

FURNISH REFUSE COLLECTION SERVICES FOR KEWALO BASIN HARBOR, AND 59 AHUI STREET HONOLULU, OAHU, HAWAII

Hawaii Community Development Authority  
547 Queen Street  
Honolulu, Hawaii 96813

To Whom It May Concern:

The undersigned has carefully read and understands the terms and conditions specified in the Invitation for Bids, including the Specifications, Special Provisions and General Conditions attached hereto and hereby submits the following bid 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 bid, 1) he/she is declaring his/her bid 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, but 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: \_\_\_\_\_

Bidder is:

Sole Proprietor    Partnership    \*Corporation    Joint Venture    Other \_\_\_\_\_

Federal I.D. No.: \_\_\_\_\_ Hawaii General Excise Tax License I.D. No.: \_\_\_\_\_

Payment address (other than street address below): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Business address (street address): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Respectfully submitted:

Date: \_\_\_\_\_

(x) \_\_\_\_\_

Authorized (Original) Signature

Telephone No.: \_\_\_\_\_

\_\_\_\_\_  
Name and Title (Please Type or Print)

Fax No.: \_\_\_\_\_

\*\*

E-mail Address: \_\_\_\_\_

\_\_\_\_\_  
**Exact Legal Name of Company (Bidder)**

\*\*If Bidder shown above 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:

**BIDDER SHALL PROVIDE THE FOLLOWING INFORMATION:**

1. Permanent **Oahu** Office Location: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. Telephone Number: \_\_\_\_\_

3. Bidder must be able to verbally respond to the HCDA within two (2) hours of a call/request. Furnish contact information for the person(s) to contact regarding the "day-to-day" operations and performance of the work provided.

Name/ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

4. City and County of Honolulu Refuse Collection License Number: \_\_\_\_\_

**Bidder:** \_\_\_\_\_  
**Name of Company**

Are services to be rendered by company employees similar or equal to public officers and employees listed in the attached employee classification description?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, complete the following:

\_\_\_\_\_ % represents the labor costs for the Total Basic Bid.

**Years of Experience** = \_\_\_\_\_

Bidder must have a minimum of three (3) consecutive years of experience in this field.

**Company and/or Government Agency References**

List a minimum of two (2) companies and/or government agencies that bidder has provided services similar to the services specified herein. Do not list the HCDA as a reference. The State reserves the right to contact these companies/government agencies to ascertain the quality and timeliness of services provided.

Name of Company/Government Agency                      Name of Contact Person                      Phone No.

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**Bidder:** \_\_\_\_\_  
**Name of Company**

Insurance Coverage	Carrier	Policy No.
Commercial General Liability:		
Automobile Liability:		
Worker's Compensation:		
Temporary Disability Insurance:		
Prepaid Health Care:		
Unemployment Insurance: State of Hawaii Labor No.:		

If you are not required to have one or more of the above coverages, please explain below:

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**Bidder:** \_\_\_\_\_  
**Name of Company**

FURNISH REFUSE COLLECTION SERVICES FOR KEWALO BASIN HARBOR, AND 59 AHUI STREET  
HONOLULU, OAHU, HAWAII

Hawaii Community Development Authority  
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The following bid is hereby submitted for the services specified in HCDA IFB 02-2019 to furnish Refuse Collection Services at the Kewalo Basin Harbor and 59 Ahui Street under the jurisdiction of the HCDA, for a three (3) year period.

**PART A: Original Contract Period (36 months)**

Item No.	Description – Basic Bid	A. Unit Price*	B. Qty (# of months)	Total (A x B)
1	Kewalo Basin Harbor Harbor Master's Office <b>Monthly service:</b>	\$	12	\$
2	Kewalo Basin Harbor Charter Boat Building <b>Monthly service:</b>	\$	12	\$
3	Kewalo Basin Harbor Diamond Head Parking Lot <b>Monthly service:</b>	\$	12	\$
4	59 Ahui Street <b>Monthly service (or as needed):</b>	\$	12	\$
	<b>BASIC BID ANNUAL SUM TOTAL</b> (Add items 1, 2, 3, and 4)	N/A	N/A	**\$

\*Unit Bid Price shall include costs for all labor, equipment, materials, applicable taxes (including the Hawaii General Excise Tax) and any other expenses incurred to provide services as specified herein.

**\*This is the amount that should be entered on HlePRO. HlePRO will automatically extend out the three (3) year term.**

**\*\*Service costs covered by the \$7,500 annual allowance, as described in Section 2.11 of IFB HCDA 02-2019, shall NOT be included in this bid. The \$7,500 annual allowance will be added to the contract separately.**

HCDA reserves the right to reject any and all bids.

Bidder: \_\_\_\_\_  
Name of Bidder

FURNISH REFUSE COLLECTION SERVICES FOR KEWALO BASIN HARBOR, AND 59 AHUI STREET HONOLULU, OAHU, HAWAII

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**PART B: Supplemental Contract Periods (12 months each)**

Item No.	Description – Basic Bid	A. Unit Price*	B. Qty (# of months)	Total (A x B)
1	Kewalo Basin Harbor Harbor Master’s Office <b>Monthly service:</b>	\$	12	\$
2	Kewalo Basin Harbor Charter Boat Building <b>Monthly service:</b>	\$	12	\$
3	Kewalo Basin Harbor Diamond Head Parking Lot <b>Monthly service:</b>	\$	12	\$
4	59 Ahui Street <b>Monthly service (or as needed):</b>	\$	12	\$
<b>BASIC BID ANNUAL SUM TOTAL</b> (Add items 1, 2, 3, and 4)		N/A	N/A	<b>**\$</b>

\*Unit Bid Price shall include costs for all labor, equipment, materials, applicable taxes (including the Hawaii General Excise Tax) and any other expenses incurred to provide services as specified herein.

**\*This is the amount that should be entered on HlePRO.**

**\*\*Service costs covered by the \$7,500 annual allowance, as described in Section 2.11 of IFB HCDA 02-2019, shall NOT be included in this bid. The \$7,500 annual allowance will be added to the contract separately.**

**HCDA reserves the right to reject any and all bids.**

**Bidder:** \_\_\_\_\_  
**Name of Bidder**

**WAGE CERTIFICATE  
FOR SERVICE CONTRACTS**  
(See Special Provisions)

Subject: IFB No.: HCDA 02-2019  
Title of IFB: Furnish Refuse Collection Services for Kewalo Basin Harbor,  
and 59 Ahui Street

Pursuant to Section 103-55, Hawaii Revised Statutes (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. All applicable laws of the federal and state governments relating to workers' compensation, unemployment compensation, payment of wages, and safety will be fully complied with; and
2. The services to be rendered shall be performed by employees paid at wages or salaries not less than the wages paid to public officers and employees for similar work, with the exception of professional, managerial, supervisory, and clerical personnel who are not covered by Section 103-55, HRS.

I understand that failure to comply with the above conditions during the period of the contract shall result in cancellation of the contract, unless such noncompliance is corrected within a reasonable period as determined by the procurement officer. Payment in the final settlement of the contract or the release of bonds, if applicable, or both shall not be made unless the procurement officer has determined that the noncompliance has been corrected; and

I further 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 wage required by section 103-55, HRS.

Bidder \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_