

**PROVIDE, DELIVER, INSTALL, AND TRAIN FOR USE OF A
CO2 LASER CUTTER AND ENGRAVER
FOR THE HAWAII STATE DEPARTMENT OF EDUCATION
WAIALUA HIGH AND INTERMEDIATE SCHOOL
IFB D23-036**

Chief Procurement Officer
Hawaii State Department of Education
Honolulu, Hawaii 96813

To Whom It May Concern:

The undersigned has carefully read and understands the terms and conditions specified in the Specifications, Special Conditions, and General Conditions attached hereto and hereby submits the following offer to perform the work specified herein, all in accordance with the true intent and meaning thereof. The undersigned further understands and agrees that by submitting this offer, 1) he/she is declaring his/her offer is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts, and 2) he/she is certifying that the price(s) submitted was (were) independently arrived at without collusion.

The undersigned represents: **(Check ✓ one only)**

A **Hawaii business** incorporated or organized under the laws of the State of Hawaii; **OR**

A **Compliant Non-Hawaii business** not incorporated or organized under the laws of the State of Hawaii, and, if applicable, registered at the State of Hawaii Department of Commerce and Consumer Affairs Business Registration Division to do business in the State of Hawaii.

State of incorporation: _____

Offeror is:

Sole Proprietor Partnership Corporation Joint Venture Other

Federal I.D. Number: _____ Hawaii General Tax License I.D. Number: _____

Payment address (other than street address below): _____

City, State, Zip Code: _____

Business address (street address): _____

City, State, Zip Code: _____

Date: _____

Respectfully submitted:

Phone Number: _____

Authorized (Original) Signature

Fax Number: _____

Name and Title (Type or Print)

E-mail Address: _____

*

Exact Legal Name of Company (Offeror)

*If Offeror is a "dba" or a "division" of a corporation, furnish the exact legal name of the corporation under which the awarded contract will be executed: _____

EXHIBIT A

OFFEROR INFORMATION

Offeror shall provide the Exhibit A, including attachments if applicable, within three (3) business days from STATE's request.

A. Brochures/Specifications Literature

Offeror shall submit with his bid manufacturer's brochures and/or specifications literature for all equipment offered. Upon request, Offeror shall provide, at his own expense and within five (5) calendar days from the STATE's request, additional information necessary to verify acceptability of equipment offered. Failure to comply with these requirements may result in rejection of bid.

Brochures/Specifications Literature YES

B. Authorized Distributor or Reseller

At the time of bidding, Offeror shall be an authorized distributor or reseller of CO2 Laser Cutter and Engraver. As evidence of this, Offeror may be requested to provide documentation from the manufacturer which verifies Offeror's status as an authorized distributor or reseller.

Authorized Distributor or Reseller Documentation Attached YES

C. Office Location

Offeror shall have an office from where business is conducted and from where the company is accessible to telephone calls for complaints or requests that need immediate attention. An answering service is not acceptable.

Company Name _____
Address Line 1 _____
Address Line 2 _____

Offeror shall be capable of providing, delivering, installing and training on a CO2 Laser Cutter and Engraver for the STATE. Offeror shall also be capable of providing warranty and maintenance service on CO2 Laser Cutter and Engraver already installed or to be installed, either directly or through an independent qualified service provider.

Company Name _____
Address Line 1 _____
Address Line 2 _____

D. Personnel

Offeror shall designate at least one (1) employee as the STATE point of contact (POC) for this contract. This individual shall be available during regular business hours, Monday through Friday excluding holidays, and shall be capable of answering questions, resolving problems, and providing sales, ordering, and follow-up assistance.

Point of Contact (POC) Name _____
POC Telephone Number _____
POC Email Address _____