

FOR SEALED BIDS ON

Vehicles and Motorcycles Bid 25-11-0912

Coordinated By: The North Carolina Sheriffs' Association

Submitted For:

Company Name

DEADLINE TO SUBMIT ALL BID REQUIREMENTS: 12:00 NOON EST – SEPTEMBER 12, 2024

Bid Submission Checklist for Vendors:

Note: All bid submissions and documents must be uploaded into VendorLink by 12 noon EST on September 12, 2024 for your company's bid to be considered. The Association will not accept any pricing or required documents outside of VendorLink.

Below is a list of action items required for your company's bid submission to be considered:

- □ Bid pricing entered for all five zones in VendorLink for each item number you would like to bid.
- □ Base price entered includes the required Commission Fee of three quarters of one percent (.0075) and delivery.
- Option price percent has been entered for each line item you are bidding and meets the minimum 6% requirement.
- Build Sheet uploaded for each item you would like to bid (No pricing is to be included within this document. The brand make and model listed for the item you are bidding <u>MUST</u> match the brand make and model listed within this document)
- Option Sheet uploaded for each item you would like to bid (*This document <u>MUST</u> specify the mandatory minimum discount of 6% off MSRP. Higher discounts may be offered. The additional cost for all model upgrades/downgrades must also be specified. <u>DO NOT</u> list any models that are not listed in the upgrade/downgrade section for the base model listed for that item number).*

Please note: If no options are available, you are required to state "NO OPTIONS" on a piece of letterhead or blank document and upload the document stating "NO OPTIONS" within the options file field in VendorLink for that item number.

- □ Additional Documentation Requirements See page 3.
- □ Government Reference Requirements See page 3.
- $\hfill\square$ This document has been reviewed and completed in its entirety.
- □ This document has signed by all required parties and notarized See pages 10-11.

Additional Documentation Requirements:

I acknowledge in addition to submitting this completed document the following are also required to be uploaded into VendorLink by 12:00 noon EST on September 12, 2024.

1. Certificate of Liability: Please contact your insurance agency and request the Certificate Holder section include the address below and the description section includes "NCSA Vehicle and Motorcycle Procurement Program Bid 25-11-0912".

North Carolina Sheriffs' Association PO Box 20049 Raleigh, NC 27619

- 2. **Bank Reference**: *Please provide a formal letter from your bank confirming your company is in good financial standing with the bank.*
- 3. **Company Summary**: This summary needs to outline your company's operations and administrative and customer service competencies.
- 4. **Manufacturer Certification**: One (1) form is required per manufacturer you are bidding. If the parent company has a different name other than the brand name listed, please note this on the form. If you are the manufacturer, complete the form as though giving your company permission to sell your product. See example provided in the Build and Option Sheet Sample Guide. The document required to be completed by the manufacturer is available in the "Documents" section of VendorLink.

Government Reference Requirements:

I acknowledge in addition to submitting this completed document, as the bidder I am responsible for contacting 5 different government references and providing the NCSA online reference form for their completion by 12:00 noon EST on September 12, 2024.

- 5 Current Required One of the five must be a government agency located within North Carolina. All references must be from <u>different</u> agencies. Cooperative Purchasing Programs will not be accepted as a reference.
- Please provide the following link to each of your references to complete: <u>https://ncsheriffs.org/ncsa-government-reference-form-vehicles-and-motorcycles</u>

Vendor Information:

This section is required to complete.

| • | Company Name: |
|---|--|
| | DBA: |
| • | Federal Employer Identification Number (FEIN): |
| • | Company Type: • Individual (Yes/No) : |
| | Partnership (Yes/No) : |
| | LLC (Yes/No) : |
| • | Minority Business Enterprise: (Yes/No) : |
| • | Physical Address: |
| • | City, State, Zip: |
| | States Eligible to Sell Within: |
| | |

Contacts to Include on Vendor Directory:

This section is required to complete.

| • | Contact: |
|---|--------------------|
| • | Office Number: |
| • | Cell Phone Number: |
| • | Fax Number: |
| • | Email Address: |
| | |
| • | Contact: |
| • | Office Number: |
| • | Cell Phone Number: |
| • | Fax Number: |
| • | Email Address: |
| | |
| • | Contact: |
| • | Office Number: |
| • | Cell Phone Number: |
| • | Fax Number: |
| • | Email Address: |
| | |
| • | Contact: |
| • | Office Number: |
| • | Cell Phone Number: |
| • | Fax Number: |
| • | Email Address: |
| | |

Bidder Qualifications:

By submission of this form, you are confirming the following information is true for the company in which this bid is being submitted:

- 1. Your company is an authorized distributor for all products that are being bid.
- 2. You have uploaded into VendorLink the Manufacturer Certification Form from each manufacturer confirming your authorized status.
- 3. You confirm your company is in good credit standing.
- 4. You confirm your company has the financial means to successfully handle the contractual obligations for the NCSA contract.
- 5. You have uploaded a banking reference and/or a complete financial statement showing your company's financial competency.
- 6. You are aware that the NCSA reserves the right to conduct onsite inspections of your premises, including inventory. An inspection is to confirm your company's ability to administer and fulfill contractual requirements, provide replacement parts, and warranty service.
- 7. You are aware that the NCSA reserves the right to award this bid in its entirety or in part, and to make any award determined by the NCSA to serve in the best interest of the NCSA.
- 8. You have uploaded into VendorLink a company summary outlining your overall operations, administrative capabilities, and customer service competencies.

Drug-Free Workplace:

By submission of this form, you are hereby certifying that your company does the following:

- 1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 90 or any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance ore habilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

Insurance Checklist:

Proposer and Insurance Agent Statement:

We understand the Insurance Requirements of these specifications, as noted by the items checked below, and that evidence of this insurance may be required within five (5) davs after bid opening.

- 1. Workers' Compensation and Employer's Liability per the statutory limits of the State of North Carolina.
- 2. (REQUIRED) Comprehensive General Liability (occurrence form), limits of liability \$1,000,000.00 per occurrence for bodily injury property damage to include Premises/Operations; Products, Completed Operations and Contractual Liability. Contractual Liability and Contractual Indemnity (Hold harmless endorsement exactly as written in "insurance requirements" of specifications). General aggregate \$3,000,000.00
- 3. (REQUIRED) Automobile Liability \$1,000,000.00 each occurrence owned/nonowned/hired automobiles included.
- 4. Excess Liability \$_____.00 per occurrence to follow the primary coverages.
- 5. The NCSA must be named as an additional insured on the liability policies and it must be stated on the Certificate of Liability (Please provide a pdf version of the Certificate to the NCSA).
- 6. (**REQUIRED**) Other insurance as indicated:
 - Builders Risk completed value \$
 - Liquor Liability
 - Fire Legal Liability
 - Protection and Indemnity
 - Employee Dishonesty Bond
 - (**REQUIRED**) Other (Garage)
- 7. (REQUIRED) Thirty (30) days written cancellation notice required.
- 8. (**REQUIRED**) Best's guide rating B+:VI or better, latest edition.
- 9. (REQUIRED) The certificate must state the bid number, title, and bidder and insurance agent statement (above).

- \$
- \$
- \$____
 - \$ \$ 1,000,000.00

Iran Divestment Act Certification:

REQUIRED BY N.C.G.S. 147-86.58

As of the date this document was signed, we confirm, as the vendor/bidder that our company is not listed on the Final Divestment List created by the State Treasurer pursuant to N.C.G.S 147-86.58.

The undersigned hereby certifies that he or she is authorized by the vendor/bidder to make the foregoing statement.

No Boycott Israel Certification:

REQUIRED BY N.C.G.S. 147-86.81

As of the date this document was signed, we confirm, as the vendor/bidder that our company is not listed on the Final Divestment List created by the State Treasurer pursuant to N.C.G.S 147-86.81.

The undersigned hereby certifies that he or she is authorized by the vendor/bidder to make the foregoing statement.

Terms and Conditions:

The undersigned declares that he or she has read, understands, accepts and will comply with the terms, conditions and specifications of this bid and any addenda issued. The failure or omission to review this document shall in no way relieve dealer principal or dealer's authorized agent of obligations with respect to this bid. The submission of a bid and signature below shall be taken as evidence of acceptance of the terms and conditions of this bid.

The undersigned further declares that no other persons other than the dealer principal or dealer's authorized agent herein named has any interest in this bid or in the contract to be taken, and that it is made without any connection with any other person or persons making proposal for the same article, and is in all respects fair and without collusion or fraud.

The undersigned further declares that he or she has carefully examined the specifications and is thoroughly familiar with its provisions and with the quality, type and grade of materials required.

The undersigned further declares that he or she has provided a discount on all factory options included in this bid, and such discount will be included in all customer orders.

The undersigned further declares that he or she understands the financial responsibility associated with this bid as stated in the terms and conditions, and further declares that he or she has the ability to meet the financial responsibility associated with this bid. The principals understand the dealership is not guaranteed a profit as a result of a bid award. The dealership may experience a loss of revenue as a result of sales based on their actual bid.

The undersigned further declares that he or she proposes to furnish the articles called for within the specified time in this proposal for the price stated on the bid form, and guarantees that parts and service are available within the State of North Carolina.

The foregoing instrument was acknowledged before me on the date listed below by the Dealer/Company Principal and Authorized Representative listed below who is personally known to me or who has produced identification and who did take an oath.

Note: All fields below are required.

- Month: _____
- Date: _____
- Year: _____

Note: All fields below are required (Continue from page 10)

Signature of Dealer/Company Principal

Printed Name of Dealer/Company Principal

Signature of Authorized Representative

Printed Name of Authorized Representative

Signature of Notary Public

Date Commission Expires

State of

County of

(Official Seal or Stamp)

By signing the above, I acknowledge that I have reviewed and accepted the Terms and Conditions contained in pages 1 through 11 of this document and that the information provided herein is true and accurate to the best of my knowledge and belief.