



## Invitation for Bid Amendment #2

Solicitation Number	021220-926-48705-03/09/20
Date Printed	02/19/20
Date Issued	02/19/20
Procurement Officer	Robert E Tyner
Phone	(843) 574- 6279
E-mail Address	<a href="mailto:Robert.tyner@tridenttech.edu">Robert.tyner@tridenttech.edu</a>

DESCRIPTION: Chemical Spills First Responder Services for TTC - 2020

*The Term "Offer" Means Your "Bid" or "Proposal".*

SUBMIT OFFER BY (Opening Date/Time): **03/09/20 @ 2:00 PM EST**      See "Deadline For Submission Of Offer" provision

QUESTIONS MUST BE RECEIVED BY: **Deadline has passed.**      See "Questions From Offerors" provision

NUMBER OF COPIES TO BE SUBMITTED: **1**

SUBMIT YOUR SEALED OFFER TO EITHER OF THE FOLLOWING ADDRESSES:

MAILING ADDRESS:  
 Trident Technical College  
 Procurement Office  
 PO Box 118067  
 Charleston, SC 29423  
**Fax: 843 574-6395**

PHYSICAL ADDRESS  
 Trident Technical College  
 Procurement Office  
 Building 940, Suite G, Room 110  
 2050 Mabeline Rd. N. Chas SC 29406  
**See "Submitting Your Offer" provision**

ALL MAIL IS PICKED UP FROM THE US POSTAL SERVICE ONCE DAILY AT AROUND 8:00 A.M. (EXCLUDING WEEKENDS AND HOLIDAYS).

CONFERENCE TYPE: <b>Pre-bid meeting (not mandatory)</b> DATE & TIME: <b>See page (15) for details</b>	LOCATION: See page (15) for details
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AWARD & AMENDMENTS	Award will be posted at the Physical Address stated above on 03/13/20. The award, this solicitation, and any amendments will be posted at the following web address: <a href="https://www.tridenttech.edu/about/departments/proc/ttc_solic.htm">https://www.tridenttech.edu/about/departments/proc/ttc_solic.htm</a> .
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You must submit a signed copy of this form with Your Offer. By submitting a bid or proposal, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of thirty (30) calendar days after the Opening Date.

NAME OF OFFEROR (Full legal name of business submitting the offer)	OFFEROR'S TYPE OF ENTITY: (Check one)
AUTHORIZED SIGNATURE  (Person signing must be authorized to submit binding offer to enter contract on behalf of Offeror named above.)	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation (tax-exempt) <input type="checkbox"/> Corporate entity (not tax-exempt) <input type="checkbox"/> Government entity (federal, state, or local) <input type="checkbox"/> Other (See "Signing Your Offer" provision.)
TITLE (Business title of person signing above)	
PRINTED NAME (Printed name of person signing above)	DATE SIGNED
Instructions regarding Offeror's name: Any award issued will be issued to, and the contract will be formed with, the entity identified as the offeror above. An offer may be submitted by only one legal entity. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, <i>i.e.</i> , a separate corporation, partnership, sole proprietorship, etc.	
STATE OF INCORPORATION  (If Offeror is a corporation, identify the state of Incorporation.)	
TAXPAYER IDENTIFICATION NO.  (See "Taxpayer Identification Number" provision)	

**PAGE TWO**

**(Return Page Two with Your Offer)**

<b>HOME OFFICE ADDRESS</b> (Address for offeror's home office / principal place of business)	<b>NOTICE ADDRESS</b> (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)  _____ Address  _____ Area Code – Number – Extension                      Facsimile  _____ E-mail Address
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<b>PAYMENT ADDRESS</b> (Address to which payments will be sent.) (See "Payment" clause)   ___ Payment Address same as Notice Address ( <b>check only one</b> ) ___ Payment Address same as Home Office Address	<b>ORDER ADDRESS</b> (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)   ___ Order Address same as Home Office Address ___ Order Address same as Notice Address ( <b>check only one</b> )
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**ACKNOWLEDGMENT OF AMENDMENTS**  
 Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision)

Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date

<b>DISCOUNT FOR PROMPT PAYMENT</b> (See "Discount for Prompt Payment" clause)	10 Calendar Days (%)	20 Calendar Days (%)	30 Calendar Days (%)	___ Calendar Days (%)
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**PREFERENCES - A NOTICE TO VENDORS (SEP. 2009):** On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at [www.procurement.sc.gov/preferences](http://www.procurement.sc.gov/preferences) . **ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT. VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU'VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES.** [11-35-1524(E)(4)&(6)]

**PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE:** Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C)(1)(i)&(ii)) or the Resident Contractor Preference (11-35-1524(C)(1)(iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)).

\_\_\_ In-State Office Address same as Home Office Address  
 \_\_\_ In-State Office Address same as Notice Address (**check only one**)

Bidders shall acknowledge receipt of this Amendment prior to date and time specified in the solicitation, or as amended, by one of the following methods: (1) by signing and returning the Amendment, (2) by letter, or (3) by submitting a bid that indicates in some way that the bidder received the amendment. Failure of your acknowledgement to be received at the issuing office prior to date and time specified may result in rejection of your offer. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided such telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

THE SOLICITATION IS AMENDED AS PROVIDED HEREIN. INFORMATION OR CHANGES RESULTING FROM QUESTIONS WILL BE SHOWN IN A QUESTION-AND-ANSWER FORMAT. ALL QUESTIONS RECEIVED HAVE BEEN REPRINTED BELOW. THE "STATE'S RESPONSE" SHOULD BE READ WITHOUT REFERENCE TO THE QUESTIONS. THE QUESTIONS ARE INCLUDED SOLELY TO PROVIDE A CROSS-REFERENCE TO THE POTENTIAL OFFEROR THAT SUBMITTED THE QUESTION. QUESTIONS DO NOT FORM A PART OF THE CONTRACT; THE "STATE'S RESPONSE" DOES. ANY RESTATEMENT OF PART OR ALL OF AN EXISTING PROVISION OF THE SOLICITATION IN AN ANSWER DOES NOT MODIFY THE ORIGINAL PROVISION EXCEPT AS FOLLOWS: UNDERLINED TEXT IS ADDED TO THE ORIGINAL PROVISION. STRICKEN TEXT IS DELETED.

**The college will not accept faxed amendments.**

IFB #: 021220-926-48705-03/09/20

Title: Chemical Spills First Responder Services for TTC – 2020

Is hereby amended as follows:

**Changes related to questions:**

Q-1: How should the bidding contractor represent equipment not specified in the bidding schedule that is commonly used during spill cleanups of varying character? Shall we attach an additional rate sheet for these items?

A-2: State's response: Change: The bidding contractor may attach an equipment, supplies, and labor price list for any equipment or other items not specified on the bidding schedule.

Q-2: May the bidding contractor represent disposal pricing more specific to the solid vs. liquid waste characteristic for hazardous and non-hazardous characteristic waste disposal line items?

A-2: State's Response: Change: The contractor may represent disposal pricing more specific to the solid vs. liquid waste characteristic for hazardous and non-hazardous characteristic waste disposal line items. See revised bidding schedule.

Q-3: Please confirm paragraph 2 on page 17 of the solicitation, "Complete the section of the bidding schedule identified as "For Informational Purposes Only...." will be stricken as this section as it was not included in the bidding schedule.

A-3: State's Response: Change: Paragraph 2 on page 17 has been stricken.

**Bidding Instructions:**

~~Complete the section of bidding schedule identified as "For Informational Purposes Only" for discount off list price for materials and supplies not listed on the bidding schedule or Time and Materials sheet used during remediation, and mark up over list price for third party equipment rentals for equipmet not on the bidding schedule or listed on the Time and Materials sheet needed to remediate a spill.~~

**VIII. Bidding Schedule**

**Revised by Amendment 2**

**IFB #: 021220-926-48705-03/09/20**

**Unit price shall be shown.**

**Complete the following:**

		Lot 1			
Item #	Qty U/M	Description		Unit Price	Total
1		Per hour cost of labor utilized for clean-up of spilled Materials during <u>normal business hours</u> of : 7:00 AM through 5:00 PM Monday –Friday			
		(Hours indicated are estimated and are for evaluation purpose only.)			
	20 Hrs		Supervisor:	\$ _____/hr	\$ _____
	20 Hrs		Field technician:	\$ _____/hr	\$ _____
	20 Hrs		Senior technician:	\$ _____/hr	\$ _____
20 Hrs		Equipment Operator:	\$ _____/hr	\$ _____	
		Resident Contractor Preference: _____ Resident Subcontractor Pref. (2%) _____ Number of subcontractors claimed: _____ Resident Subcontractor Pref. (4%) _____ Number of subcontractors claimed: _____			
2		Per hour cost of labor utilized for clean-up of spilled materials <u>after normal business hours</u> of: 5:01PM through 6:59AM Monday – Friday			
		(Hours indicated are estimated and are for evaluation purpose only.)			
	10 Hrs		Supervisor:	\$ _____/hr	\$ _____
	10 Hrs		Field technician:	\$ _____/hr	\$ _____
	10 Hrs		Senior technician:	\$ _____/hr	\$ _____
10 Hrs		Equipment Operator:	\$ _____/hr	\$ _____	
		Resident Contractor Preference: _____ Resident Subcontractor Pref. (2%) _____ Number of subcontractors claimed: _____ Resident Subcontractor Pref. (4%) _____ Number of subcontractors claimed: _____			

3	<p>5 Hrs</p> <p>5 Hrs</p> <p>5 Hrs</p> <p>5 Hrs</p>	<p>Per hour cost of labor utilized for clean-up of spilled materials during <u>week-end hours</u> of: 5:01PM Friday through 6:59AM Mondays.</p> <p>(Hours indicated are estimated and are for evaluation purpose only.)</p> <p>Supervisor: \$ _____/hr</p> <p>Field technician: \$ _____/hr</p> <p>Senior technician: \$ _____/hr</p> <p>Equipment Operator: \$ _____/hr</p> <p>Resident Contractor Preference: _____</p> <p>Resident Subcontractor Pref. (2%) _____</p> <p>Number of subcontractors claimed: _____</p> <p>Resident Subcontractor Pref. (4%) _____</p> <p>Number of subcontractors claimed: _____</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>
4	<p>5 Hrs</p> <p>5 Hrs</p> <p>5 Hrs</p> <p>5 Hrs</p>	<p>Per hour cost of labor utilized for clean-up of spilled materials during <u>holiday hours</u>:</p> <p>(Hours indicated are estimated and are for evaluation purpose only.)</p> <p>Supervisor: \$ _____/hr</p> <p>Field technician: \$ _____/hr</p> <p>Senior technician: \$ _____/hr</p> <p>Equipment Operator: \$ _____/hr</p> <p>Resident Contractor Preference: _____</p> <p>Resident Subcontractor Pref. (2%) _____</p> <p>Number of subcontractors claimed: _____</p> <p>Resident Subcontractor Pref. (4%) _____</p> <p>Number of subcontractors claimed: _____</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>
5	<p>20 Hrs</p> <p>20 Hrs</p> <p>20 Hrs</p>	<p>Per hour cost of equipment utilized for clean-up of spilled Materials during <u>normal business hours</u> of : 7:00 AM through 5:00 PM Monday –Friday</p> <p>(Hours indicated are estimated and are for evaluation purpose only.)</p> <p>Emergency Response Van: \$ _____/hr</p> <p>VAC Truck: \$ _____/hr</p> <p>Pick-up/ca/van: \$ _____/hr</p> <p>Resident Contractor Preference: _____</p> <p>Resident Subcontractor Pref. (2%) _____</p> <p>Number of subcontractors claimed: _____</p> <p>Resident Subcontractor Pref. (4%) _____</p> <p>Number of subcontractors claimed: _____</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>

6	<p>10 Hrs</p> <p>10 Hrs</p> <p>10 Hrs</p>	<p>Per hour cost of equipment utilized for clean-up of spilled Materials <u>after normal business hours</u> of: 5:01PM through 6:59AM Monday – Friday</p> <p>(Hours indicated are estimated and are for evaluation purpose only.)</p> <p>Emergency Response Van: _____</p> <p>VAC Truck: _____</p> <p>Pick-up/car/van: _____</p> <p>Resident Contractor Preference: _____</p> <p>Resident Subcontractor Pref. (2%) _____</p> <p>Number of subcontractors claimed: _____</p> <p>Resident Subcontractor Pref. (4%) _____</p> <p>Number of subcontractors claimed: _____</p>	<p>\$ _____/hr</p> <p>\$ _____/hr</p> <p>\$ _____/hr</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>
7	<p>5 Hrs</p> <p>5 Hrs</p> <p>5 Hrs</p>	<p>Per hour cost of equipment utilized for clean-up of spilled Materials during <u>week-end hours</u> of: 5:01PM Friday through 6:59AM Mondays.</p> <p>(Hours indicated are estimated and are for evaluation purpose only.)</p> <p>Emergency Response Van: _____</p> <p>VAC Truck: _____</p> <p>Pick-up/car/van: _____</p> <p>Resident Contractor Preference: _____</p> <p>Resident Subcontractor Pref. (2%) _____</p> <p>Number of subcontractors claimed: _____</p> <p>Resident Subcontractor Pref. (4%) _____</p> <p>Number of subcontractors claimed: _____</p>	<p>\$ _____/hr</p> <p>\$ _____/h</p> <p>\$ _____/hr</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>
8	<p>5 Hrs</p> <p>5 Hrs</p> <p>5 Hrs</p>	<p>Per hour cost of equipment utilized for clean-up of spilled Materials during <u>holiday</u> hours.</p> <p>(Hours indicated are estimated and are for evaluation purpose only.)</p> <p>Emergency Response Van: _____</p> <p>VAC Truck: _____</p> <p>Pick-up/car/van _____</p> <p>Resident Contractor Preference: _____</p> <p>Resident Subcontractor Pref. (2%) _____</p> <p>Number of subcontractors claimed: _____</p> <p>Resident Subcontractor Pref. (4%) _____</p> <p>Number of subcontractors claimed: _____</p>	<p>\$ _____/hr</p> <p>\$ _____/hr</p> <p>\$ _____/hr</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>

9	500 Miles	<p>Cost per mile for transportation of hazardous waste streams – liquids.</p> <p>(Mileage indicated is estimated and is for evaluation purpose only.)</p> <p>Resident Contractor Preference: _____  Resident Subcontractor Pref. (2%) _____  Number of subcontractors claimed: _____  Resident Subcontractor Pref. (4%) _____  Number of subcontractors claimed: _____</p>	\$ _____/mile	\$ _____
10	500 Miles	<p>Cost per mile for transportation of hazardous waste streams – solids.</p> <p>(Mileage indicated is estimated and is for evaluation purpose only.)</p> <p>Resident Contractor Preference: _____  Resident Subcontractor Pref. (2%) _____  Number of subcontractors claimed: _____  Resident Subcontractor Pref. (4%) _____  Number of subcontractors claimed: _____</p>	\$ _____/mile	\$ _____
11	500 Miles	<p>Cost per mile for transportation of non-hazardous waste streams - liquids</p> <p>(Mileage indicated is estimated and is for evaluation purpose only.)</p> <p>Resident Contractor Preference: _____  Resident Subcontractor Pref. (2%) _____  Number of subcontractors claimed: _____  Resident Subcontractor Pref. (4%) _____  Number of subcontractors claimed: _____</p>	\$ _____ / mile	\$ _____
12	500 Miles	<p>Cost per mile for transportation of non-hazardous waste streams – solids</p> <p>(Mileage indicated is estimated and is for evaluation purpose only.)</p> <p>Resident Contractor Preference: _____  Resident Subcontractor Pref. (2%) _____  Number of subcontractors claimed: _____  Resident Subcontractor Pref. (4%) _____  Number of subcontractors claimed: _____</p>	\$ _____ / mile	\$ _____
13	1000 Lbs	<p>Cost per pound to dispose of hazardous waste Streams - liquids</p> <p>(Quantity indicated is estimated and is for evaluation purpose only.)</p> <p>Resident Contractor Preference: _____  Resident Subcontractor Pref. (2%) _____  Number of subcontractors claimed: _____  Resident Subcontractor Pref. (4%) _____  Number of subcontractors claimed: _____</p>	\$ _____/lbs	\$ _____



14	1000 Lbs	Cost per pound to dispose of hazardous waste Streams - solids  (Quantity indicated is estimated and is for evaluation purpose only.)  Resident Contractor Preference: _____ Resident Subcontractor Pref. (2%) _____ Number of subcontractors claimed: _____ Resident Subcontractor Pref. (4%) _____ Number of subcontractors claimed: _____	\$ _____/lbs	\$ _____
15	1000 Lbs.	Cost per pound to dispose of non-hazardous waste streams - liquids  (Quantity indicated is estimated and is for evaluation purpose only.)  Resident Contractor Preference: _____ Resident Subcontractor Pref. (2%) _____ Number of subcontractors claimed: _____ Resident Subcontractor Pref. (4%) _____ Number of subcontractors claimed: _____	\$ _____ / lbs.	\$ _____
16	1000 Lbs.	Cost per pound to dispose of non-hazardous Waste streams - solids	\$ _____ / lbs.	\$ _____
			Evaluated Total:	\$ _____

Certification:

\_\_\_\_\_ I am Currently be in the emergency response hazardous materials collection and disposal business.

\_\_\_\_\_ I am not currently in the emergency response hazardous materials collection and disposal business.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

SC Certified Minority Vendor: y\_\_ n\_\_

S.C. Cert #: \_\_\_\_\_