**The Philadelphia Parking Authority**

**701 Market Street – Suite 5400**

**Philadelphia, PA 19106**

**Dolly Towing Equipment**

**Bid No. 23-21**

**Bid Form**

1. The undersigned submits this bid in response to the above referenced Bid No. 23-21 Dolly Towing Equipment being familiar with and understanding the advertised notice of opportunity, General Information, Work Statement, Bid Form, Affidavit of Non-Collusion, and Addenda if any (the “Bid Documents”), as prepared by the Philadelphia Parking Authority and posted on the Authority’s Internet website and on file in the office of the Authority at 701 Market Street, Suite 5400, Philadelphia, PA 19106. The party submitting a bid is the “Bidder”.
2. The Authority reserves the right to withdraw and cancel this IFB prior to opening or to reject any and all bids after bids are opened if in the best interest of the Authority, in the Authority's sole discretion. If the Authority accepts Bidder’s offer, Bidder agrees to execute a contract memorializing the bid’s terms if the contract is delivered to Bidder within 60 days of the bid opening date. This provision will not be interpreted to preclude the execution of a contract related to this bid outside of that 60-day period.
3. Bidder acknowledges receipt of the following addenda:

|  |  |  |
| --- | --- | --- |
| Addendum |  | Date |
|  |  |  |
|  |  |  |
|  |  |  |

**4. Term of Contract:** The term of the contract for dolly towing equipment shall commence upon award of a contract by the Authority’s Board at a public meeting and execution of a contract by the Executive Director and shall end one year thereafter, unless it is terminated earlier pursuant to the terms of the contract. The term of the contract may be extended by and at the sole option of the Authority for up to 4 (four) additional 1 (one) year terms.

**5. Bid Form:** Bidder agrees to supply dolly towing equipment and brackets as described in the Work Statement for the prices stated below. Unit Cost must be inclusive of all shipping costs.

 **Collins Hi-Speed Dolly Pro P4C Fully Assembly Unit Cost $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Bracket Type** | **Unit Cost** |
|  Combo GEN 2 - 570 (SKU: DMP-CG2-570)  | $ |
| Jerr-Dan Baseplate (SKU: DMP-CG2-570-JD)  | $ |

The unit cost will remain the same for each term of the contract. The Contractor may request CPI be applied to the unit cost at the end of each term of the contract after the initial term.

**6. Requirement Statement:** The undersigned contractor agrees to provide dolly towing equipmentas specified in the Work Statement, any Addenda, if issued and the response submitted for the term of the contract.

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

Signature

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

Name

(Please Print)

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

Title

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

Date

**7. Delivery Procedures:** Bidder must outline the Delivery Procedure and indicate what the Authority will be responsible for during delivery.

**8. Bidders Signatures:** Complete **ONE** section below.

|  |
| --- |
| **If bid is by a corporation, form must include the date and be signed here by (a) President or Vice President, and (b) Secretary, Assistant Secretary, Treasurer, Assistant Treasurer, or Officer. If this form is not so signed, a corporate resolution authorizing form of execution must be attached to this bid form.** |
|  |  |  |
| Signature |  | Signature |
| Typed or Printed Name |  | Typed or Printed Name |
| Title |  | Title |
| Business Name of Bidder |  |  |
| Street Address |  |  |
| City/State/ZIP Code |  |  |
| Telephone Number |  | Date |
|  |  |  |
|  |  |  |
|  |  |  |
| **If bid is by a business entity other than a corporation form must be dated and signed here:** |
|  |
| Authorized Signature |  | Business Name of Bidder |
|  |  |  |
| Typed or Printed Name |  | Street Address |
|  |  |  |
| Title |  | City/State/ ZIP Code |
|  |  |  |
| Date |  | Telephone Number |
|  |  |  |
| Type of Entity |  |  |
|  |  |  |

**8. Affidavit of Non-Collusion:**

State of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bid No. \_\_\_\_\_\_\_\_\_\_\_

County of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I state that I am \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Title) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of my organization) and that I am authorized to make this affidavit on behalf of my firm, and its owners, directors, and officers. I am the person responsible in my firm for the price(s) and the amount of this bid and I have placed my signature below.

I state that:

 (1) The price(s) and amount of this bid have been arrived at independently and without consultation, communication or agreement with any other contractor, Bidder or potential Bidder.

 (2) Neither the price(s) nor the amount of this bid, and neither the terms nor the approximate price(s) nor approximate amount of this bid, have been disclosed to any other firm or person who is a bidder or potential bidder, and they will not be disclosed before bid opening.

 (3) No attempt has been made or will be made to induce any firm or person to refrain from submitting a bid in response to this IFB, or to submit a bid higher than this bid, or to submit any intentionally high or noncompetitive bid or other form of complementary bid.

 (4) The bid of my organization is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other noncompetitive bid. I have read, understand and will abide by the Authority’s Contractor Integrity Provisions.

 (5) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (my organization’s name) its affiliates, subsidiaries, officers, directors and employees are not currently under investigation by any governmental agency and have not in the last four years been convicted or found liable for any act prohibited by State or Federal law in any jurisdiction, involving conspiracy or collusion with respect to bidding on any public contract, except as follows:

I state that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (my organization’s name) understands and acknowledges that the above representations are material and important and will be relied on by The Philadelphia Parking Authority when awarding the contract for which this bid is submitted. I understand and my organization understands that any misstatement in this affidavit is and shall be treated as fraudulent concealment from The Philadelphia Parking Authority of the true facts relating to the submission of bids / proposals for this contract.

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

 Signature

SWORN TO AND SUBSCRIBED

BEFORE ME THIS \_\_\_\_\_DAY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OF 20\_\_\_ Printed Name

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

Notary Public

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9.** **Bidder’s Qualifications:**

* 1. **Type of business:** Individually owned □

 *Check one* Partnership □

 Corporation □

 Other □

* 1. **Number of employees:** Under 25 □

 *Check one* Under 50 □

 Under 100 □

 Over 100 □

* 1. **If you have had previous contracts with the Authority, list date and product or service provided:**
		1.
		2.
		3.
	2. **Philadelphia Commercial Activities License Number**: **­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
	3. **Federal EIN Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Philadelphia Parking Authority**

**SMALL DIVERSE BUSINESS**

**PARTICIPATION SUBMITTAL**

**Bid Name and Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Bidder:**

**Contact Name:                                                      Email:**

**BIDDER INFORMATION:**

Does the Bidder hold a Small Business Procurement Initiative certificate issued by the Pennsylvania Department of General Services? □ Yes □ No (MUST check one)

If yes, please identify each category that applies to your business:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

The Bidder will need to attach a copy of their SBPI certificate. Bidder will be required to maintain their status as a certified Small Diverse Business throughout the entire term of the contract. **This form must be completed and submitted with your bid.** If you do not participate in the Small Business Procurement Initiative, please check the box for “No” and submit with your bid.

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**Manager Contract Administration**

**The Philadelphia Parking Authority**

**701 Market Street, Suite 5400**

**Philadelphia, PA 19106**

**Bid Decline Form: Bid No. 23-21 Dolly Towing Equipment**

If you do not intend to submit a bid to the Authority for this solicitation, please return this form immediately.

The undersigned vendor declines to submit an offer for this project.

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

□ Work Statement too “tight” (explain below)

□ Unable to meet time period for responding to this IFB

□ We do not offer this product or service

□ Our schedule would not permit us to perform

□ Unable to meet Work Statement

□ Work Statement unclear (explain below)

□ Unable to meet Insurance Requirements

□ Unable to meet Contract Requirements (explain below)

□ Other (specify below)

Comments:

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Upon completion of this form, please email the form to Shannon Stewart, Manager of Contract Administration at sstewart@philapark.org. A link to the electronic version of this form can be found on our website or by clicking this link, <https://app.smartsheet.com/b/form/a6129d048c95479e8e43d6265a5ed6a8>.