TRIDENT TECHNICAL COLLEGE	Solicitation Number 111218-941-44905-11/28/18 Date Printed 12/04/18 Date Issued 12/04/18									
Request for Quotation	Procurement Officer Robert E Tyner, C.P.M. Phone 843-574-6279									
Amendment #: 2     E-mail Address     Robert.tyner@tridenttech.edu										
DESCRIPTION: Provide HVAC Services for TTC St. George Site - 2018										
The Term "Offer" Means Your "Bid" or "Proposal".										
SUBMIT OFFER BY (Opening Date/Time): 12/10/18 @ 2:00PM EDT 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 OFFER TO EITHER OF THE FOLLOWING AD	DRESSES:									
MAILING ADDRESS:PHYSICAL ADDRESSTrident Technical CollegeTrident Technical CollegeProcurement OfficeProcurement OfficePO Box 118067Building 940, Suite G, Room 110Charleston, SC 294232050 Mabeline Rd. N. Chas SC 29406Fax: 843 574-6395See "Submitting Your Offer" provis										
ALL MAIL IS PICKED UP FROM THE US POSTAL SERVICE C AND HOLIDAYS).	ALL MAIL IS PICKED UP FROM THE US POSTAL SERVICE ONCE DAILY AT AROUND 8:00 A.M. (EXCLUDING WEEKENDS AND HOLIDAYS).									
CONFERENCE TYPE: N/A DATE & TIME:	LOCATION: N/A									
AWARD &       This solicitation, and any amendments with the solicitation of the solicitation.         AMENDMENTS       http://www.tridenttech.edu/about/depart	vill be posted at the following web address: ments/proc/ttc_solic.htm .									
of the Solicitation. You agree to hold Your Offer open for a minir										
NAME OF OFFEROR (Full legal name of business submitti										
	(Check one)									
AUTHORIZED SIGNATURE	Sole Proprietorship     Partnership									
	□ Corporation (tax-exempt)									
	□ Corporate entity (not tax-exempt)									
(Person signing must be authorized to submit binding offer to er behalf of Offeror named above.)	Definition Government entity (federal, state, or local)									
TITLE (Business title of perso	n signing above) (See "Signing Your Offer" provision.)									
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) COVER PAGE MMO (JAN. 2006)										

#### PAGE TWO (Return Page Two with Your Offer)

HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business)				NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)						
				Address						
			Area Code	– Number – Extens	ion	Facsir	nile			
							-			
					E-mail Addı	E-mail Address				
PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)				e ORDER ADDRI (See "Purchase	ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)					
_										
Payment Address same as Notice Address (check only one)				Order Address same as Home Office Address						
Payment Address same as Home Office Address				Order Add	Order Address same as Notice Address (check only one)					
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	Amendm	ent No.	Amendment Issue Date	
DISCOUNT FOR PROMPT PAYMENT (See "Discount for Prompt Payment" clause)			endar Days (%)	30 Calendar Da	ıys (%)		Calendar Days (%)			
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 <u>www.procurement.sc.gov/preferences</u> . 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 s	same as Home	Office A	ddress						
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 accept faxed amendments.

RFQ#: 111218-941-44905-11/28/18

Title: Provide HVAC Services for TTC St. George Site - 2018

Is hereby amended as follows:

# Answers to questions from pre-bid meeting:

- Q-1: The amendment states the two PMs to now include filters which is a great idea, but the main form is still asking us to bid 4 filter change and two PMs. Should we only bid 2 filter change and two PMs that includes filters.
- A-1: State's response: Change: The quarterly filter changes shall be 2 per year (was 4) and the (2) six month inspections will include cost of filter change. See attached revised bidding schedule.

# **Quotation Schedule – Revised by amendment 2**

### RFQ#: 111218-941-44905-11/28/18

			LOT 1		
Item #	Qty	UOM	Description	Unit cost	Total
1	2	Qtr.	Quarterly filter replacement as specified	\$ / Qtr.	\$/Yr.
2	2	Ea.	6 month system inspection and tune-up as specified to include filter changes.	\$ / Ea.	\$ / Yr.
				Lot 1 Total:	\$/ Yr.

SC Certified Minority Vendor: y\_\_ n\_\_ S.C. Cert. #: \_\_\_\_\_

# Please check appropriate line:

I certify that I: \_\_\_\_\_ AM currently in the HVAC services business.

\_\_\_\_\_ AM NOT currently in the HVAC services business.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

# For informational purposes only:

Labor rate for repairs (if needed):

Regular Business hours: \$\_\_\_\_\_/ hr.

After regular business hours: \$ \_\_\_\_/hr.

Discount off list price for materials/parts: \_\_\_\_\_\_%