

DEKALB COUNTY



Board of Health

INVITATION TO BID NUMBER 23-3004-RFQ02

UNARMED SECURITY GUARD SERVICES

OFFERED BY:

**DEKALB COUNTY BOARD OF HEALTH
OFFICE OF PURCHASING
445 WINN WAY
DECATUR, GEORGIA 30030**

Bidder is cautioned to carefully read the instruction and the terms and conditions on the attached sheets. Failure to adhere to these instruction and terms and conditions may result in rejection of bid.

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INVITATION TO BID No. 23-3004-RFQ02 BID TYPE: UNARMED SECURITY GUARD SERVICES		Bids will be received by DeKalb County Board of Health at the office of Internal Services until the close date and time specified noted below. All bids are subject to the terms and conditions contained within.	
POSTING DATE: APRIL 26, 2023			
SEALED BID:		CLOSE DATE: FRI., MAY 12, 2023 TIME: 5:00 P.M. EST	
ISSUING OFFICER: ADDRENNA LATHAM ADDRENNA.GILCHRIST1@DPH.GA.GOV		TELEPHONE: 404-508-7758	FAX: 404 508-7810

<u>THIS BID IS TO BE RETURNED TO:</u> DEKALB COUNTY BOARD OF HEALTH ISSUING OFFICER: ADDRENNA LATHAM OFFICE OF PURCHASING 445 WINN WAY, SUITE 398 DECATUR, GA 30030	<u>VENDOR INFORMATION</u> COMPANY NAME _____ ATTENTION: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ TELEPHONE: _____ EMAIL: _____
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TO BE COMPLETED BY VENDOR:	
1.	If the above vendor address is not in Georgia, does your company maintain an office in Georgia? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, note Georgia address:</i>
_____ <div style="display: flex; justify-content: space-between;"> Address City/Zip </div>	
I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm or person submitting a bid for the same materials, supplies, or equipment, and is, in all respects, fair and without collusion or fraud. I understand that collusive bidding is a violation of state and federal law and can result in fines, prison sentences and civil damage awards. I agree to abide by all conditions of this bid and certify that I am authorized to sign this bid for the vendor (O.C.G.A. 50-5-67). I further certify that the provisions of the official Code of Georgia annotated 45-10-20 es.seq. have not and will not be violated in any respect.	

_____ Authorized Signature	_____ DATE
_____ Type Name of Authorized Signature	TOTAL BID AMOUNT: <div style="border: 1px solid black; width: 150px; height: 30px; display: inline-block;"></div>

Bidder is cautioned to carefully read the instructions and the terms and conditions on the attached sheets. Failure to adhere to these instructions and terms and conditions may result in rejection of bid. Failure to sign this statement will render bid invalid.

***FRONT OF RETURN ENVELOPE MUST INDICATE INVITATION TO BID NUMBER,
CLOSE DATE AND TIME***

INSTRUCTIONS

1. Bids will be received by the DeKalb County Board of Health (DCBOH), Issuing Officer: Addrenna Latham, Division of Internal Services at the address shown above and until the date and time indicated above.
2. Bidders are expected to examine the specifications, schedule, all instructions, and attachments. Failure to adhere to the specifications, schedule, all instructions, and attachments may result in rejection of response to this Invitation to Bid ("ITB").
3. All responses to this ITB should be complete and carefully worded and must convey all of the information requested.
4. The authorized representative of the bidder must sign, date and type name on all applicable pages located within this ITB. Evidence of representatives' authority to sign for vendor must accompany this ITB. **Unsigned responses to this ITB will not be considered.**
5. Response to ITB must be submitted in original form only. Bids must be presented in a **SEALED ENVELOPE.**
6. Submission of the response to this ITB requires the name and address of the bidder, the bid number, date and time of bid closing on the envelope, as indicated within the ITB.

TERMS AND CONDITIONS

If any part of the work covered by this ITB is to be subcontracted, prior written approval of subcontractor(s) is required from the DCBOH. The bidder shall identify the subcontractor(s) and the anticipated contractual arrangements to be made with the subcontractor(s).

1. There is no express or implied obligation for the DCBOH to reimburse and/or compensate bidder for any expenses incurred in preparing or submitting their bid in response to this ITB.
2. Bids cannot be withdrawn or corrected after opening of the sealed bid submitted. (EXCEPTION: reductions and changes by the successful bidder that will be to the advantage of the DCBOH.)
3. Services offered in response to the ITB must comply with all federal, state and local laws. The DCBOH is exempt from federal and state sales tax.
4. When not otherwise specified, the bidder must definitively state the time of proposed delivery. Do not use words such as "immediate" or "as soon as possible." Please state the exact earliest date or the minimum number of calendar days required after receipt of order. (Calendar days include Saturday, Sunday and holidays.)

("TERMS AND CONDITIONS" Continued)

5. Except as otherwise provided, the successful bidder agrees to indemnify the DCBOH and its officers, agents and employees against liability, including costs and expenses, for infringement upon any copyrights or patents of the United States arising out of the performance of this contract for the account of the DCBOH of services performed hereunder.
6. Bids and modifications or withdrawals received at the Office of Purchasing designated in this ITB after the exact time set for opening/closing of bids will not be considered.
7. By submission of response to this ITB, 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:
 - a. the prices in response to this ITB 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; and,
 - b. unless otherwise required by law, the prices that have been quoted in the response to this ITB have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to the opening, directly or indirectly, to any other bidder or to any competitor; and,
 - c. 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 of restricting competition.
8. The DCBOH will furnish no material, labor or facilities unless otherwise provided for in this ITB or in the plans and specifications.
10. Failure to observe any of the instructions and conditions in this ITB may constitute grounds for rejection.
11. Services offered in response to this ITB must comply with all federal, state, and local laws and regulations as applicable on the date of delivery.

EXPLANATION

1. The sole contact for any and all information regarding the ITB is the Issuing Officer for the DeKalb County Board of Health, Addrenna Latham, Addrenna.gilchrist1@dph.ga.gov.
2. If any statement in the bidding documents, specifications, plans, etc., appear to be ambiguous to the bidder, the bidder is specifically instructed to make a written request to the Issuing Officer as outlined in the preceding statement. Any information given to a prospective bidder concerning this ITB will be furnished to all prospective bidders via an online posting and update to this RFQ. Oral explanations or instructions given before the award of the contract will not be binding.
3. Any modifications to the terms, conditions, or specifications contained in this ITB must be in writing. With the exception of the Issuing Officer, employees of the DCBOH are not authorized to modify, interpret, or clarify such terms, conditions or specifications; and, bidders should not rely on the presentments of employees or agents other than those with express authority to make such presentments.

EXAM OF SITES

DCBOH WALK-THROUGH REQUIREMENTS:



MANDATORY WALK-THROUGH.

THE WALK-THROUGH WILL BE CONDUCTED BEGINNING FRIDAY, MAY 5, 2023

AS FOLLOWS:

9:00 a.m. E.L. Richardson Health Center, 445 Winn Way, Decatur, GA 30030
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(we will meet in the Bohan Auditorium)
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T.O. Vinson Health Center, 440 Winn Way, Decatur, GA 30030
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11:30 a.m. North DeKalb Health Center, 3807 Clairmont Road, Chamblee, GA 30341
--

1:00 p.m. Clifton Springs Health Center, 3110 Clifton Springs Rd, Decatur, GA 30034

2:00 p.m. East DeKalb Health Center, 2277 S. Stone-Mountain-Lithonia Rd., Lithonia, GA 30058
--

3:30 p.m. Tucker WIC 4394 Hugh Howell Rd., Tucker, GA 30084

Potential bidders will not be permitted to schedule a tour at a different time or date. An attendance record will be available. Potential bidders must attend and complete the entire site visit. Bidders who do not complete the entire site visit at each facility will not be considered for award.

Submission of the response to this ITB will create a presumption that bidder has visited the premises and has taken into consideration all conditions that might affect the work. No consideration will be given to any claim based on lack of knowledge of existing conditions, except where conditions cannot be reasonably ascertained. No other site visits are authorized other than the visit designated under "Exam of Sites." Any questions regarding the site visit are to be directed to the Issuing Officer as outlined above in Paragraph 1 of "Explanation."

AWARD

1. The contract, if awarded, will be awarded to the bidder whose bid will be most advantageous to the DCBOH, with price, and other factors considered. The DCBOH will make the determination.
2. The DCBOH reserves the right to reject or accept any or all bids and to waive informalities, minor irregularities and technicalities in bids received, whichever is deemed to be in the best interest of the DCBOH, to include re-advertisement of the ITB.
3. In the event that responses to the ITB collected exceed the funds budgeted for this project; the DCBOH reserves the right to reduce the scope of the project. The lowest qualified responsive and responsible bidder will be contacted to negotiate a reduction in scope and/or bid amount. If the terms cannot be reached, the next lowest qualified responsive bidder will be contacted. The method will be followed until terms are reached or all bids are rejected.

INSURANCE AND CERTIFICATION

Bidder Contractors are required to provide to the DCBOH within its sealed bid, a copy of its Certificate(s) of Insurance (“COI”) stating that general and comprehensive insurance is in effect during the period of the contract. Insurance companies licensed to do business in the state of Georgia must issue the insurance certificate. The COI is to contain:

1. Limits of liability insurance shall not be less than \$1,000,000 combined single limit each occurrence.
2. Workers’ Compensation (WC) Insurance (Occurrence) in the amounts of the statutory limits established by the General Assembly of the State of Georgia O.C.G.A. Section 33-9-40.1. In addition, Contractor shall require all subcontractors occupying the premises or performing work under this Contract to obtain an insurance certificate showing proof of Workers Compensation Coverage.

Statutory WC Limits required in all contracts:

Bodily Injury by Accident – Each Employee	\$100,000
Bodily Injury by Disease - Each Employee	\$100,000
Bodily Injury by Disease - Policy Limit	\$500,000

3. Comprehensive General Liability Policy (Occurrence), to include contractual liability, \$1 million per Occurrence/\$3million dollar aggregate policy limits.
4. Business Auto Policy (Occurrence) to include, but not be limited to liability coverage on any owned, non-owned and hired vehicle used by Contractor or Contractor’s personnel in the performance of this Contract. \$1 million per Occurrence/\$3 million amount policy limits.
5. With limits of \$100,000.00 property damage each occurrence - general liability coverage and automobile liability coverage.
6. Umbrella” or “excess” coverage cannot be used to reach limits stated in a) and b).

7. Coverage for personal injuries for false arrest detection of imprisonment, malicious prosecution, libel, slanders defamation, or violation of right of privacy. If the certificates do not specify these coverage's, a copy of the policy section must be submitted with the certificate.
8. That the insurer will not cancel insured's coverage without ten (10) days prior written notice to the DCBOH.
9. The contractor, its agents, servants, or employees shall defend, indemnify and hold harmless the Board for any claims, charges or suits that arise due to the Contractor's error, omission, negligence or acts.

BONDING

The awarding bidder is required to submit to the DCBOH a Performance Bond in an amount equal to 100% of the total contract price. The bidder should, at their own expense, make arrangements for the issuance of this bond to the DCBOH within ten (10) business days of contract award.

NOTICE TO BIDDERS

The enclosed (or attached) bid in response to Invitation to Bid Number 23-3004-RFQ02 is a firm offer, as defined by the Georgia Code (O.C.G.A. 11-2-205). This offer shall remain open for acceptance for a period of ninety (90) days from the date of the ITBs closing date as set out in the ITB. The terms, conditions, and other limitations of the ITB are accepted.

SILENCE OF SPECIFICATIONS

The apparent silence of any specification on the specification price sheets as to any details, or the omission from it of a detailed description concerning any point, shall be regarded as meaning that only the best commercial practices are to prevail, and the only materials of first quality and correct type, size, and design are to be used. All work is to be of the highest quality. All interpretation of this specification shall be made upon the basis of this statement, with the DCBOH to prevail.

TERMINATION

This agreement may be terminated by the DeKalb County Board of Health, without cause upon thirty (30) day prior written notice to the Contractor.

This agreement may be terminated by the DeKalb County Board of Health immediately with cause upon notice to the Contractor. Cause means a violation of the confidentiality requirements of this contract or the violation of any provision of this agreement which in good faith judgment of the DeKalb County Board of Health poses a threat to the safe and orderly operation of the DeKalb County Board of Health including the safety and well being of its clients or employees.

FAILURE TO PERFORM

In the event the contractor fails to comply with the terms and conditions of the contract, including requirements governing the quality of service or the schedule for performance of its duties under this agreement, the DeKalb County Board of Health may provide written notice thereof to the contractor. The notice may identify specific incidents or circumstances comprising the conditions complained of. In the event such conditions arise, the DeKalb County Board of Health reserves the right to withhold payments otherwise due under this agreement until such violation is cured.

BID SUBMISSION REQUIREMENTS

DEKALB COUNTY BOARD OF HEALTH SECURITY GUARD SERVICES

The Bidder **MUST** submit the following requirements to be included in the bidder's response to ITB No. 23-3004-RFQ02. *Any omission of these requirements may render the bidder's response invalid.*

- a. Bidder shall be duly licensed in the State of Georgia and in the county and city in which it does business.
- b. Bidder shall provide a certified copy of financial statements for the previous three (3) years.
- c. Bidder shall provide a list of at least three (3) references to include company names, contact names, business address, telephone numbers, and e-mail addresses that may be contacted regarding bidder's performance.
- d. Bidder shall provide Certificate(s) of Insurance ("COI") stating that general and comprehensive liability insurance is in effect during the period of the contract.
- e. Bidder shall provide a completed pricing sheet for each location to be secured.

DESCRIPTION OF SERVICES REQUESTED

The goal of this security program is to perform basic security duties that will add to the physical security of the property by reducing the potential for vandalism, fire, theft, and damage due to natural causes or equipment failures, as well as essential security services of access control for building occupants and visitors. To achieve the objectives of this security program, it is reasonable and necessary that certain standards of performance are established and maintained.

The Board reserves the right to change or add to the Schedule of Coverage for each facility in which the contractor provides security services.

The original contract period shall be from July 1, 2023, through June 30, 2024, to include four, one-year renewal term options. In the event the Board exercises each renewal year option, all terms and conditions, requirements and specifications of the contract shall remain the same and apply during the renewal period, pursuant to applicable option clauses of this document. Renewal contracts will run July 1st through June 30th of the following year.

SPECIFICATIONS FOR ALL LOCATIONS

MINIMUM REQUIREMENTS

PERSONNEL

The contractor agrees that, for the filling of positions having responsibilities for services rendered under this contract, applicants providing such services shall undergo a criminal record history investigation which shall include a fingerprint record check pursuant to the provisions of Section 49-2-14 of the Official Code of Georgia Annotated.

The contractor agrees to obtain the required information (which will include two proper sets of fingerprints on each applicant) and transmit said fingerprints directly to the Georgia Crime Information Center, together with the fee as required by said center, for a determination made pursuant to Section 49-2-14 of the Official Code of Georgia Annotated or any other relevant statutes or regulations.

After receiving the information from the Georgia Crime Information Center, the contractor will review any derogatory information and inform the Board of this information. The individual so identified will not be employed for the purpose of providing services under this contract.

The Board reserves the right to approve or disapprove appointment of any of the contractor's employees to provide services required by the contract. The Board also reserves the right to request replacement of any employee. Unless the situation requires immediate replacement, the Board will attempt to give the contractor a minimum of seven (7) calendar days, after notification, to replace unsatisfactory employee(s).

Bidder personnel to be assigned to the DCBOH shall meet a minimum educational level equal to a high school diploma or GED equivalent.

Bidder personnel to be assigned to the DCBOH shall have a minimum of one (1) year full-time, paid employment in the security industry.

Bidder personnel shall complete the Aggressive Behavior Management Training course offered free to security personnel by the DeKalb Community Service Board.

Bidder personnel to be assigned to the DCBOH:

- Must be able to perform the physical requirements of the position, including handling irate customers.
- Must be physically able to provide hand-to-hand defense and prolonged physical effort.
- Must have no defects that would inhibit running or climbing over prolonged periods of time.
- Must have visual acuity correctable to 20/20 in one eye and 20/30 in the other.
- Must have no more than a total of 270-decibel hearing loss for both ears at 3,000; 4,000; and 6,000 Hz.

Bidder personnel to be assigned to the DCBOH shall maintain a professional appearance and shall wear clean and pressed uniforms issued by the bidder while on duty at the DCBOH.

The contractor's supervisor will be responsible for the conduct and performance of the contractor's employees and compliance with the following rules:

- Contractor's employees appearing to be under the influence of alcohol or drugs shall not be permitted in the building;
- No loud or boisterous conduct will be permitted;
- Contractor's employees are not to use or tamper with office machines, equipment, and employee's personal property at any time; and
- Under no circumstances shall children be permitted to accompany working parents on the work site.
- Personal use of cell phones during duty hours is not permitted; however, cell phones may be used for DCBOH security business only.

Management

In the process of performing the requirements of the contract, the contractor and/or the contractor's employees may become aware of information required by law to be kept confidential. Therefore, the contractor and/or the contractor's employees must not at any time disclose, directly or indirectly, any information gained during the performance of the services required by the contract.

Bidder shall provide two-way cellular radios to all guard stations within the DCBOH, as well as to the Health Center Administrative Offices located at each center.

Bidder shall identify experienced supervising personnel to be assigned to the DCBOH who will be authorized to represent and act for the bidder in matters pertaining to the operations and activities of the DCBOH. The DCBOH shall retain the right in its sole discretion to approve or reject any supervising personnel selected by the bidder.

Bidder shall provide the DCBOH Internal Services Office, and each guard post a complete and permanent set of detailed written post instructions describing every routine duty and the maximum effort to be given to each and every individual encountered on DCBOH property. At such time of any revision to said post instructions, written documentation shall be prepared and placed in each set of post instructions by the bidder's supervisor.

Supervisor shall train guard personnel for each shift to ensure continuity, knowledge, and understanding of responsibilities and quality of service required.

Supervisor shall train guard personnel for each shift in the handling of special situations that might be encountered.

Supervisor shall ensure that guard personnel are knowledgeable and competent in the operation and the location of any required security system and/or equipment.

Bidder shall provide manpower for the required coverage in all situations. Absences of assigned personnel to the DCBOH are the responsibility of the bidder and require immediate coverage and notification to the Internal Services Department office of such change. Coverage shall be provided within three (3) hours of notice of an absence.

Bidder shall schedule at their own expense, Aggressive Behavior Management Training for its employees assigned to the DCBOH within the first six (6) weeks of service. This training course deals with the management and control of aggressive clients and visitors and is provided free to all guards assigned permanently to the DCBOH.

Bidder shall provide the DCBOH with a list and description of training completed by all bidder personnel to be assigned to the DCBOH.

Bidder shall perform unannounced security service inspections at each center, no less than one (1) time each week. Bidder shall provide the DCBOH with a copy of the assigned supervisor's findings resulting from each unannounced inspection at a weekly meeting with the Internal Services Office.

FINANCIAL

Bidder shall maintain a documented system of recording each personnel shift and time worked. This documentation must be provided as an attachment to the monthly invoice for services rendered to the DCBOH.

Bidder shall pay any and all salaries, federal, and state taxes, and other benefits of which bidder is required or offers to its employees.

Bidder shall provide the DCBOH with written description of wages and rank of each personnel assigned to the DCBOH.

Bidder shall provide the DCBOH with written procedures for overtime pay. At no time will the DCBOH pay any overtime rate without prior approval and written authorization by the Internal Services Manager.

BASIC SECURITY DUTIES

Security personnel should add to the physical security of the property by reducing the potential for vandalism, fire, theft, damage due to natural causes or equipment failures, and after-hours access control for building occupants. The primary functions are as follows:

- **Monitor property:** patrol parking lots, make regular rounds through the building, observe building occupants, provide reports to the DCBOH of any unusual events.
- **Control entry to building:** greet guests entering the building; enforce sign-in when applicable.
- **Concierge:** assist guests in locating correct offices or clinics while ensuring access control to restricted areas.
- **Open/close building(s):** operate security systems and locks to disable/enable access doors in conjunction with hours of operations. Secure access doors to the public at designated time for close of business. If necessary, ensure that the security system is activated and all alarms are enabled upon vacating the building at the end of each nightly shift.
- **Emergency action:** participate with the DCBOH Emergency Action Team by assisting guests in exiting the building or moving to designated shelter areas in the event of a drill or actual emergency situation. Notify 911 Emergency Services if requested to do so in an emergency situation.

- **Enforce DCBOH policies, to include but not limited to:** no soliciting in building(s), no smoking in building(s), smoking in designated areas only.
- **Incidents:** report any unusual incident to the Internal Services Department. Submit a written report of all unusual incidents at the conclusion of each tour.
- **Hazardous conditions:** Report any hazardous conditions immediately to the Facilities Management Office.
- **Deliveries:** at no time shall a guard sign for any deliveries, unless authorized to do so by the Office of Internal Services.

KEY CONTROL

Key control includes maintaining tight control over all keys entrusted to the contractor. Keys issued to the contractor are the property of the DeKalb County Board of Health. The contractor shall sign for and be responsible for all required keys. If an employee of the contractor misplaces the keys, all costs associated with replacing or retrofitting will be borne by the contractor. Keys will not be duplicated or removed from the building without permission from the proper BOH authority. Security guard staff should not lend or borrow keys from BOH staff or cleaning contractors. If additional keys are needed, the contractor should verify the need before placing a request to the BOH Facilities Management Office.

At the expiration/cancellation of the contract, the contractor must surrender all the keys originally issued to the contractor by the BOH contact person. Any payments due the contractor shall be withheld until the contractor has surrendered all keys issued. In the event that all keys are not returned, the contractor shall pay the Board for the actual costs incurred for the replacement of all locks and keys.

UNIFORMS

The contractor shall supply and pay for distinctive, clean, and neat-looking uniforms for his/her employees to wear while working on Board of Health premises. Uniforms, including color and design, must have prior approval by the Internal Services Office.

PAYMENT

The contractor shall forward one (1) monthly invoice to the Board, listing each facility, hours worked and the fixed, firm price for each facility. After the Board receives and approves the invoice and services provided during the month, the Board shall forward the invoice for payment. The contractor shall be paid the firm, fixed price per month as specified on the pricing page within this ITB.

Contractor shall attach to the monthly invoice, original time sheets for each facility.

BIDDER QUALIFICATION QUESTIONNAIRE

1. What year was your company incorporated?
2. Is your company publicly held?
3. By category, what is the number of full-time employees that staff your local office? List and define each category.

NOTE* **Enclose work resumes of your proposed key personnel.**

4. What is the average length of service your full-time managers have within the industry?
5. What is the length of service your full-time managers have with your company?
6. Describe in detail what training you currently provide in-house or under contract for your employees.
7. Does your company have 24-hour emergency services?
8. Specify the type of uniform to be used, include color photo of the uniform.
9. Describe in detail your company's greatest strength.

BIDDER INFORMATION

Bidder is (check appropriate space) _____ individual
_____ partnership or joint venture
_____ corporation organized under the laws of the State of _____
_____ LLC under the laws of the State of _____

Bidder's FEIN or SSI # _____

Business Classification: (check appropriate space) _____ African American
_____ Asian American
_____ Native American
_____ Pacific Islander
_____ Hispanic/Latino
_____ Non-Minority

Is your company registered to conduct business in the State of Georgia? _____ Yes _____ No

Company Name: _____

Company Physical Address: _____

Company Remit Address: _____

Authorized Signature: _____

STATEMENT OF RESPONSIBILITY CERTIFICATION FORM

INSTRUCTIONS:

THIS FORM MUST BE COMPLETED, SIGNED, NOTARIZED AND SUBMITTED WITH YOUR BID/PROPOSAL.

Please complete this form, answering every question. *A "Yes" answer to any of the subparts of Question No. 3 requires a written explanation attached to the completed form, submitted on your company letterhead and signed by an authorized representative of the company. A "Yes" answer to any of the subparts of Question No. 3 will not necessarily result in denial of award but will be considered in determining Offeror responsibility in the event DeKalb County Board of Health undertakes an investigation into Offeror's responsibility status.* For any explanation, indicate to whom it applies; identify the initiating agency and the dates of action.

Offerors are responsible for updating any information submitted in their Statement of Responsibility Certification Form if a change occurs prior to the award of the contract.

QUESTIONS:

1. Does Offeror certify that it has, or can obtain, adequate financial resources to perform the Services and Deliverables identified in the Agreement? This includes, but is not limited to, the ability to obtain required bonds and insurance from sureties and insurance companies authorized to do business in Georgia.
_____YES _____NO
2. Does Offeror certify that it is able to comply with all contractual requirements and fulfill all of its contractual obligations, considering Offeror's other business obligations?
_____YES _____NO
3. Within the past three (3) years, has Offeror's company, or any principal of Offeror (e.g., any owner, partner, officer, or major stockholder with 10% or more shares) been the subject of any of the following:
 - (a) a judgment or conviction for any conduct constituting a felony under local, state or federal law, including, but not limited to, fraud, extortion, bribery, racketeering, labor, anti-trust, price-fixing, or bid collusion?
_____YES _____NO
 - (b) a criminal investigation or indictment for any conduct constituting a felony under local, state or federal law, including, but not limited to, fraud, extortion, bribery, racketeering, price-fixing, or bid collusion (to the best of Offeror's knowledge*)?
_____YES _____NO
 - (c) an unsatisfied judgment, injunction or lien obtained by a Georgia state government agency including, but not limited to, judgments based on taxes owed and fines and penalties assessed by any Georgia state government agency?
_____YES _____NO
 - (d) an investigation for a civil violation by any local, state or federal agency (to the best of Offeror's knowledge*)?
_____YES _____NO
 - (e) a suspension, debarment or termination for cause from any local, state or federal government procurement process?
_____YES _____NO
 - (f) a suspension or termination for cause prior to the completion of the term of any local, state or federal government contract?
_____YES _____NO
 - (g) a denial of award for non-responsibility determination made by any local, state or federal government?
_____YES _____NO

- (h) an agreement to a voluntary exclusion from bidding/contracting on any local, state or federal procurement? _____YES _____NO
- (i) an administrative proceeding or civil action seeking specific performance or restitution in connection with any local, state or federal procurement (to the best of Offeror's knowledge*)? _____YES _____NO
- (j) any bankruptcy proceedings? _____YES _____NO

CERTIFICATION:

The undersigned: (I) recognizes that this questionnaire is submitted for the express purpose of assisting the DeKalb County Board of Health (DCBOH) and the State of Georgia, its agencies and political subdivisions to make a determination regarding the eligibility for award of a contract, or to approve a subcontract; (II) acknowledges that the DCBOH, the State of Georgia, its agencies and political subdivisions may, in their sole discretion, by means which they may choose, verify the truth and accuracy of all statements made herein; (III) acknowledges that submissions of false or misleading information may constitute fraud, may result in ineligibility for contract award, may be used as grounds for termination for default of any contract awarded in relation to this certification, may be considered by the DCBOH, the State of Georgia, its agencies and political subdivisions in making responsibility determinations in other procurements, and may subject the Offeror or its representatives to criminal liability; (IV) as the authorized representative of the Offeror, states that the information submitted on this certification form and any attached pages is true, accurate and complete.

The undersigned hereby attests that he/she is duly authorized by the Offeror to make the statements and representations contained herein and/or attached hereto, on behalf of such Offeror.

Legal Name of Offeror Company

Signature of Offeror's Authorized Representative

Address

Printed Name of Offeror's Authorized Representative

City, State, Zip

Title

State of _____ County of _____

Sworn to and subscribed before me on this _____ day of _____ 200____.

Notary Public

My Commission Expires: _____

Note: *As used herein, the term "to the best of Offeror's knowledge" shall refer to the current actual knowledge of Offeror and shall be construed, by imputation or otherwise, to refer to the knowledge of any agent, manager, representative or employee of Offeror but does not impose upon Offeror any duty of inquiry or investigation of the matter to which such actual knowledge, or the absence thereof, pertains. The fact that Offerors (or their principals) are under investigation will not necessarily result in a determination of non-responsibility; rather, DCBOH will determine if the information and circumstances regarding such investigation are of such a nature or magnitude as to cause the DCBOH to deem the bidder non-responsible in order to protect the interests of the DCBOH and/or the State.

REFERENCE SHEET

In the space provided below, please list a minimum of three (3) references giving the name, address, phone and contact person of companies, organizations, or agencies for whom you have provided services like those requested in the ITB.

Name of Company:

Address:

Phone Number:

E-mail Address:

Contact Name:

Name of Company:

Address:

Phone Number:

E-mail Address:

Contact:

Name of Company:

Address:

Phone Number:

E-mail Address:

Contact:

PRICING SHEET

Please list the hourly bill rate, the total weekly charge and the holiday/overtime rate for each location and their assigned schedule of coverage listed below.

SCHEDULE OF COVERAGE – Should be scheduled such that no overtime hours are required.

Location: Richardson Health Center

Two (2) Guards Coverage and a Rover		Hours	Total Hours
Monday through Friday	7:00 a.m.- 7:00 p.m.	12	120

Location: T.O. Vinson Health Center

Two (2) Guard Coverage required between the hours of 8:00 a.m. and 5:00 p.m.		Hours	Total Hours
Monday through Friday	7:00 a.m.-7:00 p.m.	12	120

Location: Clifton Springs Health Center

Two (2) Guards - Coverage required between the hours of 8:00 a.m. and 5:00 p.m.		Hours	Total Hours
Monday through Friday	7:00 a.m.-7:00 p.m.	12	120

Location: East DeKalb Health Center

One (1) Guard Coverage		Hours	Total Hours
Monday through Friday	7:00 a.m.-7:00 p.m.	12	60

Location: North DeKalb Health Center

Two (2) Guard Coverage		Hours	Total Hours
Monday through Friday	7:00 a.m.-7:00 p.m.	12	120

Location: Tucker WIC

One (1) Guard Coverage		Hours	Total Hours
Monday through Friday	7:00 a.m.-7:00 p.m.	12	60.0

SPECIAL COVERAGE – Charged at the overtime rate.

Schedule of Coverage (E. L. Richardson)		Number of Guards	Hours
Wednesday (Ryan White Clinic)	6:00 a.m.- 7:00 a.m.	1	1
Saturday- twice/month (Ryan White Clinic)	8:00 a.m. – 12:30 p.m.	1	4.5
Schedule of Coverage (T.O. Vinson)			
Tuesday, Wednesday (Physician Care Clinic)	5:00 p.m.-9:00 p.m.	1	4
Thursday (late clinic)	5:00 p.m.-7:30 p.m.	1	2.5
Schedule of Coverage (Clifton Springs)			
Tuesday (late clinic)	5:00 p.m.-7:30 p.m.	1	2.5
Schedule of Coverage (East DeKalb)			
Tuesday (late clinic)	5:00 p.m.-7:30 p.m.	1	2.5

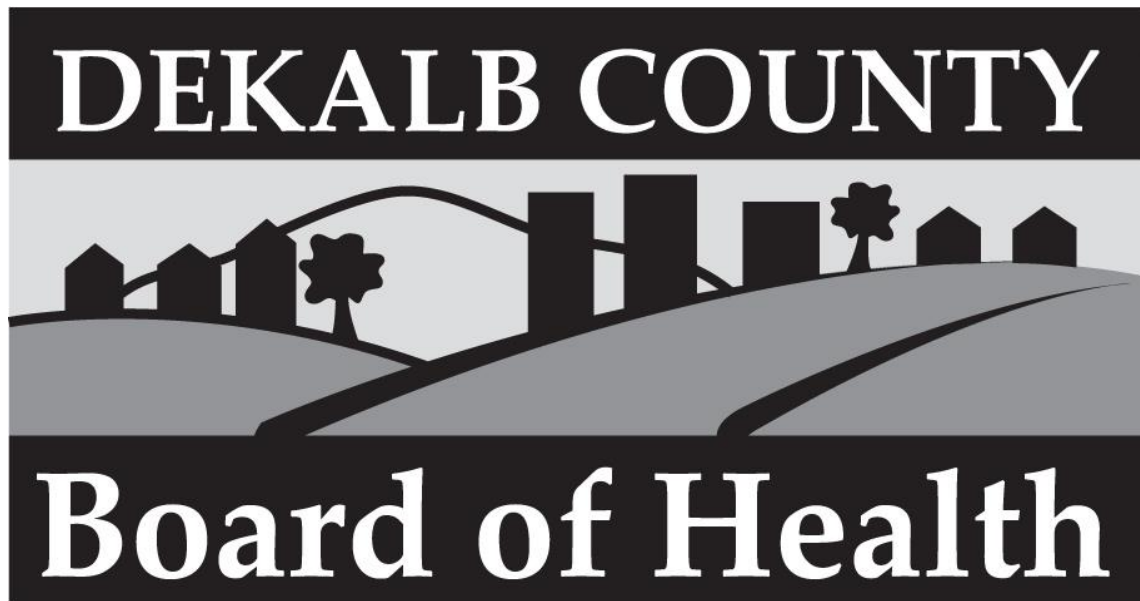
TOTAL COST PER MONTHLY SERVICE, PROPOSED: DAILY SCHEDULE: \$ _____

TOTAL COST PER MONTHLY SERVICE, PROPOSED: SPECIAL COVERAGE: \$ _____

Name, address and phone numbers for the person designated as the contact person for discussions/meetings between the bidder and the Board.

Name	_____
Address	_____

Phone/Fax	_____



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