UNIVERSITY of ARKANSAS AT PINE BLUFF
1873

IFB RESPONSE PACKET

Bid No. UAPB A121

Laboratory Equipment for Microwave Photonics Program

DUE TO EXECUTIVE ORDER EO 20-03 ARK. CODE ANN. § 12-75-114/CORONAVIRUS (COVID-19)
BIDS MUST BE SUBMITTED ELECTRONICALLY

BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION						
Company:						
Address:						
City:		State:		Zip Code:		
Business Designation*:*	☐ Individual ☐ Partnership	☐ Sole Proprietorship ☐ Corporation		☐ Public Service Corp ☐ Nonprofit		
Minority and Women-Owned Designation**:*	☐ Not Applicable ☐ African American	☐ American Indian ☐ Hispanic American	☐ Asian American ☐ Pacific Islander American	☐ Service Disabled Veteran ☐ Women-Owned		
	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:	
Phone:		Alternate Phone:	
Email:			

CONFIRMATION OF REDACTED COPY

☐ YES, a redacted copy of submission documents is enclosed.

☐ NO, a redacted copy of submission documents is <u>not</u> 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: _____ **Title:** _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

PROPOSED SUBCONTRACTORS FORM

- ***Do not*** *include additional information relating to subcontractors on this form or as an attachment to this form.*

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

☐**PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

UNIVERSITY OF ARKANSAS AT PINE BLUFF
SPECIFICATION SHEET

Mandatory Requirement for: <u>Laboratory Equipment for Microwave Photonics Program</u>

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 be 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 with a brochure indicating specification and performance requirements.

Specifications:	**Equal To**	**Less Than**	**Exceeds**	**Comments**
1. InSb Mid-Wave Infrared Camera System 640x512 Snapshot 1 Output Digital InSb Focal Plane Array with <1.0µm to 5.3 µm				
2. CW IR Turnable Laser				
3. Optical Spectrum Analyzer				
4. Rack Mount Kit				
5. Bit Error Rate Test WAVE, Evaluating optical modules and devices for 100 Gbit/s and faster networks				
6. One Channel Bit Error Rate Test, Bandwidth 35 GHz for Single Mode Fiber, 25 GHz Multi Mode fiber and Electrical: 40 GHz				
7. Bit rate extension that adds 10G band				
8. Two Channel Electrical Scope				
9. Upgrade Vector Network Analyzer from existing 40 GHz to 70 GHz, 2.5 ns pulse resolution and 100 dB dynamic range, broadest coverage in single instrument, 70 kHz to 70 GHz				
10. Fixed Price Standard for Calibration				
Deliver To: UAPB Warehouse Hazzard Gym/Annex Building 1200 N. University Drive Pine Bluff, Arkansas 71601				

OFFICIAL BID PRICE SHEET

ITEM	DESCRIPTION	QTY	UNIT OF MEASURE	UNIT PRICE	EXTENDED AMOUNT
Example	*Vacuum Cleaner*	*2*	*each*		
1.	InSb Mid-wave Infrared Camera System 640x512 Snapshot 1 Output Digital InSb Focal Plane Array with <1.0 µm to 5.3 µm	1	each		
2.	CW IR Turnable Laser	1	each		
3.	Optical Spectrum Analyzer	1	each		
4.	Rack Mount Kit	1	each		
5.	Bit Error Rate Test WAVE, Evaluating optical modules and devices for 100 Gbit/s and faster networks	1	each		
6.	One Channel Bit Error Rate Test, Bandwidth 35 GHz for Single Mode Fiber, 25 GHz Multi Mode fiber and Electrical: 40 GHz	1	each		
7.	Bit rate extension that adds 10G band	1	each		
8.	Two Channel Electrical Scope	1	each		
9.	Upgrade Vector Network Analyzer from existing 40 GHz to 70 GHz, 2.5 ns pulse resolution and 100 dB dynamic range, broadest coverage in single instrument, 70 kHz to 70 GHz	1	each		
10	Fixed Price Standard for Calibration	1	each		

GRAND TOTAL $ _____

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.

AUTHORIZED SIGNATURE REPRESENTING BIDDING COMPANY

Signature: _____

Name: _____

Title: _____

Company: _____

Address: _____

____
City State Zip

Office Telephone: (_____)_____

Cell Phone: (_____)_____

Fax: (_____)_____

Email: _____

Date: _____

ADDENDA:

I/We do hereby acknowledge receipt of the following **addendum or addenda (if any):**

No. _____ **Dated**_____

No. _____ **Dated** _____

No. _____ **Dated** _____

No. _____ **Dated** _____

No. _____ **Dated** _____

_____ _____

Signature of Person Authorized to bind your company Date

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**
AASIS Vendor Number	**Not Applicable**
Contractor/Vendor name	

Contractor Signature: _____ Date: _____
Signature must be hand written, in ink

"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.

08102018

Form **W-9**
(Rev. December 2000)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer
IDENTIFICATION NUMBER AND CERTIFICATION

Give form to the requester. Do NOT send to the IRS.

Please print or type

Name (See **Specific Instructions** on page 2.)

Business name, if different from above. (See **Specific Instructions** on page 2.)

Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Other =

Address (number, street, and apt. or suite no.)

City, state and ZIP code

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). **However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 2.** For other entities, *it is your* employer identification number (EIN). If you do not have a number, see **How To Get a TIN** on page 2.

Note: *If the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter*

Social security number

OR

Employer identification number

Part II For Payees Exempt From Withholding (See the instructions on page 2.)

▶

Part III Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
2. I am not subject to backup withholding because: **(a)** I am exempt from backup withholding, or **(b)** I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or **(c)** the IRS has notified me that I am no longer subject to backup withholding, **and**
3. I am a U.S. person (including a U.S. resident alien).

Certification Instructions. - You must cross out item **2** above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item **2** does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 2.)

Sign Here	**Signature of U.S. person ▶**	**Date**	**Date ▶**

Purpose of Form. -A person who is required to file an information return with the IRS must get your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if your are a U.S. person (including a resident alien), to give your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are an exempt payee.

If you are a foreign person, use the appropriate Form W-8. See **Pub.** 515, Withholding of Tax on Nonresident Aliens and Foreign Corporations.

Note: ***If*** *a requester gives you a form other than a W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.*

What Is Backup Withholding? - Persons making certain payments to you must withhold and pay to the IRS 31% of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. **Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester, or

2. You do not certify your TIN when required (see the Part III instructions on page 2 for details), or

3. The IRS tells the requester that you furnished an incorrect TIN, or

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part II instructions and the separate **Instructions for the Requester of Form W-9.**

Penalties

Failure To Furnish TIN. -If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil Penalty for False Information With Respect to Withholding. -If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal Penalty for Falsifying Information. - Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

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.

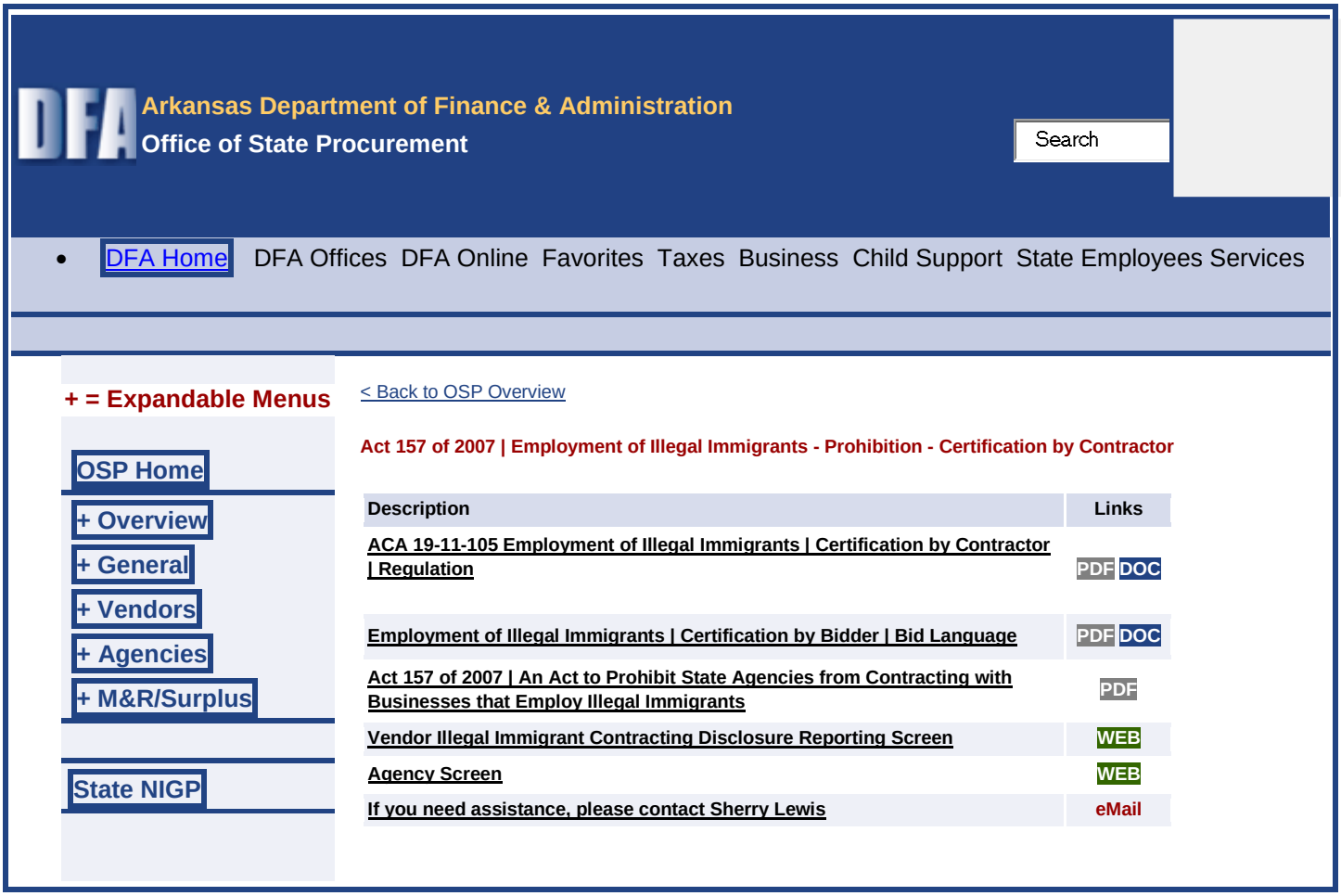
It is the requirement of the Office of State Procurement that prior to an award the contractor must certify on the Office of State Procurement's web site which is www.arkansas.gov//dfa/procurement that his company does not employee nor will employee illegal immigrants for this project or service. (MUST BE DONE WITHIN FIVE (5) DAYS OF NOTICE)

Instructions:

When the DFA page opens you will see
DFA Ark Dept of Finance & Adm

(1) On the left Click on Procurement
(2) On the right click on Illegal Immigrant Reporting
(3) Under Vendor Submit Disclosure Form
-Click on Submit Disclosure Form
(4) Complete Form
(5) Submit

DFA | Office of State Procurement | Illegal Immigrant Certification



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 Submit Disclosure Form

Username:

Password:

Login

Are you a vendor and need to submit a disclosure form?

Submit Disclosure Form

Forget your password? Click here

Instructions conti. . .

The opened screen will LOOK LIKE THIS:
Answer the questions and "*Submit*".

DFA Illegal Immigrant Contractor Disclosure Certification Form

Navigation : Home >> Certification Form

Help

Note: *Required fields are marked 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.