

ATTACHMENT**MANDATORY BID FORM**

Bidders **must** download the Mandatory Bid Form to Provide Security Guard Services on a Requirements Basis for University of Hawaii Maui College, Molokai Education Center 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

BIDDERS SHALL ACKNOWLEDGE EACH ITEM BELOW AND UPLOAD THE COMPLETED BID CHECKLIST WITH THE BIDDER'S HIEPRO SUBMISSION.

DESCRIPTION	ACTION REQUIRED	BIDDER ACKNOWLEDGE
Notice to Bidders	Read and understood	
Bid Requirements	Read and understood	
Technical Specifications	Read and understood	
Special Provisions	Read and understood	
Mandatory Bid Form		
Bid Checklist	Completed and attached to HlePRO bid	
Basic Bid	Completed and attached to HlePRO bid (University shall not be responsible for any errors in bid calculations or extensions.)	
Remittance Address	Completed and attached to HlePRO bid (if applicable)	
Information Required from Offeror (Pages 1 - 3)	Completed, signed, and attached to HlePRO bid	
Wage Certificate	Completed, signed, and attached to HlePRO bid	
Bid Signature Page	Completed, signed, and attached to HlePRO bid	
Business Classification Statement	Completed, signed, and attached to HlePRO bid	

BASIC BID

Prices shall include all costs (direct and indirect) to perform the guard services requested at all on-campus and off-campus locations specified, including overhead, profit, and applicable taxes.

Bidders must complete the section below and enter the **TOTAL BASIC BID** amount identically into HlePRO:

UNIVERSITY SECURITY OFFICER I (SR-14) - Parking/Patrol

Shift	Hourly Rate (Per Hour, Net)		Estimated Monthly Hours		Estimated Months		Total Aggregate Amount
Regular	\$	X	40 hours	X	12 months	=	\$
Night	\$	X	72 hours (night pay)	X	12 months	=	\$
TOTAL BASIC BID						=	\$

Prices shall include all costs (direct and indirect) to perform the guard services requested at all on-campus and off-campus locations specified, including overhead, profit, vehicle/equipment costs and applicable taxes.

All questions pertaining to the Technical Specifications must be submitted per the instructions in the **QUESTIONS AND REQUESTS FOR CLARIFICATION** section of the **NOTICE TO BIDDERS**. The submittal of a bid shall be considered as acceptance of the specifications as published.

REMITTANCE ADDRESS

In the event that the undersigned is awarded this contract and its remittance address differs from the address shown above, please indicate remittance address below:

Street Address or P. O. Box

City State Zip Code

INFORMATION REQUIRED FROM OFFEROR (Page 1)

<p>Bidder is required to furnish the following information as part of the bid submittal. The University reserves the right to reject the bid submitted by any bidder who does not provide complete information, whose performance on other jobs has been unsatisfactory, and who does not demonstrate that they can comply with the terms and conditions of the bid.</p>	
<p>PLACE OF BUSINESS IN HAWAII</p>	
<p>Company</p>	
Name	
Street Address	
City, State and Zip	
<p>Offeror's Principal Location (if different from place of business)</p>	
Street Address	
City, State and Zip	

<p>EXPERIENCE</p>				
Offeror licensed to perform guard services in Hawai'i (Check Yes or No)	YES		NO	
Minimum of ONE (1) year of experience at institutions of higher education (Check Yes or No)	YES		NO	
Number of guards regularly employed in Hawaii by the Offeror				

<p><u>REFERENCES</u></p>		
<p>Offerors shall provide the names of companies, contact persons, addresses and phone numbers of THREE (3) agencies for whom the undersigned currently provides security guard services in the State of Hawaii. The University reserves the right to reject the bid of any offeror that provides inaccurate and incomplete information. Further, if in the University's opinion, the references provided are unsatisfactory, the University may reject the quotation and notify the offeror in writing.</p>		
Company	Contact Person	Address & Phone Number

INFORMATION REQUIRED FROM OFFEROR (Page 2)

COMPANY REPRESENTATIVE SIGNATURE AND DATE
PRINTED NAME OF COMPANY REPRESENTATIVE
TITLE OF COMPANY REPRESENTATIVE
CONTACT EMAIL ADDRESS AND TELEPHONE NUMBER

PERSONNEL QUALIFICATIONS	
1.	NAME
	EDUCATIONAL BACKGROUND AND APPLICABLE TRAINING EXPERIENCE
2.	NAME
	EDUCATIONAL BACKGROUND AND APPLICABLE TRAINING EXPERIENCE

INFORMATION REQUIRED FROM OFFEROR (Page 3)

PERSONNEL QUALIFICATIONS	
3.	NAME
	EDUCATIONAL BACKGROUND AND APPLICABLE TRAINING EXPERIENCE
4.	NAME
	EDUCATIONAL BACKGROUND AND APPLICABLE TRAINING EXPERIENCE
5.	NAME
	EDUCATIONAL BACKGROUND AND APPLICABLE TRAINING EXPERIENCE
6.	NAME
	EDUCATIONAL BACKGROUND AND APPLICABLE TRAINING EXPERIENCE

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 excess 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.

Offeror: _____

Signature: _____

Title: _____

Date: _____

(IF BY INDIVIDUAL)

 FEDERAL TAXPAYER
 IDENTIFICATION NUMBER

 EMAIL ADDRESS

 NAME (Signature)

 TYPED NAME

 D.B.A.

 ADDRESS

 CITY

 STATE

 ZIP CODE

 TELEPHONE NUMBER

 FAX NUMBER

(IF BY PARTNERSHIP)

 FEDERAL TAXPAYER
 IDENTIFICATION NUMBER

 EMAIL ADDRESS

 OFFICIAL/LEGAL NAME OF FIRM

 NAME (Signature)

 TYPED NAME

 PARTNER

 ADDRESS

 CITY

 STATE

 ZIP CODE

 TELEPHONE NUMBER

 FAX NUMBER

(IF BY CORPORATION)

 FEDERAL TAXPAYER
 IDENTIFICATION NUMBER

 EMAIL ADDRESS

 OFFICIAL/LEGAL NAME OF COMPANY

 *OFFICER (Signature)

 TYPED NAME

 TITLE

 ADDRESS OF COMPANY

 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

_____.

**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.*

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

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.

(Terms used are taken from the Small Business Administration Rules and Regulations and the Federal Acquisition Regulation [FAR].) (Reference Section A on the reverse side of this form for Category Descriptions.)

This is to certify 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).

CERTIFICATION:

I hereby certify the information supplied herein to be true and correct.

Company Name: _____

Signature of Company Officer

Type of Goods/Services: _____

*NAICS Code: _____

Company Address: _____

Print Name: _____

Title: _____

Date: _____

Any misrepresentation shall be subject to the provisions stated in item B on the reverse side.

* 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, 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:

1. 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.