MANDATORY BID FORM

Bidders **must** 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 HIePRO online bid submission.

BID CHECKLIST

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

REQUIREMENT DESCRIPTION	ACTION REQUIRED	COMPLETE
Notice to Bidders, Page 2	Read and understood	
Bid Requirements, Pages 3 - 4	Read and understood	
Technical Specifications, Pages 5 - 10	Read and understood	
Special Provisions, Pages 11 - 16	Read and understood	
Bid Checklist	Complete and attach to HIePRO	
Bid Price	Complete, sign, and attach to HIePRO*	
References	Complete, sign, and attach to HIePRO	
Bid Signature Page	Complete, sign, and attach to HIePRO	
Business Classification Certification Statement	Complete, sign, and attach to HIePRO	

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

BID PRICE

Description	**Total Cost**
Media monitoring, media relations and analytics services for a ONE (1) year period in accordance with the Technical Specifications	**$**
THE TOTAL COST SHALL INCLUDE ALL HARDWARE, SOFTWARE, MAN-HOURS, MATERIALS, TRAVEL-RELATED EXPENSES, OVERHEAD, AND ALL APPLICABLE FEES AND TAXES.	

PRICE FOR ADDITIONAL PLATFORM USER

It shall be understood that the following price shall be used at the option of the University pursuant to TECHNICAL SPECIFICATION 1, Sub-item F.2.d.

Price for Additional Platform User
$

REFERENCES

Three (3) references of prior clients for whom the undersigned provided media monitoring, media intelligence, media relations, media analytics, or similar multi-channel media services within the last SEVEN (7) years, including the name of the clients, the name, title, phone number, and email address of ONE (1) contact person, the period of services, the description of services, and the cost of services are as follows:

Client Name:	
Contact Person (Name and Title):	
Phone number and Email address:	
Period of services:	
Description of services:	
Cost of services:	

Client Name:	
Contact Person (Name and Title):	
Phone number and Email address:	
Period of services:	
Description of services:	
Cost of services:	

Client Name:	
Contact Person (Name and Title):	
Phone number and Email address:	
Period of services:	
Description of services:	
Cost of services:	

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

(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 NAME 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 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

CONTRACTORS: Please complete the information below. Terms used are taken from the U.S. Small Business Administration (SBA) Rules and Regulations (https://www.sba.gov/) and the U.S. Code of Federal Regulations (CFR). The term "controlled" refers to the management and daily operation of the business concern.

The company identified below (check all that apply):

1. _____ **IS NOT** a small business concern as defined in the regulations **(If you checked here, STOP. GO TO CERTIFICATION BELOW.)**

   _____ **IS a small business concern,** defined as one that is independently owned and operated, is organized for profit, is not dominant in its field, meets the SBA size standard eligibility (*see* reverse side of this form for examples of size standards), is registered and has its status represented in the U.S. Government's System for Award Management (SAM) database. *See* http://www.sba.gov/content/what-sbas-definition-small-business-concern.

2. _____ IS a **small disadvantaged business concern** of which at least 51% is unconditionally and directly owned and controlled by one or more socially disadvantaged and economically disadvantaged persons who are U.S. citizens. *See* 13 CFR 124.105 for exceptions.
3. _____ IS a **women-owned small business concern** of which at least 51% is unconditionally and directly owned and controlled by one or more women who are U.S. citizens. *See* 13 CFR 127.
4. _____ IS a **HUBZone small business concern** that meets the certification eligibility requirements set by the U.S. SBA. *See* 13 CFR 126.
5. _____ IS a **veteran-owned small business concern** of which at least at least 51% is unconditionally and directly owned by one or more veterans or service-disabled veterans. *See* 38 CFR 74.
6. _____ IS a **service-disabled veteran-owned small business concern** of which at least 51% is unconditionally and directly owned by one or more service-disabled veterans. In the case of any publicly owned business, not less than 51% of the stock of which is owned by one or more service-disabled veterans. The management and daily business operations of which are controlled by one or more service-disabled veterans, or in the case of a veteran with a permanent and severe disability, a spouse or permanent caregiver of such veteran. *See* 13 CFR 125.11 et al.

CERTIFICATION

I hereby certify the information supplied herein to be true and correct. (Any misrepresentation shall be subject to the provisions stated in item B on the next page.)

Company Name: _____ _____
Signature of Company Officer

Company Address: _____ Print Name: _____

_____ Title: _____

_____ Date: _____

Type of Goods/Services: _____

North American Industry Classification System (NAICS) Code: _____

A. A small business concern is one that is independently owned and operated, is organized for profit, is not dominant in its field, has a place of business in the U.S., and operates primarily within the U.S. or makes a significant contribution to the U.S. economy. Size standard eligibility is based on the average number of employees for the preceding 12 months or on sales volume averaged over a 3-year period. *See* 13 CFR 121.201 for size standards identified by NAICS codes. The size standards for a few industries are shown below and are subject to change at any time.

1. SPECIALTY TRADE CONTRACTORS – "Small" if average annual receipts for preceding 3 years do not exceed $15 million.

2. CONSTRUCTION, GENERAL CONTRACTORS – "Small" if average annual receipts for preceding 3 years do not exceed $36.5 million.

3. MANUFACTURING – "Small" if 500 employees or less, except for some specific products which will increase the complement of employees to 750 or 1,000.

4. TRANSPORTATION – "Small" if average annual receipts for preceding 3 years do not exceed the amount shown for specific services.

$27.5 million – general freight trucking, local.

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.

   $7.5 million – hardware stores.

7. SERVICES – "Small" if average annual receipts for preceding 3 years do not exceed the amount shown for specific services:

   a) $27.5 million – computer systems design services, custom computer programming services
      $20.5 million – security guards and patrol services
   b) $18 million – janitorial services
   c) $38.5 million – passenger car rental
   d) $32.5 million – office machinery and equipment rental & leasing
   e) $7.5 million – general automotive repair

Annual receipts of a concern which has been in business for less than 3 complete fiscal years means the total receipts for the period the concern has been in business divided by the number of weeks in business, multiplied by 52. *See* 13 CFR 121.104.

B. Notice. Under 15 U.S.C. 645(d), any person who misrepresents a firm's status as a small business concern, a qualified HUBZone small business concern, a small business concern owned and controlled by socially and economically disadvantaged individuals, or a small business concern owned and controlled by women in order to obtain a contract to be awarded under the preference programs established pursuant to 15 U.S.C. sections 637(a), 637(d), 638, 644, or 657(a), 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 Small Business Investment Act of 1958.