality or price in the prospective contract or any other terms of said prospective contract; or in any discussions between bidders and any state official concerning exchange of money or other thing of value for special consideration in the letting of a contract; that the bidder/contractor has not paid, given or donated or agreed to pay, give or donate to any officer or employee of the State of Oklahoma (or other entity) any money or other thing of value, either directly or indirectly in the procuring of the award of a contract pursuant to this bid.

Firm: _____

Signed by: _____

Title: _____

Address: _____

Phone: _____

Subscribed and sworn before me this _____ day of _____, 20____.

(SEAL)

Notary Public (Clerk or Judge)

My commission expires: _____

NOTE: Other terms and conditions may be added at the discretion of the county officers.

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.					
	2 Business name/disregarded entity name, if different from above					
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____					
	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					
	<input type="checkbox"/> Other (see instructions) ▶ _____					Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.			Requester's name and address (optional)			
6 City, state, and ZIP code						
7 List account number(s) here (optional)						

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number													
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Part II 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: (a) I am exempt from backup withholding, or (b) 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 (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.