**The Philadelphia Parking Authority**

**701 Market Street – Suite 5400**

**Philadelphia, PA 19106**

**Immobilization Equipment 2018**

**RFP No. 18-07.2**

**Proposal Form**

1. The undersigned submits this proposal in response to the above referenced Proposal No. 18-07.2, being familiar with and understanding the advertised notice of opportunity, Instructions, Proposal Form, Affidavit of Non-Collusion, Work Statement, and Addenda if any (the “Proposal 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.
2. The Authority reserves the right to withdraw and cancel this request for proposal process prior to opening or to reject any and all proposals after proposals are opened if in the best interest of the Authority, in the Authority's sole discretion. If the Authority accepts the proposal, Offeror agrees to execute a contract memorializing the proposal’s terms within 60 days of the proposal opening date. This provision will not be interpreted to preclude the execution of a contract related to this RFP outside of that 60 day period.
3. **Proposal Security:** Attached hereto is a check, certified check or bid bond in the amount of $10,000.

**4.** Offeror acknowledges receipt of the following addenda:

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

**5. Proposed cost:** Proposer agrees to furnish immobilization equipment in accordance with the Work Statement and for the prices stated below.

| **Product Description** | **Manufacturer** | **Model Number** | **Unit Price** |
| --- | --- | --- | --- |
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|  |  |
| --- | --- |
| **Item:** | **Unit Price** |
| Cost to re-key lock core, if applicable |   |

|  |  |
| --- | --- |
| **Replacement Parts** | **Unit cost** |
|  |  |
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**Value Added Option:**

| **Product Description** | **Manufacturer** | **Model Number** | **Unit Price** |
| --- | --- | --- | --- |
|  |  |  |  |
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**Number of calendars days for delivery once an order is placed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_days**

**6. Term of Contract:** Commencing with the Effective Date, the term of the Final Contract shall be for a period of three (3) years. The Authority at its sole discretion, shall have the right to terminate the contract upon thirty (30) days written notice.

**7. Requirement Statement:** The undersigned Offeror agrees to provide immobilization equipment as specified in the Work Statement and adhere to the proposed terms of delivery as specified in Section 5, any Addenda, if issued and the Offeror’s Proposal.

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

Signature

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

Name

(Please Print)

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

Title

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

Date

**8. Signatures:**

 If offer is by an individual or partnership, form must be dated and signed here:

|  |  |  |
| --- | --- | --- |
| Signature of Owner of Partner |  | Business Name of Offeror |
| Typed or Printed Name |  | Street Address |
| Title |  | City/State/ ZIP Code |
| Date |  | Telephone Number |
| If proposal 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, or Assistant Treasurer, or Officer and (c) a corporate seal must be affixed. If this form is not so signed, a corporate resolution authorizing form of execution must be attached to this proposal. |
|  |  |  |
| Signature |  | Signature |
| Typed or Printed Name |  | Typed or Printed Name |
| Title |  | Title |
| Business Name of Offeror |  |  |
| Street Address |  | SEAL: |
| City/State/ZIP Code |  |  |
| Telephone Number |  |  |

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

 Date

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

State of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RFP 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 proposal and I have placed my signature below.

I state that:

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

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

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

 (4) The proposal 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 proposal. 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 proposal 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 2018 Printed Name

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

Notary Public

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

**10. Qualifications:**

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

 *Check one* Partnership □

 Corporation □

 Other □

* 1. **Number of employee**s: 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 Business Activities License Number**: **­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
	3. **Federal EIN Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**LIST OF SUBCONTRACTORS AND MATERIAL SUPPLIERS**

(copy page as needed)

Undersigned agrees, if notified of the acceptance of this proposal, that they will utilize the following subcontractors and material suppliers, for the following noted types of work. No substitutions shall be made in the employment of subcontractors and/or material suppliers without written approval from the authority. The undersigned acknowledges that the Philadelphia Parking Authority reserves the right to reject any subcontractors listed below after proposals are opened at no additional cost to Authority.

|  |
| --- |
| **SUBCONTRACTOR OR MATERIAL SUPPLIER** |
| Name: |
| Type of Work: |
| Phone: | E-mail: |
| Address: |
| City: | State: | Zip |
| Union Affiliation (if any): |
| Signature of Individual, Owner or Partner: |
| Name and Title of Signer: |
| Name of Firm: |
| Date: |
| **SUBCONTRACTOR OR MATERIAL SUPPLIER** |
| Name: |
| Type of Work: |
| Phone: | E-mail: |
| Address: |
| City: | State: | Zip |
| Union Affiliation (if any): |
| Signature of Individual, Owner or Partner: |
| Name and Title of Signer: |
| Name of Firm: |
| Date: |

**Philadelphia Parking Authority**

**SMALL DIVERSE BUSINESS**

**PARTICIPATION SUBMITTAL**

**RFP Name and Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Offeror:**

**Contact Name:                                                      Email:**

**OFFEROR INFORMATION:**

Does the Offeror 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 Offeror will need to attach a copy of their SBPI certificate. Offeror will be required to maintain their status as a certified Small and Diverse Business throughout the entire term of the contract.

**Manager Contract Administration**

**The Philadelphia Parking Authority**

**701 Market Street, Suite 5400**

**Philadelphia, PA 19106**

**Proposal Decline Form:** RFP No. 18-07.2 – Immobilization Equipment 2018

If you did not submit an offer to the Authority for this solicitation, please return this form immediately.

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

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

□ Requirements too “tight” (explain below)

□ Unable to meet time period for responding to this RFP

□ We do not offer this product or service

□ Our schedule would not permit us to perform

□ Unable to meet Requirements

□ Unable to meet Bond/Insurance Requirements

□ Requirements 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 Mary Wheeler, Manager of Contract Administration at mwheeler@philapark.org.