

# BID RESPONSE PACKET UAPB P182

### MAINTENANCE AND REPAIR SERVICES FOR STATE VEHICLES

#### **BID SIGNATURE PAGE**

Type or Print the following information. PROSPECTIVE CONTRACTOR'S INFORMATION Company: Address: City: State: Zip Code: ☐ Individual ☐ Sole Proprietorship ☐ Public Service Corp Business Designation: ☐ Partnership ☐ Corporation ☐ Nonprofit ☐ Service-Disabled Veteran Minority and ☐ American Indian ☐ Not Applicable ☐ Asian American ☐ African American ☐ Hispanic American Women-Owned ☐ Pacific Islander American ☐ Women-Owned Designation\*: AR Certification #: \* See Minority and Women-Owned Business Policy PROSPECTIVE CONTRACTOR CONTACT INFORMATION Provide contact information to be used for bid solicitation related matters. Contact Person: Title: Alternate Phone: Phone: Email: **CONFIRMATION OF REDACTED COPY** ☐ YES, a redacted copy of the submission documents is enclosed. ☐ NO, a redacted copy of submission documents is not enclosed. I understand a full copy of non-redacted submission documents will be released if requested. Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information. **ILLEGAL IMMIGRANT CONFIRMATION** By signing and submitting a response to this Bid Solicitation, a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract. ISRAEL BOYCOTT RESTRICTION CONFIRMATION By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract. ☐ Prospective Contractor does not and will not boycott Israel. An official authorized to bind the Prospective Contractor to a resultant contract must sign below. The signature below signifies agreement that any exception that conflicts with a Requirement of this Bid Solicitation will cause the Prospective Contractor's bid to be rejected: Authorized Signature: Use Ink Only. Printed/Typed Name: Date:

#### **VENDOR REFERENCES**

Please list below at **least two (2) references** where delivery has been made of the type of merchandise you are proposing:

	(1)		(2)	
Company Name:		ne:	Company Name:	
Phone No;			Phone No:	
Addre	ss:		Address:	
City &	State		City & State	
Conta	ct Perso	n:	Contact Person:	
financ	ial resou		n shall, upon request, promptly furnish satisfactory evidence of his the organization and merchandise he has available to meet this re	
Α.	minimi When model literatu	um dimensions and capabili a brand and/or model is des the other than designated <u>b</u> ure provided; and, if request	to establish a minimum desired quality or performance level, or ot ties, which will provide the best product available at the best price signated, and a bidder offers other than the designated brand and or and or model, must be listed; specifications and descriptive ed, a sample made available for testing. Other than designated	
		s and/or models approved deration.	as equal to designated products shall receive equal	
B.	when reques	deration.  proofs of compliance for ma	aterials and equipment are called for in the technical specifications ansas at Pine Bluff, such proofs of compliance shall be furnished	
B.	when reques	deration.  proofs of compliance for masted by the University of Ark	aterials and equipment are called for in the technical specifications ansas at Pine Bluff, such proofs of compliance shall be furnished from the manufacturer	
В.	When request vendors (1) (2) (3) (4)	proofs of compliance for masted by the University of Ark by supplying the following:  Certificates of compliance Mill Certificates  Testing laboratory certificates	aterials and equipment are called for in the technical specifications ansas at Pine Bluff, such proofs of compliance shall be furnished from the manufacturer ates y test	
B. C.	When request vendor (1) (2) (3) (4) SUBS Bidder specific with y	proofs of compliance for masted by the University of Ark by supplying the following:  Certificates of compliance Mill Certificates Testing laboratory certificates Report of actual laboratory  TITUTE/ALTERNATE PROFITS are advised that they may fications as herein listed a cour bid response. If the bid steed a cour bid response.	aterials and equipment are called for in the technical specifications ansas at Pine Bluff, such proofs of compliance shall be furnished from the manufacturer ates y test	bythe

#### **UAPB SPECIFICATIONS IFB # UAPB P182**

Please duplicate the enclosed label and affix it to the outside of your sealed submittal envelope/package or cut along the outer border and affix this label to the outside of the submittal envelope/package to identify it as a "Sealed Bid/Proposal". Be sure to include the name of the company submitting the response where requested.

i İ	SEALED BID/PROPOSAL * DO NOT OPEN
	TATION FOR DID. MAINTENANCE AND DEDAID
I IIILE <u>: INVI</u> I	TATION FOR BID- MAINTENANCE AND REPAIR
   Bid Number:	UAPB IFB# UAPB P182
Bid Open:	Wednesday, February 21, 2024 @ 11:00 A.M.
<u> </u>	Submitted By
Company Name:	
Telephone:	
1	Contact and Delivery Information Contact
	colep@uapb.edu
	870.575.8736
	Purchasing Department Room 102
i	1200 N. University Drive
1	Pine Bluff, AR 71601
1	
1	
i	

ITEM	DESCRIPTION	UNIT OF MEASURE	Per Labor Hour	Parts	EXTENDED AMOUNT
	Brake Pads/brake rotors	YEAR			
1.					
	Brake Replacement	YEAR			
2					
2. 3.	Brake Replacement per axle	YEAR			
	Engine Oil Change and filters	YEAR			
4. 5.	Electrical Repair Unknown power drain on batteries	YEAR			
6.	General Inspection	YEAR			
7.	A/C Filters	YEAR			
8.	Transmission Fluid and Filters	YEAR			
9.	Parts Replacement + Parts	YEAR			
10.	Annual Checkups	YEAR			
11.	Software Inspection & Repair	YEAR			
12.	Heating & A/C Repair	YEAR			
13.	Proper Equipment to check Freon Levels & injecting Freon as needed.	YEAR			
14.	Wheel Alignment	YEAR			
15.	Air Bags inspection & replacement	YEAR			
16.	Alternator: Removal & replace	YEAR			
17.	Starter: Removal & replace	YEAR			
18.	Thermostat with or without housing: Removal & Replace	YEAR			
19.	Water pump: Removal & Replace	YEAR			
20.	Fuel pump: Removal & Replace	YEAR			
21.	AC Compressor: Removal & replace	YEAR			
22.	Expansion Valve: Removal & replace	YEAR			
23.	Filter Drier: Removal & replace	YEAR			
24.	Head light bulbs: Removal & Replace	YEAR			
25.	Taillight bulbs: Removal & Replace	YEAR			
26.	Entry Door Handles: Removal & replace	YEAR			
27.	Catalytic Converter: Removal & replace	YEAR			
28.	Steering Box: Removal 7 Replace	YEAR			
29.	Warranty Period				

GRAND TOTAL	<b>C</b>
GRAND IOTAL	. D

Note: Contractor will be fully responsible for arranging inside delivery of this merchandise into UAPB's Warehouse or otherwise designated location.

NOTE: ALL COST FOR WHICH THE UNIVERSITY WILL BE BILLED MUST BE INCLUDED IN YOUR BID PRICE (Commodity, freight, handling, and other transportation). DO NOT INCLUDE TAXES (state or local) if you are an

Arkansas vendor. You must add it to your invoice if you are the successful Contractor. For your information, our current tax rate is 10.00%. If you are an out-of-state vendor, you may do the same or we will calculate it in our USE TAX report.

# UNIVERSITY OF ARKANSAS AT PINE BLUFF SPECIFICATION SHEET

Mandatory Requirement for: Maintenance and Repair Service for State Vehicles

What is the name of the brand you are bidding	_?
(Whether bidding as specified or an alternate, you must complete the check list below.)	
Failure to respond to each item below will cause for bid rejection. If your specifications are less	;
than, you must explain the specifications in the comment section.	

Please Note: The brand name is listed as a specification, not a statement of preference. Alternate brands meeting these specifications shall be considered as an equal if accompanied by a brochure indicating specification and performance requirements.

Specifications:	Equal To	Less Than	Exceeds	Comments
Brake Pads/brake rotors				
Brake Replacement				
Brake Replacement per axle				
Engine Oil Change and filters				
Electrical Repair Unknown power drain on batteries				
General Inspection				
A/C Filters				
Transmission Fluid and Filters				
Parts Replacement + Parts				
Annual Checkups				
Software Inspection & Repair				
Heating & A/C Repair				
Proper Equipment to check Freon Levels & injecting Freon as needed.				
Wheel Alignment				
Air Bags inspection & replacement				
Alternator: Removal & replace				
Starter: Removal & replace				
Thermostat with or without housing: Removal & Replace				
Water pump: Removal & Replace				
Fuel pump: Removal & Replace				
AC Compressor: Removal & replace				
Expansion Valve: Removal & replace				
Filter Drier: Removal & replace				

Head light bulbs: Removal & Replace		
Taillight bulbs: Removal & Replace		
Entry Door Handles: Removal & replace		
Catalytic Converter: Removal & replace		
Steering Box: Removal 7 Replace		
Warranty period		
Deliver To: UAPB Warehouse 1200 North University Drive Hazzard Gym/Annex Building Pine Bluff, Arkansas 71601		

### Form **W-9**(Rev. October 2018)

(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

### Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line bla	nk.		
	2 Business name/disregarded entity name, if different from above	g =		
Print or type. See Specific Instructions on page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. following seven boxes.  Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any)		
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Part	Example payor road (if any)		
Print or type. fic Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, as is disregarded from the owner should check the appropriate box for the tax classification of its o	ne owner of the LLC is single-member LLC that	Exemption from FATCA reporting code (if any)	
Ċ.	Other (see instructions) ▶		(Applies to accounts maintained outside the U.S.)	
Spe	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name a	and address (optional)	
9				
S	6 City, state, and ZIP code			
	7 List account number(s) here (optional)			
	<u> </u>			
Par	Taxpayer Identification Number (TIN)			
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to	uvoid	curity number	
	p withholding. For individuals, this is generally your social security number (SSN). Howeve			
	nt alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For othe s, it is your employer identification number (EIN). If you do not have a number, see <i>How to</i>		-     -	
TIN, la	있다면 있는데 하는데 이번에 되는데 있다면 하는데 전에 하는데 보고 있다면 하는데 보다면 되었다면 하는데 보다면 보다면 되었다면 하는데 보다면 되었다면 하는데 보다면 되었다면 하는데 보다면 하는데 보다면 되었다면 하는데 보다면 되었다면 하는데 보다면 되었다면 되었다면 되었다면 되었다면 되었다면 되었다면 되었다면 되었	or		
Note:	If the account is in more than one name, see the instructions for line 1. Also see What Nam	ne and Employer	identification number	
Numb	er To Give the Requester for guidelines on whose number to enter.			
			-	
Par	II Certification			
The section of a property of	penalties of perjury, I certify that:			
	number shown on this form is my correct taxpayer identification number (or I am waiting f	ar a aumhar ta ha ias	wed to make and	
2. I an Ser	not subject to backup withholding because: (a) I am exempt from backup withholding, or vice (IRS) that I am subject to backup withholding as a result of a failure to report all interesting to backup withholding; and	(b) I have not been n	otified by the Internal Revenue	
3. I an	a U.S. citizen or other U.S. person (defined below); and			
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA report	rting is correct.		
	cation instructions. You must cross out item 2 above if you have been notified by the IRS that we failed to report all interest and dividends on your tax return. For real estate transactions, iter			
acquis	ition or abandonment of secured property, cancellation of debt, contributions to an individual rehamments and dividends, you are not required to sign the certification, but you must provide the certification.	etirement arrangement	t (IRA), and generally, payments	
Sign Here	Signature of U.S. person ▶	Date ►		
Ger	neral Instructions  • Form 1099-DIV funds)	(dividends, including	those from stocks or mutual	

Section references are to the Internal Revenue Code unless otherwise noted

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
   Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

#### RESTRICTION OF BOYCOTT OF ISRAEL CERTIFICATION

Pursuant to Arkansas Code Annotated § 25-1-503, a public entity shall not enter into a contract valued at \$1,000 or greater with a company unless the contract includes a written certification that the person or company is not currently engaged in and agrees for the duration of the contract not to engage in, a boycott of Israel.

By signing below, the Contractor agrees and certifies that they do not currently boycott Israel and will not boycott Israel during any time in which they are entering into, or while in contract, with any public entity as defined in § 25-1-503\* If at any time after signing this certification the contractor decides to engage in a boycott of Israel, the contractor must notify the contracting public entity in writing.

If a company does boycott Israel, see Arkansas Code Annotated § 25-1-503.

Name of public entity	The University of Arkansas at Pine Bluff Arkansas		
AAGIG Varida Alamba			
AASIS Vendor Number	Not Applicable		
Contractor/Vendor name			
Contractor Signature:	Date:		
Signature must be handwritten, in i	nk.		

"Public Entity" means the State of Arkansas, or a political subdivision of the state, including all boards, commissions, agencies, institutions, authorities, and bodies politic and corporate of the state, created by or in accordance with state law or regulations, and does include colleges, universities, a statewide public employee retirement system, and institutions in Arkansas as well as units of local and municipal government.

## ILLEGAL IMMIGRANT CERTIFICATION REQUIRED PRIOR TO AWARD PROHIBITION AGAINST CONTRACTING WITH ILLEGAL IMMIGRANTS – Acts 157 of 2007.

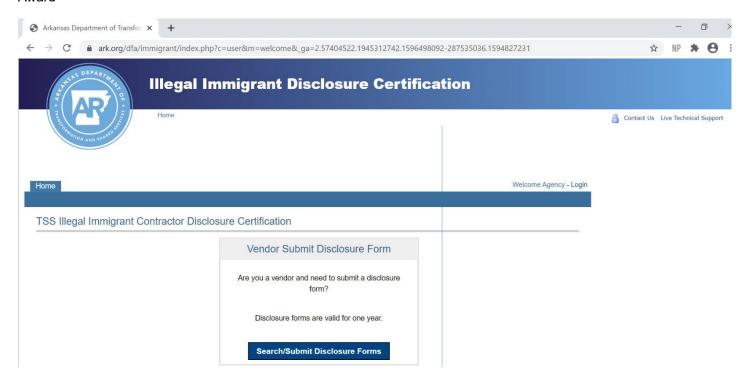
**Regarding those contracts over \$25,000.00** – No state agency may enter into or renew a public contract with a contractor who knows that the contractor or a subcontractor employs or contracts with an illegal immigrant to perform work under the contract. Certification Required by Contractor prior to award of contract.

It is the requirement of the Office of State Procurement that prior to an award the contractor must certify on the Office of State Procurement's web site which is

https://www.ark.org/dfa/immigrant/index.php?c=user&m=welcome&\_ga=2.57404522.1945312742.1596498092-287535036.1594827231 that his company does not employee nor will employee illegal immigrants for this project or service. (MUST BE DONE WITHIN FIVE (5) DAYS OF INTENT TO AWARD NOTICE)

### Instructions:

Click the Search/Submit Disclosure Forms. Complete the questions to become certified. Once done you must print a copy of the certificate to submit with your bid proposal. Certificate must be submitted prior to Purchase Order issue or Contract Award



Instructions conti...

You are to click on the section that says

Vendor Illegal Immigrant Contracting Disclosure Reporting Screen.

The next **screen** you will see says

DFA ILLEGAL IMMIGRANT CONTRACTOR DISCLOSURE CERTIFICATION LOGIN (click on the right side to open the box that reads: "Submit Disclosure Form".

### **DFA Illegal Immigrant Contractor Disclosure Certification Login**

Agency Login Vendor S	ubmit Disclosure Form
Username: Password:	Are you a vendor and need to submit a disclosure form? <u>Submit Disclosure Form</u>
Loain	Forget your password? <u>Click here</u>
Instructions conti	
The opened screen will LOOK LII Answer the questions and "Subn	
Navigation : <u>Home</u> >> Certification Help	
Note: *Required fields are mark	ked with an asterisk.
*Vendor Name:	
*Contract Type:	Construction
Bid Number:	
*Disclosure Statement:	I do not employ or contract with any illegal immigrant(s).
*E-mail Address:	
*Select Agency:	▼
	Submit

THE AGENCY LOGIN BOX IS FOR UAPB – We are required to check this web site to make sure you have certified prior to Purchase Order issue or Contract Award.