



PURCHASING DEPARTMENT

2150 Keith Bridge Rd
Cumming, GA 30040
Phone: 770-781-6603 / Fax: 770-888-0222
www.forsyth.k12.ga.us

RFP P24-06

Electrical Services

March 13, 2024

To: All Proposers

The Forsyth County School System’s Purchasing Department would like you to supply us with a Proposal for Electrical Services. Pricing shall remain firm for one year after award. The Forsyth County School System is tax exempt.

The RFP Closing is: **# P24-06** **April 24, 2024** **3:00 PM**
(RFP #) (DATE) (TIME)

Responses to this Request for Proposal must be in a sealed envelope and must be marked with your company name, and RFP number. Please allow ample time for delivery. Proposals received late will not be considered. For mailing purposes, please address to:

FORSYTH COUNTY SCHOOL SYSTEM
Brad Richardson, Director of Procurement Services
RFP # P24-06
2150 Keith Bridge Rd
Cumming, GA 30040

RFP will close on the date and time specified; only a listing of participating vendors will be available at that time.

Respectfully,



Brad Richardson
Director of Procurement Services

FORSYTH COUNTY SCHOOL SYSTEM
Purchasing Department

GENERAL TERMS AND CONDITIONS

1.0 **PREPARATION OF PROPOSALS**
1.1

FORSYTH COUNTY SCHOOL SYSTEM
Purchasing Department

Purchasing Department

3.0 SPECIFICATIONS AND SCOPE OF WORK

3.1 Overview- Contractor will provide all labor, material, equipment, and services to complete future work projects in accordance with the terms of this RFP. Contractor is encouraged to visit FCS sites and become familiar with all conditions that may affect the work. Any work performed under this contract must approved by FCS (Facilities Director or designee) before project begins.

3.2 Work- This contract covers three type of work

- i. Routine Projects-** Routine work associated with the function of the school system. This work will be coordinated with FCS lead. Upon the discretion of FCS, it may require a written “not to exceed” estimate before approval. In other instances, FCS may verbally authorize work. **Invoicing for either type of work shall be itemized to reflect labor, parts, and any other contracted line items.** Invoice shall match estimate unless the scope of work is changed by FCSS or unless FCS approves a change during the project.
- ii. Larger Projects-** FCS may opt to utilize this contract if it deems in the best interest for projects of larger scope and scale. In this event, FCS may negotiate with one or more awarded contractors in order to more accurately reflect leveraged spend associated with

FORSYTH COUNTY SCHOOL SYSTEM
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Criteria Six-Cost

Labor Rates:	Normal Time	Overtime
Licensed Electrician	\$ _____	\$ _____
Electrician Helper	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____

Parts and Rental Equipment

Parts- % Mark-up for Parts _____ %

Rental Equipment- % Mark-up for Rental Equipment _____ %

Other (List Below if other costs exists)

Notes/Clarifications:

Documents Required for Award Consideration:

- Proposal Form
- Immigration Affidavits
- References
- Insurance Documentation
- Other Documentation requested (Licenses, etc)
- Signed Contract Agreement (Included in the RFP)

FORSYTH COUNTY SCHOOL SYSTEM

Purchasing Department

THE CONTRACT AGREEMENT MUST BE COMPLETED BY THE OFFEROR AND RETURNED WITH THE PROPOSAL PACKAGE.

P24-06 - CONTRACT AGREEMENT

We have carefully examined and fully understand the General and Special Terms and Conditions and related documents in providing **Electrical Services** to the Forsyth County School System and do agree to all terms and conditions by so signing this document.

Withdrawals, cancellations, etc., will not be accepted unless the Purchasing Coordinator gives authorization. In the event vendors fail to comply, they may be removed from the vendors' list.

_____ Company Name	_____ Representative's Signature (Must be signed in ink)
_____ Address	_____ Representative's Name (Please type or print)
_____ City, State, and Zip Code	_____ E-Mail Address
_____ Date	_____ Telephone Number and Extension
_____ Terms (If payment terms are not indicated, will be determined to be net 30 days).	_____ Fax Number

PLEASE INDICATE YOUR LEAD TIME UPON RECEIPT OF PURCHASE ORDER:

PRICES MUST REMAIN FIRM FOR TWELVE MONTHS.

Signing the Contract Agreement affirms that the original RFP document has not been altered in any way.

Upon notice of Award, this page will become the prevailing Contract Agreement between your organization and the FCSS.

Purchasing Department

REFERENCE SHEET

References will be utilized in the evaluation of this Proposal. Vendor must include all information requested. Failure to do so will reflect negatively in evaluation and may result in your submission being deemed "non-responsive" and eliminated from consideration. It is not the responsibility of FCSS to pursue and obtain incomplete and/or inaccurate reference information, to ensure that references respond to our reference request, or to consider references not listed on this form.

School System/Organization	
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FORSYTH COUNTY SCHOOL SYSTEM
Purchasing Department

IMMIGRATION AND SECURITY FORM
(GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT AFFIDAVIT)

Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

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 on behalf of **(Forsyth County School System)** 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). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number (4-6 Digits, no letters)

Date of Authorization (of E-Verify authorization)

Name of Contractor

Name of Project/Contract Number/Purchase Order Number

Name of Public Employer

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

Executed on _____, ____, 202__ 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

FORSYTH COUNTY SCHOOL SYSTEM
Purchasing Department

Contractor Questionnaire

(Questionnaire information will be utilized in the evaluation of this Bid. Vendors must include all information requested. Failure to do so will reflect negatively in evaluation and may result in your submission being deemed "non-responsive" and eliminated from consideration.

Company Name: _____

Years in Electrical Service Busp1 Tmnness: _____

of Permanent Employees: _____

of Employees Assigned to FCSS for this Contract: _____

How many Comparable Contracts do you currently have in Georgia? _____

How many of these Contracts are: Government _____
K-12 Education _____

Where is t1 Tmhe location of your nearest service facility? Please provide location and # miles from Cumming Ga)?

Has your company ever failed to comply with any contract awarded? (Explain if yes)? _____

Has your company ever lost a contract to any government entity based on poor performance or breach of contract (Explain if yes) _____

Is your company currently suspended or debarred from any government entity? (Explain if yes) _____

Are there any judgments, claims, legal proceeding or law sup1 Tmts pending or outstanding against your company of any of its officers (Explain if yes) _____

Is your company currently in bankruptcy proceedings or has it filed for bankruptcy in the past five years? (If Yes, please explain) _____

Do you perform Background Checks on the Service Techs that may be assigned to this contract, if so please detail the type of check (GCIC, NCIC etc) _____

Do you perform drug test on the Service Techs t1 Tmhat may be assp1 Tmgned to this contract?(At Hire, Random, or Both)?
