



Department of Administrative Services Purchasing and Contracts

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Sabra Smith Newby, Chief Administrative Officer
Adleen B. Stidhum, Purchasing Manager



CLARK COUNTY, NEVADA BID NO. 603806-15 ANNUAL REQUIREMENTS CONTRACT FOR POOL CHEMICALS

October 19, 2015

ADDENDUM NO. 1

INVITATION TO BID

1. The bid opening date of Tuesday October 27, 2015 at 3:00:00 p.m. **remains unchanged.**

SPECIAL CONDITIONS

2. Page III-4, Special Conditions, **add** as follows:

29. LOCAL FACILITY (FOR LOT 1 ONLY)

- A. Service Station

SUCCESSFUL BIDDER shall maintain a local service station. The station shall be capable of providing will call services for the pick-up of items listed in the Bid between the hours of 7:00 a.m. and 4:00 p.m. PST Monday through Friday (excluding COUNTY holidays). Non-compliance with this Section may result in termination of CONTRACT.

BID FORM

3. **Discard** the previous Original Bid Form pages V-1 through V-4 in its entirety and **replace** with the Revised Bid Form attached to this Addendum No. 1.

ATTACHMENT 1

4. **Discard** the previous Attachment 1, page 1-1 in its entirety and **replace** with the Revised Attachment 1 attached to this Addendum No. 1.

Should you have any questions regarding the technical specifications or drawings, please call or email Adriane Garcia, Sr. Purchasing Analyst, Purchasing and Contracts, at (702) 455-2733 or akgarcia@ClarkCountyNV.gov.

ISSUED BY:

ADRIANE GARCIA, CPPB
Sr. Purchasing Analyst

Attachment(s): Revised Bid Form, pages Revised V-1 through V-4
Revised Attachment 1, page Revised 1-1

Cc: Jerry Stueve, Real Property Management
Lisa Kremer, Real Property Management
Darren Daniels, RPM – Operations
Jeff Benites, Real Property Management
Mark Larson, RPM – Operations

Matt Garban, RPM – Operations
Wayne Wedlow, RPM – Operations
Pat Lachler, RPM – Operations

CLARK COUNTY, NEVADA

V - BID FORM

BID NO. 603806-15

ANNUAL REQUIREMENTS CONTRACT FOR POOL CHEMICALS

REVISED PER ADDENDUM NO. 1

Name of Firm _____

This bid is submitted in response to COUNTY'S Invitation to Bid and is in accordance with all conditions and specifications in this document.

LOT 1 - BULK DELIVERY AND PICK UP OF CHEMICALS					
Item No.	Description	Units of Purchase	Annual Estimated Quantity	Unit Price	Extended Total
1.	SODIUM HYPOCHLORITE: BULK DELIVERY	GALLON	200,000	\$ _____ / gal.	\$ _____
2.	SODIUM HYPOCHLORITE: 15 GALLON DRUM, DEPARTMENT REP. WILL PICK UP	DRUM	75	\$ _____ / drum	\$ _____
3.	SODIUM HYPOCHLORITE: 55 GALLON DRUM, DELIVERY REQUIRED	DRUM	50	\$ _____ / drum	\$ _____
4.	HYDROCHLORIC ACID / MURIATIC ACID: 15 GALLON DRUM, DEPARTMENT REP. WILL PICK UP	DRUM	50	\$ _____ / drum	\$ _____
5.	HYDROCHLORIC ACID / MURIATIC ACID: BULK DELIVERY	GALLON	60,000	\$ _____ / gal.	\$ _____
6.	HYDROCHLORIC ACID/MURIATIC ACID: 55 GALLON DRUM, DELIVERY REQUIRED	DRUM	50	\$ _____ / drum	\$ _____
7.	SODIUM BICARBONATE: 50 LB. BAG, DEPARTMENT REP. WILL PICK UP	BAG	1,000	\$ _____ / bag	\$ _____
8.	CALCIUM HYPOCHLORITE: 100 LB. BUCKET, DEPARTMENT REP. WILL PICK UP	BUCKET	100	\$ _____ / bucket	\$ _____
9.	SODIUM THIOSULFATE: 50 LB. BAG, DEPARTMENT REP. WILL PICK UP	BAG	200	\$ _____ / bag	\$ _____
10.	POTASSIUM MONOPERSULFATE: 50 LB. BAG, DEPARTMENT REP. WILL PICK UP	BAG	400	\$ _____ / bag	\$ _____
11.	3" CHLORINE TABLETS: 50 LB. BUCKET, DEPARTMENT REP. WILL PICK UP	BUCKET	100	\$ _____ / bucket	\$ _____
12.	DROP IN ANNUAL VALUE FOR LOST / DAMAGED DRUM CHARGES				\$1,000.00
13.	ANNUAL DOLLAR VALUE FOR PRODUCTS NOT IDENTIFIED				\$10,000
	BIDDER OFFERS _____% OFF OF MANUFACTURER'S PUBLISHED LIST PRICE				\$10,000

BIDDERS MUST BID ON ALL ITEMS IN LOT NO. 1. TO BE CONSIDERED RESPONSIVE. ANY BID SUBMITTAL RECEIVED THAT HAS NOT BID ON ALL ITEMS IN THE LOT WILL BE READ INTO THE RECORD AS INCOMPLETE AND AS NON-RESPONSIVE.

LOT 1 TOTAL (SUM OF LINE ITEMS 1 THROUGH 13): \$ _____

LOT 2 - BULK DELIVERY OF CARBON DIOXIDE GAS					
Item No.	Description	Units of Purchase	Annual Estimated Quantity	Unit Price	Extended Total
14.	CARBON DIOXIDE GAS - BULK DELIVERY	POUNDS	100,000	\$ _____ / lb.	\$ _____

LOT 2 TOTAL: \$ _____

DELIVERY:

_____ business days (Maximum two (2) business days for bulk deliveries and five (5) business days for dry chemicals)

DISCOUNT TERMS OF PAYMENT:

_____%, _____ calendar days.

BIDDER'S LOCAL FACILITY

(If Bidder has multiple local facilities, please attach to bid submittal a list of this information for each facility)

CONTACT MANAGER OR ACCOUNT REPRESENTATIVE NAME

ADDRESS

CITY STATE, ZIP

PHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

ATTACHMENTS TO BID FORM

FAILURE TO SUBMIT REQUIRED ATTACHMENTS AS LISTED BELOW MAY RESULT IN REJECTION OF BID.

1. **Attachment 1**, Subcontractor Information, is attached.

Bidder is responsible to ascertain the number of Addenda issued and hereby acknowledges receipt of the following Addendum: **FAILURE TO ACKNOWLEDGE ALL ADDENDA ISSUED AND USE THE CORRECT BID FORM AS REQUIRED, MAY RESULT IN REJECTION OF BID.**

Addendum No. _____	Addendum No. _____	Addendum No. _____
Addendum No. _____	Addendum No. _____	Addendum No. _____
Addendum No. _____	Addendum No. _____	Addendum No. _____

Bidder hereby offers and agrees to furnish the material(s) and service(s) in compliance with all terms, conditions, specifications, and amendments in the Invitation to Bid and any written exceptions in the offer. We understand that the items in this Invitation to Bid, including, but not limited to, all required certificates are fully incorporated herein as a material and necessary part of the contract.

The undersigned hereby states, under penalty of perjury, that all information provided is true, accurate, and complete, and states that he/she has the authority to submit this bid, which will result in a binding contract if accepted by Clark County, Nevada.

I certify, under penalty of perjury, that I have the legal authorization to bind the firm hereunder:

SIGNATURE OF AUTHORIZED REPRESENTATIVE

LEGAL NAME OF FIRM

NAME AND TITLE OF AUTHORIZED REPRESENTATIVE (PRINT OR TYPE)

ADDRESS OF FIRM

PHONE NUMBER OF AUTHORIZED REPRESENTATIVE

CITY, STATE ZIP

FAX NUMBER OF AUTHORIZED REPRESENTATIVE

EMAIL ADDRESS

DATE

BUSINESS LICENSE INFORMATION:

_____ CURRENT STATE	_____ LICENSE NO.
_____ CURRENT COUNTY:	_____ LICENSE NO.
_____ CURRENT CITY:	_____ LICENSE NO.

_____ ISSUE DATE:	_____ EXPIRATION DATE:
_____ ISSUE DATE:	_____ EXPIRATION DATE:
_____ ISSUE DATE:	_____ EXPIRATION DATE:

FOR INFORMATIONAL PURPOSES ONLY:

The above referenced firm is a MBE WBE PBE SBE VET DVET ESB as defined below.

STATE OF NEVADA BUSINESSES

MINORITY OWNED BUSINESS ENTERPRISE (MBE):

An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more minority persons of Black American, Hispanic American, Asian-Pacific American or Native American ethnicity.

WOMEN OWNED BUSINESS ENTERPRISE (WBE):

An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more women.

PHYSICALLY-CHALLENGED BUSINESS ENTERPRISE (PBE):

An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51% owned and controlled by one or more disabled individuals pursuant to the federal Americans with Disabilities Act.

SMALL BUSINESS ENTERPRISE (SBE):

An independent and continuing Nevada business for profit which performs a commercially useful function, is not owned and controlled by individuals designated as minority, women, or physically-challenged, and where gross annual sales does not exceed \$2,000,000.

VETERAN OWNED BUSINESS ENTERPRISE (VET):

An independent and continuing Nevada business for profit which performs a commercially useful function and is at least 51 percent owned and controlled by one or more U.S. Veterans.

DISABLED VETERAN OWNED BUSINESS ENTERPRISE (DVET):

A Nevada business at least 51 percent owned/controlled by a disabled veteran.

EMERGING SMALL BUSINESS (ESB):

Certified by the Nevada Governor's Office of Economic Development effective January, 2014. Approved into Nevada law during the 77th Legislative session as a result of AB294.

ATTACHMENT 1
BID NO. 603852-15

ANNUAL REQUIREMENTS CONTRACT FOR POOL CHEMICALS
REVISED PER ADDENDUM NO. 1

SUBCONTRACTOR INFORMATION

It is our intent to utilize the following MBE, WBE, PBE, SBE, VET, DVET and ESB subcontractors in association with CONTRACT:

2. Subcontractor Name: _____
Contact Person: _____ Telephone Number: _____
Description of Work: _____
Estimated Percentage of Total Dollars: _____
Business Type: MBE WBE PBE SBE VET
 DVET ESB

3. Subcontractor Name: _____
Contact Person: _____ Telephone Number: _____
Description of Work: _____
Estimated Percentage of Total Dollars: _____
Business Type: MBE WBE PBE SBE VET
 DVET ESB

4. Subcontractor Name: _____
Contact Person: _____ Telephone Number: _____
Description of Work: _____
Estimated Percentage of Total Dollars: _____
Business Type: MBE WBE PBE SBE VET
 DVET ESB

5. Subcontractor Name: _____
Contact Person: _____ Telephone Number: _____
Description of Work: _____
Estimated Percentage of Total Dollars: _____
Business Type: MBE WBE PBE SBE VET
 DVET ESB

6. Subcontractor Name: _____
Contact Person: _____ Telephone Number: _____
Description of Work: _____
Estimated Percentage of Total Dollars: _____
Business Type: MBE WBE PBE SBE VET
 DVET ESB

7. Subcontractor Name: _____
Contact Person: _____ Telephone Number: _____
Description of Work: _____
Estimated Percentage of Total Dollars: _____
Business Type: MBE WBE PBE SBE VET
 DVET ESB

No MBE, WBE, PBE, SBE, VET, DVET or ESB subcontractors will be used.