

CITY OF MOBILE

BID SHEET

Mailing Address:
 P. O. Box 1948
 Mobile, Alabama 36633
 (251) 208-7434

**Purchasing Department
 and Package Delivery:**
 Government Plaza
 4th Floor, Room S-408
 205 Government St
 Mobile, Alabama 36644

This is Not an Order

**READ TERMS AND CONDITIONS
 ON REVERSE SIDE OF THIS PAGE
 BEFORE BIDDING**

Typed by: mns Buyer: 007

Please quote the lowest price at which you will furnish the articles listed below

DATE	BID NO.	DEPARTMENT	Commodities to be delivered F.O.B. Mobile to:
06/27/2019	5302	Various	As Specified

This bid must be received and stamped by the Purchasing office not later than: 10:30 AM Friday, July 12, 2019

QUANTITY	ARTICLES	UNIT	UNIT PRICE		EXTENSION	
			Dollars	Cents	Dollars	Cents
Bid on this form ONLY. Make no changes on this form. Attach any additional information required to this form.						
EQUIPMENT MEDICAL						
<p>The City of Mobile requests bids for the following items as per attached RFQ. Pricing shall remain firm until 30 June 2020.</p> <p>At the option of the City and the successful Vendor, the award may be extended for two (2) additional one (1) year periods.</p> <p>Quote pricing & quote units as specified on RFQ.</p> <p><u>On items with more than one (1) acceptable choice, you must indicate the specific item that you are bidding. Failure to indicate will be entered as a no bid on that item.</u></p> <p>All substitutions must be indicated on RFQ near description of item specified. Indicate on your bid if an item has been discontinued. Vendors found to be substituting, without that item being indicated on this bid as a substitution, may lose that awarded item.</p> <p>If vendor states a vendor item number that item must also state manufacturers make and model number. <u>Failure to indicate this will be entered as a no bid on that item.</u></p> <p>It is the responsibility of the vendor to provide the City with the necessary catalogs, samples or literature, to compare the items being bid. If sample is requested, it must be delivered to the City of Mobile within 48 hours.</p>						
			TOTAL			

**RETURN ONE SIGNED COPY OF THIS BID
 IN ENCLOSED ENVELOPE**

State delivery time within _____ days of receipt of P.O.

Firm Name _____

Typed Signature _____

By _____

We will allow a discount _____ % 20 days from date of receipt of goods and correct invoice of completed order.

1. All quotations must be signed with the firm name and by an authorized officer or employee.
2. Verify your bid before submission as it cannot be withdrawn or corrected after being opened. In case of error in extension of prices, the unit price will govern
3. If you do not bid, return this sheet and state reason. Otherwise, your name may be removed from our mailing list.
4. The right is reserved to reject any, or all quotations, or any portions thereof, and to waive technicalities if deemed to be in the interest of the City of Mobile.
5. This bid shall not be reassignable except by written approval of the Purchasing Agent of the City of Mobile.
6. State brand and model number of each item. All items bid must be new and latest model unless otherwise specified.
7. If bid results are desired, enclose a self-addressed and stamped envelope with your bid. (All or None bids only)
8. Do not include Federal Excise Tax as exemption certificate will be issued, in lieu of same. The City is exempt from the Alabama and City sales taxes.
9. PRICES ARE TO BE FIRM AND F.O.B. DESTINATION UNLESS OTHERWISE REQUESTED.
10. BID WILL BE AWARDED ON ALL OR NONE BASIS UNLESS OTHERWISE STATED.
11. Bids received after specified time will be returned un-opened
12. Failure to observe stated instructions and conditions will constitute grounds for rejection of your bid.
13. Furnish literature, specifications, drawings, photographs, etc., as applicable with the items bid.
14. Vendor May be required to obtain City of Mobile Business License as applicable to City of Mobile Municipal Code Section 34-50. For Business License inquiry contact the Revenue Department at (251) 208-7461 or cityofmobile.org/taxes.php.
15. If a bid bond is required in the published specifications, see below:
Each Bid Shall be Accompanied By A **Cashier's Check, Certified Check, Bank Draft Or Bid Bond** For the Sum Of Five (5) Percent Of The Amount Bid, Made Payable To The City Of Mobile And Certified By A Reputable Banking Institution. All Checks Shall Be Returned Promptly, Except The Check Of The Successful Bidder, Which Shall Be Returned After Fulfilling The Bid.
16. Contracts in excess of \$50,000 require that the successful bidder make every possible effort to have at least fifteen (15) percent of the total value of the contract performed by socially and economically disadvantaged individuals.
17. All bids/bid envelopes must have the bid number noted on the front. Bids that arrive unmarked and are opened in error shall be returned to vendor as an unacceptable bid.
18. If successful vendor's principal place of business is out-of-state, vendor may be required to have a Certificate of Authority to do business in the State of Alabama from the Alabama Secretary of State prior to issuance of a Purchase Order. Vendors are solely responsible for consulting with the Secretary of State to determine whether a Certificate is required. See www.sos.alabama.gov/BusinessServices/ForeignCorps.aspx. Please note that the time between application for and issuance of a Certificate of Authority may be several weeks.
19. Vendors do not need a City of Mobile Business License or Certificate of Authority from the Alabama Secretary of State to submit a bid, but will need to obtain the Business License and Certificate of Authority, if applicable, prior to issuance of a Purchase Order

BID CONTINUATION SHEET

QUANTITY	ARTICLES	UNIT	UNIT PRICE		EXTENSION	
			Dollars	Cents	Dollars	Cents
	<p align="center">Page 2 of 3</p> <p>The City reserves the right to reject any item bid by a vendor due to lack of information in order to compare item (i.e.: no catalogs, literature or specifications). Do not send catalog or literature unless requested.</p> <p>The City reserves the right to reject an item from contract if that item fails to perform as needed or does not meet the best needs of the City of Mobile.</p> <p>All quantities purchased will be based on an as needed basis by City Department.</p> <p>All items/orders to be delivered to departments.</p> <p>Note: If large bulk quantities (such as gloves) are ordered in quantities of 10 or more cases, the cases are to be palletized by size. Orders placed by City of Mobile MFRD are to be delivered to the loading dock for forklift operations.</p> <p>All prices quoted are to be delivered prices F.O.B. Mobile.</p> <p>State any special conditions or ordering instructions. (Pay particular attention to instruction #9 on back of page 1).</p> <p>The City will attempt to send purchase orders for higher amounts; however, due to computerized issuance of P.O.'s, some will be for low dollar amounts. Vendor must accept all (large & small) purchase orders for items awarded.</p> <p>Please note: In an effort to update our bid files, vendor(s) who fail to bid may be removed from medical equipment listings.</p> <p>If you do not wish to bid on the following categories, yet wish to remain on bid list for items other than those on the following pages, you must so notify the City of Mobile Purchasing Department in writing as to specific items that you wish to be listed for, otherwise removal may occur.</p> <p>No Bid Bond is required.</p> <p>All vendors will be required to provide verification of enrollment in the E-Verify program. Additional information may be found at http://immigration.alabama.gov/</p> <p>If the successful vendor's principal place of business is out-of-state, vendor may be required to have a Certificate of Authority to do business in the State of Alabama from the Secretary of State prior to issuance of a Purchase Order.</p>					
			TOTAL			

Bid on this form ONLY. Make no changes on this form. Additional information to be submitted on separate sheet and attached hereto.

RETURN ONE SIGNED COPY OF THIS QUOTATION IN ENCLOSED ENVELOPE

READ ABOVE INSTRUCTIONS BEFORE QUOTING

Firm Name _____

By _____

We will allow a discount _____ % 20 days from date of receipt of goods and correct invoice of completed order.

BID CONTINUATION SHEET

QUANTITY	ARTICLES	UNIT	UNIT PRICE		EXTENSION	
			Dollars	Cents	Dollars	Cents
	<p align="center">Page 3 of 3</p> <p>Vendors are solely responsible for consulting with the Secretary of State to determine whether a Certificate is required. See: www.sos.alabama.gov/BusinessServices/ForeignCorps.aspx. Please note that the time between application for the issuance of a Certificate of Authority may be several weeks.</p> <p>Upon notification, vendor will have 10 business days to provide the Certificate of Authority and the E-Verify numbers to the Purchasing Department before award can be completed. (Vendors will possibly need to pay the expedite fee to meet this requirement because application is not sufficient. We must have a copy of the certificate with your Company ID number).</p> <p>Vendors do not need a City of Mobile Business License or Certificate of Authority from the Alabama Secretary of State, nor the E-Verify for certification to submit a bid, but will need to obtain the Business License and Certificate of Authority verification and/or provide the E-Verify Certification, if applicable, prior to issuance of a Purchase Order.</p> <p>Be sure to sign and return this page including the terms and conditions on the reverse of page 1.</p> <p>THE CITY OF MOBILE DOES NOT ACCEPT VENDOR'S TERMS AND CONDITIONS.</p> <p>TO BE AWARDED ON AN ITEM BASIS</p> <p>The Purchasing Department is seeking to make this bid process more acceptable for all parties involved. Recommendations for changes or modifications that could be incorporated into the next Industrial and Safety Supply bid should be submitted under separate cover. Do not submit with or on this bid.</p> <p>State of Alabama Local Vendor Preference Law 41-16-50 (a) and (d) will apply to this purchase.</p> <p>Remember to return this original bid sheet signed along with attached RFQ.</p> <p align="center">For additional information contact: City of Mobile Purchasing Jim Neese (Buyer) @ (251) 208-7401</p>					
			TOTAL			

RETURN ONE SIGNED COPY OF THIS QUOTATION IN ENCLOSED ENVELOPE

READ ABOVE INSTRUCTIONS BEFORE QUOTING

Firm Name _____

By _____

We will allow a discount _____ % 20 days from date of receipt of goods and correct invoice of completed order.

PLEASE, DO NOT QUOTE A SUBSTITUTE

IF THE ITEM DESCRIPTION STATES:

NO SUBS OR NO SUBSTITUTES.

UNLESS THAT ITEM HAS BEEN DISCONTINUED

BY THE MANUFACTURER.

RFQ FOR MEDICAL BID #5302

<u>ITEM</u>	<u>DESCRIPTION</u>	<u>UOM</u>	<u>PRICE</u>
1	BAG, C-COLLAR, LA RESCUE, NAVY BLUE, 24"L x 5"W x 11"T, NO SUBS.	EACH	\$
2	BOX MEDICAL, FOR FIREMEDICS, PLANO #747-004 XL 3 TRAY, 3 PULLOUT DRAWERS, EXTRA DEEP BOTTOM, 20.83" X 11.5" X 12.75", NO SUBS.	EACH	\$
3	CLIPPER, SURGICAL, 3M, MODEL 9661L WITH PIVOTING HEAD, NO SUBS.	EACH	\$
4	WIPE, GERMICIDAL, SUPER SANI-CLOTH GERMICIDAL DISPOSABLE WIPE, LARGE CANISTER, CONTAINS 160 WIPES, 6" x 6.75", P. D. I., SKU #Q55172, CASE, 12 CANISTERS PER CASE, NO SUBS.	CASE	\$
5	CHARGER, SURGICAL, 3M, FOR CLIPPER MODEL 9661L, CHARGER MODEL #9662L, NO SUBS.	EACH	\$
6	STRETCHER: FERNO MODEL 9, ADJUSTABLE BACKREST EMERGENCY STRETCHER, FOLDING, INCLUDES PATIENT RESTRAINTS, 4" WHEELS @ HEAD END WITH STATIONARY POSTS @ FOOT END, NO SUBS.	EACH	\$
7	PUNCH WINDOW, SPRING LOADED, ADJUSTABLE, MATRX #AN360.	EACH	\$
8	BAGS RED, BIO MEDICAL WASTE BAGS, WITH SYMBOL & WORDS IN BLACK, MEET A.S.T.M. DART TEST REQUIREMENTS, 25 X 34, 20 GAL., 50 EACH PER BOX, 4 BOXES PER CASE.	CASE	\$
9	SODIUM CHLORIDE, 0.9% SODIUM CHLORIDE INJECTION USP 250 ML BAG, 24/CASE, BRAND OR MANUFACTURER MAY BE BRAUN OR BAXTER, OR HOSPIRA, THESE BRANDS ONLY, NO SUBS.	CASE	\$
10	BOX MEDICAL, FLAMBEAU 2072.	EACH	\$

RFQ FOR MEDICAL BID #5302

11	16302	MASK INFANT HIGH CONCENTRATION WITH 7' TUBING, HUDSON RCI-TELEFLEX MEDICAL ITEM #395407, INDIVIDUALLY PACKAGED, 50/CASE, NO SUBS.	CASE	\$
12	16147	DRESSING, SAM CHEST SEAL DRESSING, 9.2" X 7.6", DESIGNED FOR OPEN CHEST WOUNDS, LARGE COVERAGE AREA, 2 DRESSINGS PER PACK (NON-VALVE VERSION), LATEX FREE, TRANSPARENT, 5" X 9" PAD, SAM #CS062011, NO SUBS.	PACK	\$
13	16265	TOURNIQUET C-A-T, COMBAT APPLICATION TOURNIQUET, 6.5" L X 2.4" W X 1.5" D, BLACK, NSN #6515-01-521-7976, NO SUBS	EACH	\$
14	16301	MASK PEDIATRIC NON REBREATHING WITH SAFETY VENT, ADJUSTABLE NOSE CLIP, 750ML RESERVOIR BAG COMPLETE WITH 7' OXYGEN SUPPLY TUBING, HUDSON RCI TELEFLEX MEDICAL ITEM #1058, INDIVIDUALLY PACKAGED 50/CASE, NO SUBS.	CASE	\$
15	16302	MASK INFANT HIGH CONCENTRATION WITH 7' TUBING, HUDSON RCI-TELEFLEX MEDICAL ITEM #395407, INDIVIDUALLY PACKAGED, 50/CASE, NO SUBS.	CASE	\$
16	16385	HOLDER SUCTION CANISTER HOLDER, SSCOR/BOARD CANISTER HOLDER - METAL, MFG ITEM #22002, NO SUBS.	EACH	\$
17	16469	BLANKET 100% POLYESTER, DISPOSABLE, GRAY, 60" X 80", DYNAREX, 24/CASE, NO SUBS.	CASE	\$
18	16481	BOTTOM REPLACEMENT FOR FERNO BAG MB5108, REPLACEMENT BOTTOM 5156, BLACK, NO SUBS.	EACH	\$
19	16508	ADAPTER/CONNECTO, QUICK CONNECT, VACUUM OHMEDA, 1/4" HOSE BARB, PRECISION, ITEM #2311, NO SUBS.	EACH	\$
20	16388	TRIANGLE ROAD WARNING KIT, REFLECTIVE, 3 TRIANGLES IN HEAVY DUTY ABS RED CASE.	EACH	\$

RFQ FOR MEDICAL BID #5302

21	6887	THOMAS TUBE HOLDER, LAERDAL #600-10000, ADULT, 25 PER BOX, NO SUBS.	BOX	\$
22	6888	THOMAS TUBE HOLDER, LAERDAL #600-20000, PEDIATRIC, 25 PER BOX, NO SUBS.	BOX	\$
23	13607	TUBE, SHILEY ENDOTROL ORAL/NASAL ENDOTRACHEAL TUBE CUFFED, MURPHY EYE, 7.0 mm, WITH CONTROL TIP, COVIDIEN, 10 PER BOX, NO SUBS.	BOX	\$
24	16052	HAND SANITIZER, KLEENEX, ALCOHOL FREE FOAM, KIMBERLY-CLARK ITEM #34136, 1.5oz BOTTLE, 24 BOTTLES PER CASE, NO SUBS.	CASE	\$
25	16053	HAND SANITIZER, KLEENEX, ALCOHOL FREE FOAM, KIMBERLY-CLARK ITEM #45827, 18oz BOTTLE, 4 BOTTLES PER CASE, NO SUBS.	CASE	\$
26	16058	IV PRESSURE INFUSER, INFU-STAT PRESSURE INFUSER, 1000mL, CURAPLEX, DISPOSABLE, 25 PER CASE, NO SUBS.	CASE	\$
27	16084	BOX, CLEARTOPBOX NARCOTICS BOX, WITH LOCK, DIMENSIONS: 6-1/4"W x 7-1/4"L x 2-1/8"D WITH FOUR 1-1/4" INTERNAL SLOTS FOR DRUG STORAGE, CNB-200, NO SUBS.	EACH	\$
28	16182	INFUSION SET, WINGED, SURSHIELD SAFETY WINGED INFUSION SETS, TERUMO, 23ga x 3/4, 3.5" TUBING, SV*S23BLS, PACKED: 50/BOX, NO SUBS.	BOX	\$
29	15003	AIRWAY, KING LTS-D, SUPRAGLOTTIC AIRWAY KIT SIZE 3, KLTSD433, 5/CASE, NO SUBSTITUTES.	CASE	\$
30	16440	AIRWAY, KING LTS-D, SUPRAGLOTTIC AIRWAY KIT SIZE 4, KLTSD434, 5/CASE, NO SUBSTITUTES.	CASE	\$
31	16441	AIRWAY, KING LTS-D, SUPRAGLOTTIC AIRWAY KIT SIZE 5, KLTSD435, 5/CASE, NO SUBSTITUTES.	CASE	\$



PROCUREMENT DEPARTMENT

Potential bidders are responsible to check this site for any **ADDENDUMS** that are issued. It is the responsibility of the **BIDDER** to check for, download, and include with their **BID RESPONSE** any and all **ADDENDUMS** that are issued for a specific **BID** published by the City of Mobile. Failure to download and include **ADDENDUMS** in your **BID RESPONSE** may cause your bid to be rejected.

This is a sealed bid. Any responses faxed or e-mailed will be rejected.

This is a sealed bid. Any response must be submitted in a sealed envelope with the bid number and bid opening date on the outside of the envelope.

Any response that arrives improperly marked or with no bid number and opening date on the outside of the delivery or express package and opened in error will be rejected and not considered.

It is the responsibility of the bidder to insure that their bid response is delivered to and received in the Purchasing Department before the date and time of the bid opening.

Be sure to read the Terms and Conditions. All bids are F.O.B. Destination unless otherwise stated.

Be sure to sign your bid!

Package/Bid Delivery Address:
Purchasing Department
205 Government St. Room S408
Mobile, AL 36644

(Request First Delivery)