INVITATION TO BID

BID NO. 2022-2

HOUSEKEEPING AND JANITORIAL SERVICES AT 1395 EISENHOWER DRIVE AND 1602 DRAYTON STREET

OPTIONAL PRE-BID CONFERENCE: JANUARY 10, 2023 AT 2:00 PM

BID OPENING: JANUARY 17, 2023 AT 2:00 PM

THE BOARD OF HEALTH OF CHATHAM COUNTY, GEORGIA

JULIA JOHNSON, MD
ROGER MOSS
CHESTER ELLIS
M. ANN LEVETT, Ed.D.

VAN JOHNSON
COURTNEY REICH
MARK DOUGLAS
DOCUMENT CHECK LIST

The following documents are contained in and made a part of this Bid Package or are required to be submitted with the bid. It is the responsibility of the bidder to read, complete and sign, where indicated, and return these documents with his/her bid. **FAILURE TO DO SO MAY BE CAUSE FOR DISQUALIFYING THE BID.**

GENERAL INFORMATION AND INSTRUCTIONS TO BID WITH ATTACHMENTS

BID SPECIFICATIONS AND SPECIAL CONDITIONS

SURETY REQUIREMENTS – N/A

PERFORMANCE BOND – N/A

PAYMENT BOND – N/A

**CONTRACT– Required at the time of contract.**

**ATTACHMENTS:** A. DRUG FREE WORKPLACE; B. SMOKE-FREE ENVIRONMENT; C. NONDISCRIMINATION STATEMENT; D. DISCLOSURE OF RESPONSIBILITY STATEMENT; E. SYSTEMATIC ALIEN VERIFICATION FOR ENTITLEMENTS, F. BIDDER’S CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION, G. BID SHEET, H. SUBCONTRACTOR SHEET.
COUNTY TAX CERTIFICATE REQUIREMENT - Contractor must supply a copy of their Tax Certificate from their location in the State of Georgia, as proof of payment of the occupational tax where their office is located.

CURRENT TAX CERTIFICATE NUMBER
CITY__________________
COUNTY_____________
OTHER______________

RECEIPT IS HEREBY ACKNOWLEDGED OF ADDENDA NUMBER(S)_____

The undersigned bidder certifies that he/she has received the above listed and marked documents and acknowledges that his/her failure to return each, completed and signed as required, may be cause for disqualifying his/her bid.

BY:______________
    DATE

_________ SIGNATURE_________

TITLE:______________

COMPANY:______________
GENERAL INFORMATION FOR INVITATION FOR BID

This is an invitation to submit a bid to supply Chatham County Health Department with housekeeping and janitorial services as indicated herein. Sealed bids will be received at the Chatham County Health Department, at Chatham County Health Department, Administrative Offices, 1395 Eisenhower Drive, Savannah, Georgia 31406 up to 2:00PM local time on January 17, 2023 at which time they will be opened and tabulated. The Chatham County Health Department reserves the right to reject all bids that are non-responsive or not responsible.

Instructions for preparation and submission of a bid are contained in this Invitation For Bid package. Please note that specific forms for submission of a bid are required. Bids must be typed or printed in ink.

An todoPre-bid Conference has been scheduled to be conducted at Chatham County Health Department Administrative Office, 1395 Eisenhower Drive, Savannah, Georgia, on January 10, 2023 at 2:00 PM, to discuss the specifications and resolve any questions and/or misunderstanding that may arise. You are NOT REQUIRED to attend.

Any changes to the conditions and specifications must be in the form of a written addendum to be valid; therefore, the Purchasing Agent will issue a written addendum to document each approved change. Generally when addenda are required, the bid opening date will be changed.

Chatham County Health Department has an equal opportunity purchasing policy to assure all procurement procedures are conducted in a manner that provides maximum open and free competition. Chatham County Health Department seeks to ensure that all segments of the business community have access to supplying the goods and services needed by Chatham County Health Department programs. The Chatham County Health Department affirmatively works to encourage utilization of disadvantaged and minority business enterprises in our procurement activities. The Chatham County Health Department provides equal opportunity for all businesses and does not discriminate against any persons or businesses regardless of race, color, religion, age, sex, national origin or handicap.
INSTRUCTIONS TO BIDDERS

1.1 **Purpose:** The purpose of this document is to provide general and specific information for use in submitting a bid to supply the Chatham County Health Department with equipment, supplies, and/or services as described herein. All bids are governed by the [Code of Chatham County, Chapter 4, Article IV](https://example.com/code), and the laws of the State of Georgia.

1.2 **How to Prepare Bids:** All bids shall be:

   a. Prepared on the forms enclosed herewith, unless otherwise prescribed, and **all documents must be submitted.**

   b. Typewritten or completed with pen and ink, signed by the business owner or authorized representative, with all erasures or corrections initialed and dated by the official signing the bid. **ALL SIGNATURE SPACES MUST BE SIGNED.**

Bidders are encouraged to review carefully all provisions and attachments of this document prior to submission. Each bid constitutes an offer and may not be withdrawn except as provided herein.

1.3 **How to Submit Bids:** All bids shall be:

   a. An original and duplicate copy must be submitted in a sealed opaque envelope, plainly marked with the bid number and title, date and time of bid opening, and company name.

   b. Mailed or hand delivered in sufficient time to ensure receipt by the Purchasing Agent on or before the time and date specified above. **Mailing Address:** Chatham County Health Department, ATTN: Stephen Stanley, P.O. Box 14257, Savannah, GA 31416 or Hand Delivery: Chatham County Health Department, ATTN: Stephen Stanley, 1395 Eisenhower Drive, Savannah, Georgia 31406.

**BIDS NOT RECEIVED BY THE TIME AND DATE SPECIFIED WILL NOT BE OPENED OR CONSIDERED.**

1.4 **How to Submit an Objection:** Objections from bidders to this invitation to bid and/or these specifications should be brought to the attention of the Chatham County Health Department Purchasing Agent in the following manner:

   a. Bidders shall either present their oral objections at that time or submit their written objections at least two (2) days prior to the scheduled pre-bid conference.

   b. The objections contemplated may pertain to form and/or substance of the invitation to bid documents. Failure to object in accordance with the above procedure will constitute a waiver on the part of the business to protest this invitation to bid.
1.5 **Failure to Bid:** If a bid is not submitted, the business should return this invitation to bid document, stating reason therefore, and indicate whether the business should be retained or removed from Chatham County Health Department’s bidders list.

1.6 **Errors in Bids:** Bidders or their authorized representatives are expected to fully inform themselves as to the conditions, requirements, and specifications before submitting bids. Failure to do so will be at the bidder's own risk. In case of error in extension of prices in the bid, the unit price will govern.

1.7 **Standards for Acceptance of Bid for Contract Award:** Chatham County Health Department reserves the right to reject any or all bids and to waive any irregularities or technicalities in bids received whenever such rejection or waiver is in the best interest of Chatham County Health Department. Chatham County Health Department reserves the right to reject the bid of a bidder who has previously failed to perform properly or complete on time contracts of a similar nature, or a bid from a bidder whom investigation shows is not in a position to perform the contract.

1.8 **Bid Tabulation:** Tabulations for all bids will be posted for thirty (30) days after the bid opening in the Chatham County Health Department, Accounting, 1395 Eisenhower Drive, Savannah, Georgia 31406.

1.9 **Bidder:** Whenever the term "bidder" is used it shall encompass the "person," "business," "contractor," "supplier," "vendor," or other party submitting a bid or proposal to Chatham County Health Department in such capacity before a contract has been entered into between such party and Chatham County Health Department.

1.10 **Responsible / Responsive Bidder:** Responsible Bidder means a person or entity that has the capability in all respects to perform fully and reliably the contract requirements. Responsive Bidder means a person or entity that has submitted a bid or proposal that conforms in all material respects to the requirements set forth in the invitation for bids or request for proposals.

1.11 **Compliance with Laws:** The bidder and/or contractor shall obtain and maintain all licenses, permits, liability insurance, workman's compensation insurance and comply with any and all other standards or regulations required by federal, state or County statute, ordinances and rules during the performance of any contract between the contractor and Chatham County Health Department. Any such requirement specifically set forth in any contract document between the contractor and Chatham County Health Department shall be supplementary to this section and not in substitution thereof.

1.12 **Contractor:** Contractor or subcontractor means any person or business having a contract with Chatham County Health Department. The Contractor/Vendor of goods, material, equipment or services certifies that they will follow equal employment opportunity practices in connection with the awarded contract as more fully specified in the contract documents.
1.13 **Local Preference:** Local Vendors and Minority and Women Owned Business Enterprises are encouraged to submit bids. “Local Vendor” is defined as a business or supplier which operates and maintains a regular place of business within the geographical boundaries of Chatham County or one of the local Municipalities of the County AND all real and personal property taxes are paid prior to award of a contract or purchase. Contractors are encouraged to aware bids to local M/WBE businesses/subcontractors whenever possible in order to promote growth in Chatham County’s economy. As a part of this submittal package, the Bidder must include the list of proposed subcontractors to be used and specify whether the subcontractor is M/WBE.

1.14 Local Wage Rate: On September 6, 1996 the Board of Commissioners of Chatham County adopted a “Prevailing Local Wage Rate” ordinance that requires the successful bidder to pay its employees and subcontractors at least the prevailing local wage rate in Chatham County as determined and announced by the Wage and Hour Division of the U.S. Department of Labor.

1.15 **Debarred Firms and Pending Litigation:** Any potential proposer/firm listed on the Federal or State of Georgia Excluded Parties Listing (Barred from doing business) will not be considered for contract award. Proposers **shall disclose** any record of pending criminal violations (indictment) and/or convictions, pending lawsuits, etc., and any actions that may be a conflict of interest occurring within the past five (5) years. Any proposer/firm previously defaulting or terminating a contract with Chatham County Health Department will not be considered.

** All bidders or proposers are to read and complete the Disclosure of Responsibility Statement enclosed as an Attachment to be returned with response. Failure to do so may result in your solicitation response being rejected as non-responsive.

Bidder acknowledges that in performing contract work for Chatham County Health Department, bidder shall not utilize any firms that have been a party to any of the above actions. If bidder has engaged any firm to work on this contract or project that is later debarred, Bidder shall sever its relationship with that firm with respect to Chatham County Health Department contract.

1.16 **Payment of Taxes:** No contract shall be awarded unless all real and personal property taxes have been paid by the successful contractor and/or subcontractors as adopted by the Board of Commissioners on 8 April 1994.

1.17 **State Licensing Board for General Contractors:** Pursuant to Georgia law, any bidder must be a Georgia licensed General Contractor (Contractor work or activity that is unlimited in scope regarding any residential or commercial projects).

*See “Checklist for Submitting Bid” for the type of license required for this project.*

1.17 **Immigration:** On 1 July 2007, the Georgia Security and Immigration Compliance Act (SB 529, Section 2) became effective. All contractors and subcontractors with 100 or more employees entering into a contract or performing work must sign an affidavit that he/she has used the E-Verify System. E-Verify is a no-cost federal employment verification system.
to insure employment eligibility. No Bids will be considered unless a signed E-Verify Affidavit is enclosed with the submittal package. Affidavits are enclosed in this solicitation. You may download M-274 Handbook for Employers at http://www.dol.state.ga.us/spotlight/employment/rules. You may go to http://www.uscis.gov. to find the E-Verify information.

Systematic Alien Verification for Entitlements (SAVE) Program: O.C.G.A. 50-36-1, required Georgia counties to comply with the federal Systematic Alien Verification for Entitlements (SAVE) Program. SAVE is a federal program used to verify that applicants for certain “public benefits” are legally present in the United States. Contracts with the County are considered “public benefits.” Therefore, the successful bidder will be required to provide the Affidavit Verifying Status for Chatham County Benefit Application prior to receiving any County contract. The affidavit is included as part of this bid package but is only required of the successful bidder.

Protection of Resident Workers. Chatham County Health Department actively supports the Immigration and Nationality Act (INA) which includes provisions addressing employment eligibility, employment verification, and nondiscrimination. Under the INA, employers may hire only persons who may legally work in the United States (i.e., citizens and nationals of the U.S.) and aliens authorized to work in the U.S. The employer must verify the identity and employment eligibility of anyone to be hired, which includes completing the Employment Eligibility Verification Form (I-9). The Contractor shall establish appropriate procedures and controls so no services or products under the Contract Documents will be performed or manufactured by any worker who is not legally eligible to perform such services or employment.

GENERAL CONDITIONS

2.1 Specifications: Any obvious error or omission in specifications shall not inure to the benefit of the bidder but shall put the bidder on notice to inquire of or identify the same from the Chatham County Health Department. Whenever herein mentioned is made of any article, material or workmanship to be in accordance with laws, ordinances, building codes, underwriter's codes, A.S.T.M. regulations or similar expressions, the requirements of these laws, ordinances, etc., shall be construed to be the minimum requirements of these specifications.

2.2 Multiple Bids: No vendor will be allowed to submit more than one (1) bid. Any alternate proposals must be brought to the Purchasing Agent's attention during the Pre-bid Conference or submitted in writing at least five (5) days preceding the bid opening date.

Permitting and Approvals: The contractor that is awarded the contract will be responsible for securing all necessary federal, state and local approvals required for the project.

2.3 Prices to be Firm: Bidder warrants that bid prices, terms and conditions quoted in his bid will be firm for acceptance for a period of sixty (60) days from bid opening date, unless otherwise stated in the bid.
2.4 **Completeness:** All information required by Invitation for Bids/Proposals must be completed and submitted to constitute a proper bid or proposal.

2.5 **Quality:** All materials, or supplies used for the construction necessary to comply with this proposal shall be of the best quality, and of the highest standard of workmanship. Workmanship employed in any construction, repair, or installation required by this proposal shall be of the highest quality and meet recognized standards within the respective trades, crafts and of the skills employed.

2.6 **Guarantee/Warranty:** Unless otherwise specified by the Chatham County Health Department, the bidder shall unconditionally guarantee the materials and workmanship for one (1) year on all materials and/or services. If, within the guarantee period, any defects occur which are due to faulty material and or services, the contractor at his expense, shall repair or adjust the condition, or replace the material and/or services to the complete satisfaction of the Chatham County Health Department. These repairs, replacements or adjustments shall be made only at such time as will be designated by the Chatham County Health Department as being least detrimental to the operation of Health Department business.

2.7 **Liability Provisions:** Where bidders are required to enter or go onto Chatham County Health Department property to take measurements or gather other information in order to prepare the bid or proposal as requested by the County, the bidder shall be liable for any injury, damage or loss occasioned by negligence of the bidder, his agent, or any person the bidder has designated to prepare the bid and shall indemnify and hold harmless Chatham County Health Department from any liability arising therefrom. The contract document specifies the liability provisions required of the successful bidder in order to be awarded a contract with Chatham County Health Department.

2.8 **Cancellation of Contract:** The contract may be canceled or suspended by Chatham County Health Department in whole or in part by written notice of default to the Contractor upon non-performance or violation of contract terms. An award may be made to the next low bidder, for articles and/or services specified or they may be purchased on the open market. The defaulting Contractor (or his surety) shall be liable to Chatham County Health Department for costs to the Chatham County Health Department in excess of the defaulted contract prices. See the contract documents for complete requirements.

2.9 **Patent Indemnity:** Except as otherwise provided, the successful bidder agrees to indemnify Chatham County Health Department and its officers, agents and employees against liability, including costs and expenses for infringement upon any letters patent of the United States arising out of the performance of this Contract or out of the use or disposal for the account of the Chatham County Health Department of supplies furnished or construction work performed hereunder.

2.10 **Certification of Independent Price Determination:** By submission of this bid, the bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, that in connection with this procurement:

1. The prices in this bid have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any
matter relating to such prices with any other bidder or with any competitor;

(2) Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly to any other bidder or to any competitor; and

(3) No attempt has been made or will be made by the bidder to induce any other person or firm to submit or not to submit a bid for the purpose or restricting competition.

2.11 **Award of Contract:** The contract, if awarded, will be awarded to the lowest responsible and responsive bidder whose base bid meets the requirements and criteria set forth in the invitation for bids. The Board of Health members must approve the award.

2.12 **Procurement Protests:** Objections and protests to any portion of the procurement process or actions of the Chatham County Health Department staff may be filed with the Purchasing Agent for review and resolution. The *State of Georgia Procurement Manual* shall govern the review and resolution of all protests.

2.13 **Qualification of Business (Responsible Bidder):** A responsible bidder is defined as one who meets, or by the date of the bid acceptance can meet, certifications, all requirements for licensing, insurance, and registrations, or other documentation required by the Scope of Work, specifications and plans. These documents will be listed in the Special Conditions further on in this solicitation. Chatham County Health Department has the right to require any or all bidders to submit documentation of the ability to perform, provide, or carry out the service or provide the product requested.

Chatham County Health Department has the right to disqualify the bid of any bidder as being unresponsive or un-responsible whenever such bidder cannot document the ability to deliver the requested product.

2.14 **Chatham County Tax Certificate Requirement:** A current Chatham County Tax Certificate is required unless otherwise specified. Please contact the Building Safety and Regulatory Services at (912) 201-4300 for additional information.

**NOTE:** No contract shall be awarded unless all real and personal property taxes have been paid by the successful contractor and/or subcontractors as adopted by the Board of Commissioners on 8 April 1994.

2.15 **Insurance Provisions, General:** The selected contractor shall be required to procure and maintain for the duration of the contract insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors. The cost of such insurance shall be included in the Bid.

2.15.1 **General Information that shall appear on a Certificate of Insurance:**

I. Name of the Producer (Contractor’s insurance Broker/Agent).
II. Companies affording coverage (there may be several).
III. Name and Address of the Insured (this should be the Company or Parent of the firm Chatham County is contracting with).
IV. A Summary of all current insurance for the insured (includes effective dates of coverage).

V. A brief description of the operations to be performed, the specific job to be performed, or contract number.

VI. Certificate Holder (This is to always include the Chatham County Health Department).

**Chatham County Health Department as an Additional Insured:** Chatham County Health Department invokes the defense of sovereign immunity. In order not to jeopardize the use of this defense, Chatham County Health Department is not to be included as an Additional Insured on insurance contracts.

2.15.2 Minimum Limits of Insurance to be Maintained for the Duration of the Contract:

a. **Commercial General Liability:** Provides protection against bodily injury and property damage claims arising from operations of a Contractor or Tenant. This policy coverage includes: premises and operations, use of independent contractors, products/completed operations, personal injury, contractual, broad form property damage, and underground, explosion and collapse hazards. Minimum limits: $1,000,000 bodily injury and property damage per occurrence and annual aggregate.

b. **Worker’s Compensation and Employer’s Liability:** Provides statutory protection against bodily injury, sickness or disease sustained by employees of the Contractor while performing within the scope of their duties. Employer’s Liability coverage is usually included in Worker’s Compensation policies, and insures common law claims of injured employees made in lieu of or in addition to a Worker’s Compensation claim. Minimum limits: $500,000 for each accident, disease policy limit, disease each employee and Statutory Worker’s Compensation limit.

c. **Business Automobile Liability:** Coverage insures against liability claims arising out of the Contractor’s use of automobiles. Minimum limit: $1,000,000 combined single limit per accident for bodily injury and property damage. Coverage should be written on an Any Auto basis.

2.15.3 Special Requirements:

A) Insurance:

a. **Extended Reporting Periods:** The Contractor shall provide the Chatham County Health Department with a notice of the election to initiate any Supplemental Extended Reporting Period and the reason(s) for invoking this option.

b. **Reporting Provisions:** Any failure to comply with reporting provisions of the policies shall not affect coverage provided in relation to this request.

c. **Cancellation:** Each insurance policy that applies to this request shall be
endorsed to state that it shall not be suspended, voided, or canceled, except after thirty (30) days prior to written notice by certified mail, return receipt requested, has been given to the Chatham County Health Department.

d. **Proof of Insurance:** Chatham County Health Department shall be furnished with certificates of insurance and with original endorsements affecting coverage required by this request. The certificates and endorsements are to be signed by a person authorized by the insurer to bind coverage on its behalf. All certificates of insurance are to be submitted prior to, and approved by, the Chatham County Health Department before services are rendered. The Contractor must ensure Certificate of Insurance is updated for the entire term of the Chatham County Health Department.

e. **Insurer Acceptability:** Insurance is to be placed with an insurer having an A.M. Best’s rating of A and a five (5) year average financial rating of not less than V. If an insurer does not qualify for averaging on a five year basis, the current total Best’s rating will be used to evaluate insurer acceptability.

f. **Lapse in Coverage:** A lapse in coverage shall constitute grounds for contract termination by the Chatham County Health Department Board of Health Members.

g. **Deductibles and Self-Insured Retention:** Any deductibles or self-insured retention must be declared to, and approved by, the Chatham County Health Department. At the option of the Chatham County Health Department, either: the insurer shall reduce or eliminate such deductibles or self-insured retention as related to the Chatham County Health Department, its officials, officers, employees, and volunteers; or the Contractor shall procure a bond guaranteeing payment of related suits, losses, claims, and related investigation, claim administration and defense expenses.

**B) Other Requirements to be Included in Final Contract:**

a. **Proof of Influenza Vaccination:** Chatham County Health Department shall be provided with proof of influenza vaccination for all employees providing services at the Chatham County Health Department.

b. **Sexual Harassment Prevention Policy:** As an entity whose employees are regularly on the Chatham County Health Department premises or who will regularly interact with Chatham County Health Department personnel and/or clients, the Contractor certifies that they acknowledge and will comply with the State of Georgia Statewide Sexual Harassment Prevention Policy. Failure to comply with the Policy could result in corrective action up to and including termination of the contract.

2.16 **Compliance with Specification - Terms and Conditions:** The Invitation to Bid, Legal Advertisement, General Conditions and Instructions to Bidders, Specifications, Special Conditions, Vendor's Bid, Addendum, and/or any other pertinent documents form a part of the bidders proposal or bid and by reference are made a part hereof.
2.17 **Signed Bid Considered Offer:** The signed bid shall be considered an offer on the part of the bidder, which offer shall be deemed accepted upon approval by the Chatham County Health Department Board of Health Members, Purchasing Agent or his designee. In case of a default on the part of the bidder after such acceptance, Chatham County Health Department may take such action as it deems appropriate, including legal action for damages or lack of required performance.

2.18 **Notice to Proceed:** The successful bidder or proposer shall not commence work under this Invitation to Bid until a written contract is awarded. If the successful bidder does commence any work or deliver items prior to receiving official notification, he does so at his own risk.

2.19 **Payment to Contractors:** Instructions for invoicing the Chatham County Health Department for products delivered to the Chatham County Health Department are specified in the contract document.

   a. Questions regarding payment may be directed to the Accounting Department at (912) 356-2230 or Chatham County Health Department’s Project Manager as specified in the contract documents.

   b. Contractors will be paid the agreed upon compensation upon satisfactory delivery of the products or completion of the work as more fully described in the contract document.

   c. Upon completion of the work or delivery of the products, the Contractor will provide the Chatham County Health Department with an affidavit certifying all suppliers, persons or businesses employed by the Contractor for the work performed for the Chatham County Health Department have been paid in full.

   d. Chatham County Health Department is a tax-exempt entity. Every contractor, vendor, business or person under contract with Chatham County Health Department is required by Georgia law to pay State sales or use taxes for products purchased in Georgia or transported into Georgia and sold to Chatham County Health Department by contract. Please consult the State of Georgia, Department of Revenue, Sales and Use Tax Unit in Atlanta (404) 656-4065 for additional information.

2.20 **Owner’s Rights Concerning Award:** The Owner reserves the right, and sole and complete discretion to waive technicalities and informalities. The Owner further reserves the right, and sole and complete discretion to reject all bids and any bid that is not responsive or that is over the budget, as amended. In judging whether the bidder is responsible, the Owner will consider, but is not limited to consideration of, the following:

   a. Whether the bidder or principals are currently ineligible, debarred, suspended, or otherwise excluded from bidding or contracting by any state or federal agency, department, or authority;
b. Whether the bidder or principals have been terminated for cause or are currently in default on a public works contract;

c. Whether the bidder can demonstrate a commitment to safety with regard to Workers' Compensation by having an experience Modification Rate (EMR) over the past three years not having exceeded an average of 1.2; and

d. Whether the bidder’s past work provides evidence of an ability to successfully complete public works projects within the established time, quality, or cost, or to comply with the bidder’s contract obligations; and

e. Whether the bidder has made a Good Faith Effort to meet local participation goals for local economic impact for Disadvantaged Business Enterprises and Small Business Enterprises.

2.21 **Owner’s Right to Negotiate with the Lowest Bidder:**

In the event all responsive and responsible bids are in excess of the budget, the Owner, in its sole and absolute discretion and in addition to the rights set forth above, reserves the right either to (i) supplement the budget with additional funds to permit award to the lowest responsive and responsible bid, or (ii) to negotiate with the lowest responsive and responsible bidder (after taking all deductive alternates) only for the purpose of making changes to the Project that will result in a cost to the Owner that is within the budget, as it may be amended.

2.22 **Debarred or Suspended Subcontractors.**

CONTRACTOR shall not subcontract, and shall ensure that no subcontracts are awarded at any tier, to any individual, firm, partnership, joint venture, or any other entity regardless of the form of business organization, that is on the Federal Excluded Parties List System (EPLS) at https://www.epls.gov or the State of Georgia, DOAS, State Purchasing Exclusion listing, or other local government entity. This includes pending litigation or claims with the County or other government entities. Contractor shall immediately notify Chatham County Health Department in the event any subcontract is added to a Federal, State or other Government Entity listing after award of the subcontract.

2.23 **Cone of Silence:**

Lobbying of Procurement Evaluation Committee members, County Government employees, and elected officials regarding this product or service solicitation, Invitation to Bid (ITB) or Request for Proposal (RFP) or contract by any member of a proposer’s staff, or those people employed by any legal entity affiliated with an organization that is responding to the solicitation is strictly prohibited. Negative campaigning through the mass media about the current service delivery is strictly prohibited. Such actions may cause your proposal to be rejected.
2.24 **GEORGIA OPEN RECORDS ACT** - The responses will become part of the Chatham County Health Department’s official files without any obligation on the Chatham County Health Department’s part. Ownership of all data, materials and documentation prepared for and submitted to Chatham County Health Department in response to a solicitation, regardless of type, shall belong exclusively to Chatham County Health Department and will be considered a record prepared and maintained or received in the course of operations of a public office or agency and subject to public inspection in accordance with the Georgia Open Records Act, Official Code of Georgia Annotated, Section 50-18-70, et. Seq., unless otherwise provided by law.

It is the responsibility of the Proposer to notify the City of any documents turned over which may contain trade secrets or other confidential matters. A Proposer submitting records which the entity or person believes contains trade secrets that wishes to keep such records confidential pursuant to O.C.G.A. § 50-19-72(34) shall submit and attach to the records an affidavit affirmatively declaring that specific information in the records constitute trade secrets pursuant to Article 27 of Chapter 1 of Title 10 of the Official Code of Georgia.

The vendor and their bid price in response to ITBs will be read aloud at public bid openings. After Bid Tabulations, the ITB shall be available for public viewing.

Chatham County Health Department shall not be held accountable if material from responses is obtained without the written consent of the vendor by parties other than the Chatham County Health Department, at any time during the solicitation evaluation process.

2.25 **GEORGIA TRADE SECRET ACT of 1990** - In the event a Bidder/Proposer submits trade secret information to the Chatham County Health Department; the information must be clearly labeled as a Trade Secret. The Chatham County Health Department will maintain the confidentiality of such trade secrets to the extent provided by law.

2.26 **CONTRACTOR RECORDS** - The Georgia Open Records Act is applicable to the records of all contractors and subcontractors under contract with the Chatham County Health Department. This applies to those specific contracts currently in effect and those which have been completed or closed for up three (3) years following completion.

2.27 **REFERENCES - $500,000 or more**: For bidders to be responsive each must provide information on the most recent five (5) projects with similar scope of work as well as other information to determine experience and qualifications as follows:

a. Project Name:______________________________
   Location:____________________________________
   Owner:_______________________________________
   Address:_____________________________________
   City and State:________________________________
   Contact:_____________________________________
   Phone & Fax:_________________________________
   *Architect or Engineer:_________________________
   Contact:_____________________________________
   Phone & Fax:_________________________________
b. The awarded bid amount and project start date.
Final cost of project and completion date.
Number of change orders.
Contracted project completion in days.
Project completed on time. Yes ____ No ____ Days exceeded ________.
List previous contracts your company performed for Chatham County Health Department or Chatham County by Project Title, date and awarded/final cost.
Has contractor ever failed to complete a project? If so, provide explanation.
Have any projects ever performed by contractor been the subject of a claim or lawsuit by or against the contractor? If yes, please identify the nature of such claim or lawsuit, the court in which the case was filed and the details of its resolution.

$499,000 and less: Provide references from owners of at least three (3) projects of various sizes. Include government owners if possible. If the contractor has performed any work for the Chatham County Board of Commissioners within the last five (5) years, at least one (1) of the three (3) owner references must be from the appropriate party within the Chatham County Health Department or Chatham County Government. Provide in the format as in (a) above on the attached form.

Failure to provide the above information may result in your firm’s bid being rejected and ruled as non-responsive.

NOTE: FORMS FOR YOU TO FILL OUT FOR YOUR REFERENCES ARE ATTACHED TO THE BACK OF THIS BID PACKAGE.
3.1 **METHOD OF COMPENSATION.** The CHATHAM COUNTY HEALTH DEPARTMENT shall make payments to the CONTRACTOR within thirty (30) days from the date of receipt of the CONTRACTOR's acceptable statement on forms prepared by the CONTRACTOR and approved by the CHATHAM COUNTY HEALTH DEPARTMENT.

3.2 **SURETY REQUIREMENTS and Bonds:** N/A

A. Such bidder shall post a bid bond, certified check or money order made payable to the Chatham County Health Department in the amount of 5% of the bid price.

B. Contractor(s) shall be required at time of contract to post a payment and performance bond, certified check or money order made payable to the Chatham County Health Department in the amount of 100% of the bid price if awarded the purchase. Such bond(s) are due prior to contract execution as a guarantee that goods meet specifications and will be delivered per contract. Such bonds will also guarantee quality performance of services and timely payment of invoices to any subcontractors.

C. Whenever a bond is provided, it shall be executed by a surety authorized to do business in the State of Georgia and approved by Chatham County.

D. Contractor acknowledges that he/she shall forfeit the amount of the Bid Bond if he/she fails to enter into a contract with Chatham County Health Department to do and/or furnish everything necessary to provide service and/or accomplish the work stated and/or specified in this bid proposal for the bid amount.

3.3 **WARRANTY REQUIREMENTS:**

a. Provisions of item 2.7 apply.

b. Warranty required per contract.

3.4 **TERMS OF CONTRACT:**

**ANNUAL CONTRACT** - This is a contract for a one-year term with three 12-month renewal options. Contract will commence on March 1, 2023 and end per its terms on February 28, 2024. Either party may terminate the contract for any reason by giving written notice to the other party. In case of notice by the contractor to CCBH, 90 days’ notice is required. In the case of notice to Contractor by CCBH, 60 days’ notice is required. Notice must be directed to the address provided in the contract by each party.
AUDITS AND INSPECTIONS:

At any time during normal business hours and as often as the Chatham County Health Department may deem necessary, the Contractor and his subcontractors shall make available to the County and/or representatives of the Chatham County Health Department for examination of all its records with respect to all matters covered by this Contract. It shall also permit the Chatham County Health Department and/or representatives of the Accounting to audit, inspect, examine and make copies, excerpts or transcripts from such records of personnel, conditions of employment and other data relating to all matters covered by this Contract. All documents to be audited shall be available for inspection at all reasonable times in the main offices of the County Chatham County Health Department or at the offices of the Contractor as requested by the Chatham County Health Department.

CONVERSATIONS OR CORRESPONDENCE REGARDING THIS SOLICITATION OR REPORT BETWEEN PROSPECTIVE OFFERORS AND PERSONS OUTSIDE THE CHATHAM COUNTY HEALTH DEPARTMENT WILL NOT BE CONSIDERED OFFICIAL OR BINDING UNLESS OTHERWISE SPECIFICALLY AUTHORIZED WITHIN THIS DOCUMENT.

The undersigned bidder or proposer certifies that he/she has carefully read the preceding list of instructions to bidders and all other data applicable hereto and made a part of this invitation; and, further certifies that the prices shown in his/her bid/proposal are in accordance with all documents contained in this Invitation for Bids/Proposals package, and that any exception taken thereto may disqualify his/her bid/proposal.

This is to certify that I, the undersigned bidder, have read the instructions to bidder and agree to be bound by the provisions of the same.

This _______ day of __________________ 20______

BY ________________________________

SIGNATURE

____________________________________

TITLE

____________________________

COMPANY

__________________

Phone / Fax Nos.
Commencing March 1, 2023, Contractor shall provide uniformed housekeeping and janitorial services in and around 1395 Eisenhower Drive and 1602 Drayton Street (“CCBH properties”) as specified by the applicable terms.

Contract housekeeping/janitorial proctor personnel will provide a variety of service, implementing CCBH's housekeeping objectives according to policies and procedures, including the following:

All following services are to be completed outside of normal operating hours stated below with the exception of PROCTOR services, which will be performed during operating hours.

DAILY-Lobby/Office/Exam Room/Dental Clinic/Common Areas/Offices
All of the above areas should receive daily floor cleaning to include damp mopping of all hard surface areas, vacuuming of all carpeted areas, and scrubbing/spot cleaning of any heavily soiled surfaces.
All of the above areas should receive daily removal of trash to include red hazardous waste containers. All trash to be deposited in trash dumpster onsite, any recyclables to be placed in recycling canister on site, and hazardous materials to be boxed and taped for collection of hazardous waste company.
All of the areas above to have all plumbing fixtures scrubbed and cleaned. Fixtures include sinks, faucets, water fountains, bottle filling stations, toilets and urinals.
All of the above areas to receive horizontal dusting of surfaces to include file cabinets, chairs, tables, desktops, computers, phones and any further furniture located in these areas.
All of the above areas to receive daily dusting of all tiles and air vents.
All of the above areas to receive glass cleaning of all glass surfaces found within these locations. Glass on doors should be cleaned both inside and outside.
All of the above areas to be sanitized during cleaning with an approved medical disinfectant.

DAILY-Restrooms
Restrooms to receive daily (and as needed) stocking of all supplies such as hand towels, tissue and hand soap.
All sanitary napkin receptacles should be emptied daily (and as needed) and disinfected. Empty trash receptacles and wipe if needed.
Clean and polish mirrors
Sinks, faucets, toilets and urinals to be cleaned and disinfected inside and out.
Clean/dust partitions, tops of mirrors and frames and all ceiling vents.
All splash marks from walls, mirror and around sinks to be removed.
Disinfect all countertops, plumbing fixtures and floors.
All surfaces to be disinfected with an approved medical disinfectant.

DAILY-Break room
All trash/recyclable receptacles to be emptied and trash removed to appropriate dumpster location on site.
All trash/recyclable cans to be cleaned inside and out.
Wipe down all cabinet, refrigerator and microwave doors. And dust the tops of these pieces of equipment.
Clean and disinfect all drinking fountains/bottle filling stations.
Wipe all chairs down.
Clean and disinfect sinks, faucets and hardware.
Clean/disinfect all tables and countertops.
Dust, sweep and mop hard surface floors, then damp mop with approved disinfectant.
Clean interior and exterior of any windows or partition glass.

DAILY-Proctor (during operating hours and days stated below, excluding holidays.)

Maintain areas which are secured during the evening cleaning. (i.e. pharmacy area, drug rooms, files rooms, mail room, etc.)
Verify that all restrooms remain clean and stocked throughout the day.
Monitor trash and spills to prevent damage or injury.
Clean exterior walk areas at entrances of debris and trash.
Clean all vents, removing all dust.
Replenish and restock any items throughout the day as necessary.
Aide facility manager with inventory control of all supplies.

WEEKLY- Lobby/Office/Exam Room/Dental Clinic/Common Areas
Dust all vertical surfaces of desk, file cabinets, chairs, tables and other furnishings.
Thoroughly clean and dust all baseboards.
Remove fingerprints and marks from around light switches and doorframes.

MONTHLY- To be performed after normal cleaning hours due to safety concerns.
Buff all VCT flooring
Spot treat all carpet in main waiting areas, traffic lanes and conference rooms.
Deep scrub of all areas that have tile and grout.

YEARLY-To be performed after normal cleaning hours due to safety concerns.
Annual strip and wax of all VCT floors.
**OPERATING SCHEDULES**

<table>
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<tr>
<th>Site</th>
<th>Operating Hrs:</th>
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<tbody>
<tr>
<td>1395 Eisenhower Drive</td>
<td>8:00 a.m. - 5:00 p.m. Monday, Tuesday,</td>
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<tr>
<td></td>
<td>Wednesday and Friday</td>
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<tr>
<td></td>
<td>8:00 a.m. - 7:00 p.m. Thursday</td>
</tr>
<tr>
<td>1602 Drayton Street</td>
<td>8:00 a.m. - 5:00 p.m. Monday, Tuesday,</td>
</tr>
<tr>
<td></td>
<td>Wednesday and Friday;</td>
</tr>
<tr>
<td></td>
<td>8:00 a.m. - 7:00 p.m. Thursday</td>
</tr>
</tbody>
</table>

Contractor shall provide appropriate and necessary management and supervision for all Contractor’s employees and shall be solely responsible for instituting and invoking disciplinary action of employees not in compliance with Contractor's rules and regulations, as well as any other policy established by the contracting parties.

Contractor shall develop a comprehensive set of housekeeping guidelines documenting both general procedures as well site-specific responsibilities. The guidelines shall be prepared prior to the commencement of the contract and must be reviewed and approved by CCBH management within thirty (30) days from commencement of Contractor's services to CCBH. All housekeeping personnel will be required to read and verify they understand the guidelines and at minimum, shall be tested during the On-The-Job Training (OJT) period, annual or more frequently during site inspections.

Contractor shall ensure hiring, training and administration of motivated and professional employees that meet or exceed both Contractor's and CCBH's standards. A minimum of two to three staff must be assigned to the Eisenhower location and one staff at the Drayton street location.

Contractor is responsible for the daily personal appearance of housekeeping personnel. Contractor shall provide seasonal uniforms and weather-appropriate protective clothing necessary to support continuous performance of contract requirements.

Contractor shall administer all cost accounting and billing relative to this contract.

Contractor shall respond as necessary to accommodate additional duty hours as may be requested by the Chatham County Board of Health.

The Health Department will supply cleaning products to be used; e.g. all paper and cleaning chemicals.

The bid is for both Chatham County Health Department locations; i.e. bidders cannot bid on just one location.

References from projects completed by the bidder do not have to be $499,000 or more. Three references from completed projects are requested to be submitted, but if three projects have not been completed then personal references can be used.
ATTACHMENT A

DRUG - FREE WORKPLACE CERTIFICATION

THE UNDERSIGNED CERTIFIES THAT THE PROVISIONS OF CODE SECTIONS 50-24-1 THROUGH 50-24-6 OF THE OFFICIAL CODE TO GEORGIA ANNOTATED, RELATED TO THE **DRUG-FREE WORKPLACE**, HAVE BEEN COMPLIED WITH IN FULL. THE UNDERSIGNED FURTHER CERTIFIES THAT:

1. A Drug-Free Workplace will be provided for the employees during the performance of the contract; and

2. Each sub-contractor under the direction of the Contractor shall secure the following written certification:

________________________________________ (CONTRACTOR) certifies to Chatham County Health Department that a Drug-Free Workplace will be provided for the employees during the performance of this contract known as procurement housekeeping and janitorial services in and around 1395 Eisenhower Drive and 1602 Drayton Street (PROJECT) pursuant to paragraph (7) of subsection (B) of Code Section 50-24-3. Also, the undersigned further certifies that he/she will not engage in the unlawful manufacture, sale, distribution, possession, or use of a controlled substance or marijuana during the performance of the contract.

______________________________     __________
CONTRACTOR                                     DATE

______________________________     __________
NOTARY                                               DATE
ATTACHMENT B

SMOKE-FREE WORKPLACE CERTIFICATION

THE UNDERSIGNED CERTIFIES THAT THE PROVISIONS OF CODE SECTIONS 16-12-26 OF THE OFFICIAL CODE TO GEORGIA ANNOTATED, RELATED TO THE SMOKING IN PUBLIC PLACE, CHATHAM COUNTY CODE OF ORDINANCES, ARTICLE IX, SECTIONS 21-901 THRU 21-919-SMOKEFREE AIR ORDINANCE OF 2012, CHATHAM COUNTY HEALTH DEPARTMENT 9-1 HUMAN RESOURCE POLICY #103 “SMOKE FREE ENVIRONMENT” HAVE BEEN COMPLIED WITH IN FULL. THE UNDERSIGNED FURTHER CERTIFIES THAT:

1. A Smoke Free Workplace will be provided for the employees during the performance of the contract; and

2. Each sub-contractor under the direction of the Contractor shall secure the following written certification:

____________________________ (CONTRACTOR) certifies to Chatham County Health Department that a Smoke-Free Workplace will be provided for the employees during the performance of this contract known as procurement **housekeeping and janitorial services in and around 1395 Eisenhower Drive and 1602 Drayton Street** (PROJECT).

___________________________  ____________
CONTRACTOR                  DATE

___________________________  ____________
NOTARY                      DATE
ATTACHMENT C

PROMISE OF NON-DISCRIMINATION STATEMENT

Know All Men By These Presence, that I (We), ____________________________

Name

__________________________, ____________________________

Title          Name of Bidder

(herein after Company) in consideration of the privilege to bid/or propose on the following Chatham County project procurement _housekeeping and janitorial services in and around 1395 Eisenhower Drive and 1602 Drayton Street_ hereby consent, covenant and agree as follows:

(1) No person shall be excluded from participation in, denied the benefit of or otherwise discriminated against on the basis of race, color, national origin or gender in connection with the bid submitted to Chatham County Health Department or the performance of the contract resulting therefrom;

(2) That it is and shall be the policy of this Company to provide equal opportunity to all business persons seeking to contract or otherwise interested with the Company, including those companies owned and controlled by racial minorities, and women;

(3) In connection herewith, I (We) acknowledge and warrant that this Company has been made aware of, understands and agrees to take affirmative action to provide minority and women owned companies with the maximum practicable opportunities to do business with this Company on this contract;

(4) That the promises of non-discrimination as made and set forth herein shall be continuing throughout the duration of this contract with Chatham County Health Department;

(5) That the promises of non-discrimination as made and set forth herein shall be and are hereby deemed to be made a part of and incorporated by reference in the contract which this Company may be awarded;

(6) That the failure of this Company to satisfactorily discharge any of the promises of non-discrimination as made and set forth above may constitute a material breach of contract entitling the Chatham County Health Department to declare the contract in default and to exercise appropriate remedies including but not limited to termination of the contract.

__________________________  ____________________________

Signature              Date
ATTACHMENT D

DISCLOSURE OF RESPONSIBILITY STATEMENT
Failure to complete and return this information will result in your bid/offer/proposal being disqualified from further competition as non-responsive.

1. List any convictions of any person, subsidiary, or affiliate of the company, arising out of obtaining, or attempting to obtain a public or private contract or subcontract, or in the performance of such contract or subcontract.

2. List any indictments or convictions of any person, subsidiary, or affiliate of this company for offenses such as embezzlement, theft, fraudulent schemes, etc. or any other offenses indicating a lack of business integrity or business honesty which affects the responsibility of the contractor.

3. List any convictions or civil judgments under states or federal antitrust statutes.

4. List any violations of contract provisions such as knowingly (without good cause) to perform, or unsatisfactory performance, in accordance with the specifications of a contract.

5. List any prior suspensions or debarments by any governmental agency.

6. List any contracts not completed on time.

7. List any penalties imposed for time delays and/or quality of materials and workmanship.

8. List any documented violations of federal or any state labor laws, regulations, or standards, occupational safety and health rules.
I, ______________________________________, as ____________________________

Name of individual ___________________________________ Title & Authority

of ______________________________________, declare under oath that

__________________________________________

Company Name

the above statements, including any supplemental responses attached hereto, are true.

_____________________________________________

Signature

State of __________________________

County of __________________________

Subscribed and sworn to before me on this ______ day of ______

20__ by __________________________ representing him/herself to be

__________________________ of the company named herein.

__________________________ Notary Public

My Commission expires:

__________________________

Resident State: __________________________

DPC Form #45
ATTACHMENT E
O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a(n) ____________________ contract for a public benefit as referenced in O.C.G.A. § 50-36-1, from the CHATHAM COUNTY HEALTH DEPARTMENT, Georgia, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

1) _________ I am a United States citizen.

2) _________ I am a legal permanent resident of the United States.

3) _________ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: ____________________.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as: _______________________.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in ___________________ (city), __________________(state).

____________________________________
Signature of Applicant

____________________________________
Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
___ DAY OF ____________, 20____

________________________
NOTARY PUBLIC

My Commission Expires:
CHATHAM COUNTY, GEORGIA

BIDDER’S CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION

The undersigned certifies, by submission of this proposal or acceptance of this contract, that neither Contractor nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntary excluded from participation in this transaction by any Federal department or agency, State of Georgia, City of Savannah, Board of Education or local municipality. Bidder agrees that by submitting this proposal that Bidder will include this clause without modification in all lower tier transactions, solicitations, proposals, contracts and subcontracts. Where the Bidder or any lower tier participant is unable to certify to this statement, that participant shall attach an explanation to this document.

Bidder must verify Sub-Tier Contractors and Suppliers are not debarred, suspended, ineligible, pending County litigation or pending actions from any of the above government entities.

Certification - the above information is true and complete to the best of my knowledge and belief.

________________________________________________
(Printed or typed Name of Signatory)

________________________________________________
(Signature)

________________________________________________
(Date)

NOTE: The penalty for making false statements in offers is prescribed in 18 U.S.C. 1001
REFERENCES - $499,999 or more: On July 25, 2003 the Chatham County Board of Commissioners directed that all construction projects with a bid of $499,999 or less, for bidders to be responsive each must provide information on the most recent three (3) projects with similar scope of work as well as other information to determine experience and qualifications as follows. If the contractor has performed any work for the Chatham County Board of Commissioners within the last five (5) years, at least one (1) of the three (3) owner references must be from the appropriate party within the Chatham County Government.

a. Project Name: ________________________________
   Location: ________________________________
   Owner: ________________________________
   Address: ________________________________
   City and State: ________________________________
   Contact: ________________________________
   Phone & Fax: ________________________________
   *Architect or Engineer: ________________________________
   Contact: ________________________________
   Phone & Fax: ________________________________
   Email: ________________________________

b. The awarded bid amount and project start date. __________
c. Final cost of project and completion date.
d. Number of change orders. __________
e. Contracted project completion in days. __________
f. Project completed on time. Yes____ No____ Days exceeded __________.
g. List previous contracts your company performed for Chatham County by Project Title, date and awarded/final cost.
h. Has contractor ever failed to complete a project? ____ If so, provide explanation.
i. Have any projects ever performed by contractor been the subject of a claim or lawsuit by or against the contractor? ____ If yes, please identify the nature of such claim or lawsuit, the court in which the case was filed and the details of its resolution.
# 2

REFERENCE FORM

REFERENCES - $499,999 or more: On July 25, 2003 the Board of Commissioners directed that all construction projects with a bid of $499,999 or less, for bidders to be responsive each must provide information on the most recent three (3) projects with similar scope of work as well as other information to determine experience and qualifications as follows. If the contractor has performed any work for the Chatham County Board of Commissioners within the last five (5) years, at least one (1) of the three (3) owner references must be from the appropriate party within the Chatham County Government

a. Project Name: __________________________
Location: __________________________
Owner: __________________________
Address: __________________________
City and State: __________________________
Contact: __________________________
Phone & Fax: __________________________
*Architect or Engineer: __________________________
Contact: __________________________
Phone & Fax: __________________________
Email: __________________________

b. The awarded bid amount and project start date. __________
c. Final cost of project and completion date.
d. Number of change orders. ______
e. Contracted project completion in days. ______
f. Project completed on time. Yes____ No____ Days exceeded______
g. List previous contracts your company performed for Chatham County by Project Title, date and awarded/final cost.
h. Has contractor ever failed to complete a project?_____ If so, provide explanation.
i. Have any projects ever performed by contractor been the subject of a claim or lawsuit by or against the contractor? _____ If yes, please identify the nature of such claim or lawsuit, the court in which the case was filed and the details of its resolution.
REFERENCE FORM

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a. Project Name: _______________________________
   Location: _______________________________
   Owner: _______________________________
   Address: _______________________________
   City and State: _______________________________
   Contact: _______________________________
   Phone & Fax: _______________________________
   *Architect or Engineer: _______________________________
   Contact: _______________________________
   Phone & Fax: _______________________________
   Email: _______________________________

b. The awarded bid amount and project start date. __________
c. Final cost of project and completion date.
d. Number of change orders. __________
e. Contracted project completion in days. __________
f. Project completed on time. Yes____ No____ Days exceeded _________.
g. List previous contracts your company performed for Chatham County by Project Title, date and awarded/final cost.
h. Has contractor ever failed to complete a project?_____ If so, provide explanation.
i. Have any projects ever performed by contractor been the subject of a claim or lawsuit by or against the contractor? _______ If yes, please identify the nature of such claim or lawsuit, the court in which the case was filed and the details of its resolution.
ATTACHMENT G

BID SHEET

BID # 2022-2

PROJECT: Housekeeping and janitorial services in and around 1395 Eisenhower Drive and 1602 Drayton Street; Chatham County Health Department

Date: ____________

BID AMOUNT: _______________. * This document should be enclosed in an opaque envelope as specified by the Bid Documents.

__________________________ (Firm)

__________________________ (Signature)

__________________________ (Title)
### ATTACHMENT H

**SUBCONTRACTOR SHEET**

<table>
<thead>
<tr>
<th>Subcontractor</th>
<th>Address</th>
<th>Telephone #</th>
<th>M/WE ? Y/N</th>
<th>~ Percentage of Work</th>
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</table>
By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with A S Private Security, LLC on behalf of Chatham County Health Department, Savannah, Georgia has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned contractor will forward notice of the receipt of an affidavit from a subcontractor to the Chatham County Health Department within five business days of receipt. If the undersigned contractor receives notice of receipt of an affidavit from any sub-subcontractor that has contracted with a subcontractor to forward, within five business days of receipt, a copy of such notice to the Chatham County Health Department. Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

________________________
Date of Authorization

________________________
Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, __, 2022 in ____ (city), ______ (state).

________________________
Signature of Authorized Officer or Agent

________________________
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF ______________, 2022.

________________________
NOTARY PUBLIC
CHECKLIST FOR SUBMITTING BID

Sign below and submit this sheet with Bid

NOTE: All of the following items must be submitted with your Bid to be considered “responsive”. Remember to follow the Instructions in the Bid Documents.

1. COUNTY TAX CERTIFICATE SHEET

2. INSTRUCTIONS TO BIDDERS SIGNATURE SHEET

3. ACKNOWLEDGMENT OF ANY/ALL ADDENDUMS (if any Addendums issued).

4. BID SHEET COMpletely FILLED OUT AND SIGNED.

5. “LIST OF SUBCONTRACTORS” SHEET FILLED OUT WITH ALL SUBCONTRACTORS AND SUPPLIERS.

7. SECTION 2.27 OF ITB - REFERENCES: Read this section and submit the correct number of “References” (based on total dollar amount of project) Note: Supply ALL the information that is requested for each Reference. NOTE: Forms for Reference Information are attached to this Bid Package.

8. COMPLETE AND SUBMIT ALL ATTACHMENTS TO THE ITB (Attachments A thru I). E-VERIFY AFFIDAVIT IS TO BE FILLED OUT FOR EACH SUBCONTRACTOR.

________________________________________________________
NAME/TITLE

________________________________________________________
COMPANY NAME

________________________________________________________
ADDRESS

________________________________________________________
CITY/STATE/ZIP

________________________________________________________
PHONE NUMBER

________________________________________________________
FAX NUMBER