MANDATORY BID FORM

Bidders <u>must</u> download The Mandatory Bid Form in its entirety (open, save, or print documents(s) on their own computer system), enter pricing where indicated, complete any other required information, sign all appropriate forms, and attach (upload) the completed Mandatory Bid Form to their HlePRO online bid submission.

BID CHECKLIST

THE FOLLOWING ITEM IN THIS TABLE MUST BE ADDRESSED <u>AND</u> THE COMPLETED BID CHECKLIST SHALL BE UPLOADED WITH THE BIDDERS HIEPRO SUBMISSION.

REQUIREMENT DESCRIPTION	ACTION REQUIRED	BIDDER
		TO COMPLETE
Review Notice to Bidders	Read and understood	
Bid Requirements	Read and understood	
Technical Specifications	Read and understood	
Special Provisions	Read and understood	
Bid Checklist (Mandatory Bid Form)	Complete and attach to HIePRO	
Bid Price List (Mandatory Bid Form)	Complete, sign, and attach to HlePRO*	
Wage Certificate (Mandatory Bid Form)	Complete, sign, and attach to HlePRO	
Information Required form Bidders (Mandatory Bid Form)	Complete and attach to HIePRO	
Bid Signature Page (Mandatory Bid Form)	Complete, sign, and attach to HlePRO	
Business Classification Statement (Mandatory Bid Form)	Complete, sign, and attach to HlePRO	

^{*} The University is not responsible for any errors in bid calculations or extensions not attributed to a system error.

BID PRICE LIST

Bidders to complete this section. Bidders must bid on all estimated hours in order to be considered for award.

Estimated Hours		Hourly Rate \$		Total Aggregate Amount
3,665 Hours	X	\$	=	\$

- THE PROPOSED PRICES FOR ALL ITEMS <u>SHALL</u> INCLUDE LABOR, OVERHEAD, FEES (IF ANY) AND ALL APPLICABLE TAXES.
- THE TOTAL AGGREGATE BID PRICE ABOVE SHALL BE ENTERED INTO HIEPRO
- THE TOTAL AGGREGATE BID PRICE ENTERED INTO HIEPRO MUST BE IDENTICAL TO THE NUMBER SHOWN ABOVE.

WAGE CERTIFICATE

Description of Project:
(To be filled in by prospective bidder)
Pursuant to Section 103-55, HRS, I hereby certify that if awarded the contract in exces of \$25,000, the services to be performed will be performed under the following conditions:
1. The services to be rendered shall be performed by employees paid at wages or salaries not less than wages paid to the public officers and employees for similar work, if similar positions are listed in the classification plan of the public sector.
2. All applicable laws of the Federal and State governments relating to worker's compensation, unemployment compensation, payment of wages, and safety will be fully complied with.
I understand that all payments required by Federal and State laws to be made by employers for the benefit of their employees are to be paid in addition to the base wages required by Section 103 55, HRS.
Bidder:
Signature:
Title:
Date [.]

INFORMATION REQUIRED FROM BIDDER

1) REFERENCES

Bidder is required to furnish the following information as part of the bid. The University reserves the right to reject the bid submitted by any bidder who does not provide complete information or who does not demonstrate that they can comply with the terms and conditions of the IFB.

		undersigned provides g	•	esses of THREE (3) agends are/were provided service	
		Company	Contact Person	Address & Telephone N	<u>lo.</u>
	1.				
	2.			_	
	3.				
		niversity reserves the rig mance on other jobs ha		mitted by any bidder whos	ie
2)	PREMITTANCE ADDRESS In the event that the Bidder is awarded this contract and its remittance address differs from the address shown below, please indicate remittance address below:				
	Street	Address or P. O. Box			
	City S	tate Zip Code			
3)	Numb	RIENCE er of years of experienc num of FIVE [5] years of	•	vices	
4)	STAF Numb		ersonnel regularly emp	loyed by bidder in Hawaii _.	
5)		NSING sed to perform guard or er must be licensed at tin		aii? Yes No	_

6) LOCATION

Bidder's principal location	
	Street Address
	City and State
Place of business in Hawaii	
Place of pusiness in Hawaii	Name of Company
	Street Address
	City and State

BID SIGNATURE PAGE

(IF BY INDIVIDUAL)	NAME (Signature)		TYPED NAME		
	D.B.A.				
FEDERAL TAXPAYER IDENTIFICATION NUMBER	ADDRESS				
	CITY	STATE	ZIP CODE		
EMAIL ADDRESS	TELEPHONE NUMBER		FAX NUMBER		
(IF BY PARTNERSHIP)	OFFICIAL/LEGAL NAMI	E OF FIRM			
FEDERAL TAXPAYER IDENTIFICATION NUMBER	NAME (Signature)		TYPED NAME		
	PARTNER				
EMAIL ADDRESS	ADDRESS				
	CITY	STATE	ZIP CODE		
	TELEPHONE NUMBER		FAX NUMBER		
(IF BY CORPORATION)	OFFICIAL/LEGAL NAME OF COMPANY				
FEDERAL TAXPAYER IDENTIFICATION NUMBER	*OFFICER (Signature)		TYPED NAME		
EMAIL ADDRESS	TITLE				
	ADDRESS OF COMPA	NY			
	CITY	STATE	ZIP CODE		
	TELEPHONE NUMBER		FAX NUMBER		
(SEAL)					

IF LICENSED OR INCORPORATED TO DO BUSINESS WITHIN THE STATE OF HAWAII AND SUBJECT TO THE PROVISIONS OF THE HAWAII GENERAL EXCISE TAX LAWS, INDICATE GENERAL EXCISE TAX LICENSE NUMBER

NOTE: FILL IN ALL BLANK SPACES WITH INFORMATION ASKED FOR OR BID MAY BE INVALIDATED.

^{*}For Corporations include evidence of the authority of this officer to submit a bid on behalf of the corporation, giving also, the address and names and addresses of the other officers.

BUSINESS CLASSIFICATION CERTIFICATION STATEMENT

Vendors:	Please complete the following information below. If you answer "No" to question No. 1, complete the certification portion and submit together with your bid document or quote.		
	I are taken from the Small Business Administration Rules and Regulations and the Federal legulation [FAR].) (Reference Section A on the reverse side of this form for Category Descriptions.)		
This is to cert	ify that the company identified below:		
1	IS a small business as defined in the Small Business Administration regulations. (see reverse for size standards).		
	IS NOT a small business as defined in the regulations. (If you checked here, STOP, GO TO CERTIFICATION BELOW.)		
2.	IS a small disadvantaged business concern and is identified, on the date of its representation, as a certified small disadvantaged business in the database maintained by the Small Business Administration (PRO-NET).		
3.	IS a women-owned small business concern of which at least 51% is owned, controlled, and managed by one or more women; or in the case of any publicly owned business, at least 51 percent of the stock of which is owned by one or more women.		
4.	IS a HUBZone small business concern that appears on the List of Qualified HUBZone Small Business Concerns maintained by the Small Business Administration.		
5.	IS a veteran-owned small business concern of which not less than 51 percent is owned, controlled and managed by one or more veterans; or in the case of any publicly owned business, at least 51 percent of the stock of which is owned by one or more veterans.		
6.	IS a service-disabled veteran-owned small business concern of which not less than 51 percent is owned, controlled and managed by one or more service-disabled veterans, or in the case of any publicly owned business, not less than 51 percent of the stock of which is owned by one or more service-disabled veterans as defined in 38 U.S.C. 101 (16).		
CERTIFICA	ATION:		
I hereby cer	tify the information supplied herein to be true and correct.		
Company I	Name:		
Type of Go	Signature of Company Officer ods/Services:		
*NAICS Co	ode:		
Company A			
	Title: Date:		

* North American Industry Classification System (NAICS)A. "SMALL BUSINESS" SIZE STANDARDS FOR FEDERAL SUB-CONTRACTORS. Small business size is determined by the primary NAICS Code. See Title 13 CFR,

Any misrepresentation shall be subject to the provisions stated in item B below.

Part 121 to determine your NAICS Code and the threshold for determining small business (revised as of January 1, 2004).

A "small business" is a concern including its affiliates, which is independently owned and operated. It is not dominant in the field of operations in which it is selling goods and services to a federal contractor. It meets the following size criteria for its particular industry:

- CONSTRUCTION TRADES "Small" if average annual receipts for preceding 3 years do not exceed \$12 million.
- 2. CONSTRUCTION, GENERAL CONTRACTORS "Small" if average annual receipts for preceding 3 years do not exceed \$28.5 million.
- 3. MANUFACTURING "Small" if 500 employees or less, except for some specific products which will increase the complement of employees to 750 and 1,000, respectively.
- 4. TRANSPORTATION "Small" if average annual receipts for preceding 3 years do not exceed the amount shown for specific services:

\$21.5 million – general freight trucking, local. \$3 million – travel agencies.

- 5. WHOLESALE TRADE, DURABLE AND NON-DURABLE GOODS "Small" if 100 employees or less.
- 6. RETAIL TRADE "Small" if average annual receipts for preceding 3 years do not exceed the amount shown for specific products:

\$6 million - lumber and building materials, paints, hardware.

- 7. SERVICES "Small" if average annual receipts for preceding 3 years do not exceed the amount shown for specific services:
 - a. \$21 million computer systems design services, custom computer programming services.
 - b. \$10.5 million refuse collection, protective guard services.
 - c.. \$14 million janitorial services.
 - d. \$21.5 million passenger car rental
 - e. \$21 million office Machinery and equipment rental & leasing
 - f. \$6 million general automobile repair, refrigeration & air conditioning.
- 8. ALL OTHER TYPES OF BUSINESS "Small" if 500 employees or less.

Where firm sizes are determined by annual receipts, and the concern is less than 3 complete fiscal years old, its total receipts means for the period it has been in business, divided by the number of weeks, including fractions of a week, and multiplied by 52.

- B. Notice. Under 15 U.S.C. 645(d), any person who misrepresents a firm's status as a small, small disadvantaged or women-owned small business concern in order to obtain a contract to be awarded under the preference programs established pursuant to sections 8(a), 8(d), 9, or 15 of the Small Business Act or any other provision of Federal law that specifically references section 8(d) for a definition of program eligibility, shall:
 - 1. Be punished by imposition of fine, imprisonment, or both;
 - 2. Be subject to administrative remedies including suspension and debarment; and
 - 3. Be ineligible for participation in a program conducted under the authority of the Act.