## **Houston Community College System Purchasing Department**



## HOUSTON COMMUNITY COLLEGE SYSTEM INVITATION FOR BIDS

**FOR** 

RADIOGRAPHY IMAGING SYSTEM

PROJECT NO. 06-14

#### **INVITATION FOR BIDS**

#### TABLE OF CONTENTS

|   | Page Number |
|---|-------------|
| Cover Page and Summary  Table of Contents  Instructions to Bidders  Forms to be completed an submitted with a Bid | 2           |
| Bid/Award Form (Attachment No. 1)   | 9-10        |
| Schedule of Items and Prices (Attachment No. 2)   | 11-12       |
| Determination of Good Faith Effort Form (Attachment No. 3)  | 13          |
| Small Business Unavailability Certificate (Attachment No. 4)  | 14          |
| Small Business Development Questionnaire (Attachment No. 5)   | 15          |
| Contractor & First Tier Subcontractor/Supplier Participation Form (Attachment No. 6)                              | 16          |
| Non-Discrimination Statement (Attachment No. 7)   | 17          |
| Certification & Disclosure Statement (Attachment No. 8)   | 18          |
| Affidavit Form (Attachment No. 9)   | 19          |
| Business Questionnaire (Attachment No. 10)  | 20-21       |
| Assurance of SBDP Goal (Attachment No. 11)  | 22          |
| Vendor Application Form (Attachment No. 12)   | 23          |
| Insurance Requirements (Attachment No. 13)  | 24          |
|   |             |

Proposed Contract Documents
The resulting contract will include at least the following documents:

| Bid/Award Form (Exhibit A)   | 26    |
|--|-------|
| Schedule of Items and Prices (Exhibit B)                             | 26    |
| General Terms and Conditions (Exhibit C)                             | 27-30 |
| Contractor & First Tier Subcontractor/Supplier Participation Form    |       |
| (Exhibit D), if appropriate  | 31    |
| Subcontractor Payment Certification Form (Exhibit E), if appropriate | 32    |
| Progress Assessment Report (Exhibit F), if appropriate               | 33    |
| Insurance Requirements (Exhibit G), if appropriate                   | 34    |

### HOUSTON COMMUNITY COLLEGE SYSTEM INVITATION FOR BIDS - SUMMARY

**Date: January 17, 2006** 

**Project Title: Radiography Imaging System** 

Project No. 06-14

\_\_\_\_\_

#### **ISSUED BY:**

#### **SUBMIT INQUIRIES TO:**

Name: Denise McGuire

Houston Community College System Purchasing Department 3100 Main Street (11<sup>th</sup> Floor) Houston, Texas 77002 Post Office Box 667517 Houston, Texas 77266-7517

Telephone: (713) 718-7430 Fax: (713) 718-2113

Title: Purchasing Supervisor

Email: Denise.McGuire@hccs.edu

.....

<u>Project Overview:</u> The Houston Community College System ("HCC") is seeking sealed bids from qualified firms to supply, deliver (F.O.B. Destination), and install, a Radiography Imaging System as specified in Attachment No. 2, Schedule of Items and Prices.

<u>Contract Approval</u>: This procurement is subject to approval by HCC Board of Trustees. Subsequent to Board approval, the <u>only</u> person authorized to commit HCC contractually is the Chancellor or his designee.

**<u>Bid Opening Time/Location:</u>** Sealed bids in original form for work/items described herein will be received until February 14, 2006 at 3:00 p.m. (local time) at the Purchasing Department, 3100 Main (11<sup>th</sup> Floor), Room 11AO6, Houston, Texas 77002, and at that time publicly opened and read aloud.

<u>Small Business Development Program (SBDP):</u> The small business participation goal for this solicitation is BEST EFFORT. (See Instructions to Bidders, Paragraph 8).

<u>Obligation:</u> This Invitation for Bids does not obligate HCC to award a contract or pay any costs incurred by the bidder in the preparation and submittal of a bid.

HCC is an equal opportunity/educational institution, which does not discriminate on the basis of race, color, religion, national origin, gender, age or disability.

#### INSTRUCTIONS TO BIDDERS

#### 1. REVIEW OF BID DOCUMENTS

A complete set of bid documents shall be used in preparing a bid. Each prospective bidder should carefully review the bid documents and take such steps as may be reasonably necessary to ascertain the resulting contract performance requirements. Failure to do so will not relieve bidders from the responsibility of estimating properly the difficulty/level of effort or cost of successfully performing the resulting contract.

#### 2. EXPLANATION TO BIDDERS

Any explanation desired by a prospective bidder regarding the meaning or interpretation of the bid documents must be requested in writing and with sufficient time allowed (a minimum of seven (7) calendar days before the date set to receive bids) for a response to reach prospective bidders before the submission of their bids. Any HCC response will be in the form of an amendment of the solicitation or an information letter. The response will be made available to all prospective bidders on HCC website at <a href="www.hccs.edu">www.hccs.edu</a>. Receipt of any amendment(s) issued by HCC shall be acknowledged by the bidder with the bid submission.

#### 3. <u>BIDDER ELIGIBILITY FOR CONTRACT AWARD</u>

- a. Each bidder shall complete, and submit with the bid, the applicable forms contained in the solicitation. When a special license or permit is required by Federal, State or Local law or ordinance, the bidder must be properly licensed prior to submitting a bid to HCC and must furnish evidence of such with the bid.
- b. In order for a bidder to be eligible to be awarded a contract, the bid must be responsive to the solicitation and HCC must be able to determine that the bidder is responsible to perform the resulting contract satisfactorily.
- c. <u>Responsive</u> bids are those complying with all material aspects of the solicitation. Bids that do not comply with the terms and conditions of the solicitation will be rejected as non-responsive.
- d. Responsible bidders as a minimum must:
  - Have adequate financial resources or ability to obtain such resources as required during the performance of the contract.
  - Be able to comply with the required delivery or performance schedule, taking into consideration all existing business commitments.
  - Have a satisfactory history of past performance.
  - Have necessary management and technical capability to perform the contract.
  - Provide evidence satisfactory to HCC that the bidder will comply with the Small Business Development Program requirements contained in the solicitation.

- Certify that the firm is not delinquent in any tax owed the State of Texas under Chapter 171, Tax Code; signing and submitting the bid is so certifying.
- Be qualified as an established firm regularly engaged in the type of business to provide the items/work required by this solicitation.
- Be otherwise qualified and eligible to receive an award under applicable laws and regulations.
- e. A bidder may be requested to submit written evidence verifying that he/she meets the minimum criteria necessary to be determined a responsible bidder. Bids deviating or taking exceptions to the solicitation requirements will not be considered.

#### 4. PREPARATION OF BID

- a. A bid shall be prepared on the forms furnished by HCC; shall be completed in ink, and shall be manually signed by an authorized official of the company. The person signing the bid shall initial any changes or erasures appearing on the bid forms. Bids submitted via e-mail or facsimile (fax) will not be accepted by HCC.
- b. A bid shall be submitted so as to be received no later than the exact date/time and at the place indicated in the solicitation, and shall be enclosed in a sealed envelope clearly identified as a bid with the project title, project number and bid opening date and time. The envelope shall also identify the name and address of the bidder and shall contain the bid security, if required, and other required documents.

#### 5. **OPENING OF BIDS**

- a. Bids will be publicly opened immediately following the time set for receipt in the solicitation. The bid prices will be read aloud for the information of bidders and others present.
- b. If HCC receives two or more bids from responsible bidders that are identical in nature and amount, the Board of Trustees shall review. The Board of Trustees may reject all bids, in the best interest of HCC.
- c. HCC reserves the right to reject any and all bids, to waive any informalities in bids received, and to reject all non-responsive or conditional bids.

#### 6. **CONTRACT AWARD**

Award of a contract, if awarded, will be made to the responsive and responsible bidder offering the lowest bid price and offers the best value to the Houston Community College System and whose bid conforms to the solicitation documents.

HCC reserves the right to waive any technicalities or irregularities in the bid documents and consider the bid for award.

#### 7. **TAXES**

HCC is tax exempt as a governmental subdivision of the State of Texas.

#### 8. SMALL BUSINESS DEVELOPMENT PROGRAM (SBDP)

- a. HCC has adopted a Small Business Development Program for small businesses attempting to provide goods and/or services as prime contractors or as subcontractors to other prime contractors to HCC. The program is designed to prevent discrimination by ensuring that small, underutilized and disadvantaged businesses are informed and prepared to compete for HCC procurements. HCC will neither discriminate nor select vendors on the basis of race, color, national origin, religion, gender, age or disability in its procurement selection process.
- b. Small businesses whose gross annual income averaged over the past three (3) years does not exceed the Small Business Administration's size standards as specified in 13 CFR Part 121 are eligible to apply for participation in the program.
- c. For this solicitation, HCC has established **BEST EFFORT** as its goal for Small Business participation.
- d. Good Faith Efforts: HCC will make a good faith effort to utilize small businesses in all contracts. The annual program goals may be met by contracting directly with small businesses or indirectly through subcontracting opportunities. Therefore, any business that contracts with HCC will be required to make a good faith effort to award subcontracts to small businesses. The subcontracting goal applies to all vendors regardless of their status. By implementing the following procedures, a contractor shall be presumed to have made a good faith effort:
  - To the extent consistent with industry practices, divide the contract work into reasonable lots.
  - Give notice to SBDP eligible firms of subcontract opportunities or post notices of such opportunities in newspapers and other circulars.
  - Document reasons for rejecting a firm that proposes or bids on subcontracting opportunities.

#### 9. Small Business Compliance Review

To ensure compliance with the small business participation goal of any resulting contract, the vendor will be required to meet with the procurement staff member responsible for this project at the 50% and 75% completion phase to verify small business participation activity.

#### 10. Prime Contractor/Contracts for Services

The prime contractor must perform a minimum of 30% of any contract for services with its labor force and or demonstrate management of the contract for services to the satisfaction of HCC.

#### 11. Prohibited Communications

Except as provided in exceptions below, the following communications regarding a particular invitation for bids, requests for proposal, requests for qualifications, or other solicitation are prohibited:

- [1] Between a potential vendor, service provider, bidder, offeror, lobbyist or consultant and any Trustee;
- [2] Between any Trustee and any member of a selection or evaluation committee; and
- [3] Between any Trustee and administrator or employee.

The communications prohibition shall be imposed on the date that responses to the solicitation are due or received, whichever is first.

The communications prohibition shall terminate when:

- [1] The contract is awarded by the Chancellor or his designee; or
- [2] The award recommendations are considered by the Board at a duly-noticed public meeting.

In the event the Board refers the recommendation back to staff for reconsideration, the communications prohibition shall be re-imposed.

The communications prohibition shall not apply to the following:

- [1] Duly noted pre-bid or pre-proposal conferences.
- [2] Communications with the HCC General Counsel.
- [3] Emergency contracts.
- [4] Presentations made to the Board during any duly-noticed public meeting.
- [5] Unless otherwise prohibited in the solicitation documents, any written communications between any parties, provided that the originator shall immediately file a copy of any written communication with the Board Services Office. The Board Services Office shall make copies available to any person upon request.
- [6] Nothing contained herein shall prohibit any person or entity from publicly addressing the Board during any duly-noticed public meeting, in accordance with applicable Board policies, regarding action on the contract.

#### 12. **Drug Policy**

HCC is a drug-free workforce and workplace. The manufacture, sale, distribution, dispensation, or use of illegal drugs or alcohol by vendors or contractors while on HCC's premises is strictly prohibited.

#### 13. **BID SUBMITTALS**

Each bidder must complete and return the following documents, if appropriate:

- Bid/Award Form (Attachment No. 1)
- Schedule of Items and Prices form (Attachment No.2)
- Determination of Good Faith Effort (Attachment No.4)
- Small Business Unavailability Certificate (Attachment No. 5)
- Contractor & First Tier Subcontractor/Supplier Participation Form (Attachment No. 7)
- Non-Discrimination Statement (Attachment No. 8)
- Certification & Disclosure Statement (Attachment No. 9)
- Affidavit Form (Attachment No. 10)
- Business Questionnaire (Attachment No. 11)
- Assurance of SBDP Goal (Attachment No. 12)

The envelope containing a bid shall be addressed as follows:

- Name, Address and Telephone Number of Bidder;
- Project Description/Title;
- Project Number
- Bid Opening Date/Time.

All bids shall be submitted to:

Houston Community College System
Purchasing Department
3100 Main Street (11<sup>th</sup> Floor), Rm. 11AO6
Houston, Texas 77002
Reference: Project No. 06-14
Attn: Denise McGuire

#### HOUSTON COMMUNITY COLLEGE SYSTEM

#### **INVITATION FOR BIDS**

#### **BID/CONTRACT AWARD FORM**

| DESCRIPTION OF PROJECT: Radiography Ima<br>PROJECT NO.: 06-14   |   |
|---|---|
| Name of Bidder/Contractor:  |   |
| Address:  | Telephone:  |
|   | Fax:  |
|   | E-mail:   |
| Receipt of Bid Amendments Number(s):  |   |
| The undersigned hereby proposes to furnish all other services necessary to complete the above re listed on the Schedule of Items and Prices, Attachmatical The undersigned certifies that the amount(s) contarefully checked and are submitted as correct and | eferenced project for the bid amount(s) ment No. 2. |
| Signed By:  |   |
| Name:(Type or Print)  |   |
| Title:(Type or Print)   |   |
| ATTEST:(Secretary, if Bidder is a Corporation)  |   |
| SEAL:   |   |
| (If Corporation)  |   |

#### ACCEPTANCE AND CONTRACT AWARD FORM (This page to be completed by HCC.)

Purchase Order No.\_\_\_\_\_ (for payment purposes only) Project No. 06-14 Contractor to perform the work required herein in accordance with Purchase Order(s) issued by HCC and the Terms and Conditions of Purchase posted on the HCC website at www.hccs.edu, incorporated herein by reference, and the prices, scope of services and general terms and conditions attached hereto and made a part hereof. HOUSTON COMMUNITY COLLEGE SYSTEM

Signed By: \_\_\_\_\_

Executed for and on behalf of the Houston Community College System pursuant to approval by the Board of Trustees on \_\_\_\_\_

Michael Kyme Name:

Title: Executive Director, Procurement Operations

#### SCHEDULE OF ITEMS AND PRICES

The Bidder/Contractor shall furnish all resources and services necessary and required to supply/deliver (F.O.B. Destination) and install, the products listed below in accordance with the specifications and the general terms and conditions of the proposed contract for the price(s) listed below.

| Item No.  | Description of Work/Item(s)                               | <u>Oty</u> | <u>Unit</u>  | <b><u>Unit Price</u></b>       | Ext. Bid Amount |  |                                |  |              |              |  |
|---|---|------------|--------------|--------------------------------|-----------------|--|--------------------------------|--|--------------|--------------|--|
| 001   | DirectView computerized                                   | 1          | System       | \$                             | \$              |  |                                |  |              |              |  |
|   | Radiography Syste   |            | TO 1         |                                |                 |  |                                |  |              |              |  |
|   | Kodak Model CR 5  |            | -            |                                |                 |  |                                |  |              |              |  |
|   | (System shall inclu                                       |            |              |                                |                 |  |                                |  |              |              |  |
|   | <ul><li>DICOM sto</li><li>15" Flat Par</li></ul>          | _          |              |                                |                 |  |                                |  |              |              |  |
|   | 15 1141141  |            |              |                                | **              |  |                                |  |              |              |  |
|   |   |            |              | y Data Softwar                 | ie –            |  |                                |  |              |              |  |
|   | <ul><li>18x24 Direction</li><li>24x30 Direction</li></ul> |            |              | , ,                            |                 |  |                                |  |              |              |  |
|   | ■ 35x43 Direct  |            |              |                                |                 |  |                                |  |              |              |  |
|   |   |            |              | ns for CR casso                | ettes (2 each)  |  |                                |  |              |              |  |
|   |   |            |              | ns for CR cassons for CR casso |                 |  |                                |  |              |              |  |
|   |   |            | _            |                                |                 |  |                                |  |              |              |  |
| <ul> <li>35x43 Flexible Phosphor Screens for CR cassettes (2 each)</li> <li>CR 500 PC, Grid Detection and Suppression software</li> <li>CR 500 Procedure Mapping and Enhanced trauma software</li> <li>CR 500 Reject Analysis Reposting Software</li> </ul> |   |            |              |                                |                 |  |                                |  |              |              |  |
|   |   |            |              |                                |                 |  | <ul> <li>DICOM Pri</li> </ul>  |  | y sis repose | ing sortware |  |
|   |   |            |              |                                |                 |  | <ul> <li>UPS Barcoo</li> </ul> |  | r            |              |  |
|   | <ul> <li>Black Surro</li> </ul>                           |            |              | are                            |                 |  |                                |  |              |              |  |
|   | <ul><li>Sixteen (16)</li></ul>                            | ) hours o  | f applicatio | ns training                    |                 |  |                                |  |              |              |  |
|   |   |            |              | cal Support Ser                | rvices          |  |                                |  |              |              |  |
| Bidding on:_  |   |            |              |                                |                 |  |                                |  |              |              |  |
|   | (Manufactur   | er/Model I | No.)         |                                |                 |  |                                |  |              |              |  |

11

#### **Brand Name or Equal Descripton**

The items listed herein have been identified as brand name or equal. This description reflects the minimum level of quality that will satisfy the needs of HCC. To be considered for award, bids of "equal" products, including "equal" products of the brand name manufacturer, must:

- a. Meet the minimum quality of the brand specified;
- b. Clearly identify the item(s) by brand name, if any, and make or model number.
- c. Include, with the bid documents, descriptive literature such as illustrations, drawings, etc. Mark any descriptive material to clearly show any modifications.
- d. HCC will evaluate "equal" products on the basis of information furnished by the bidder. HCC is not responsible for locating or obtaining any information not identified in the bid document
- e. Unless the bidder clearly indicates in its bid that the product being offered is an "equal" product, the bidder shall provide the brand name product referenced in the solicitation.

## ATTACHMENT NO. 3 PROJECT NO. 06-14

#### HOUSTON COMMUNITY COLLEGE SYSTEM

#### DETERMINATION OF GOOD FAITH EFFORT

| Bidder                       |  |
|------------------------------|--|
| Address                      |  |
| Phone                        | Fax Number   |
| Bidder to co<br>ways the Bio | determination that a good faith effort has been made, HCC requires the implete this form and submit supporting documentation explaining in what lder has made a good faith effort to attain the goal. The Bidder will respond g "yes" or "no" to the following and provide supporting documentation. |
| (1)                          | Whether the Bidder provided written notices and/or advertising to at least five (5) certified small businesses or advertised in general circulation, trade association and/or small businesses focus media concerning subcontracting opportunities.  |
| (2)                          | Whether the Bidder divided the work into the reasonable portions in accordance with standard industry practices.   |
| (3)                          | Whether the Bidder documented reasons for rejection or met with the rejected small business to discuss the rejection.  |
| (4)                          | Whether the Bidder negotiated in good faith with small businesses, not rejecting qualified subcontractors who were also the lowest responsive bidder.  |
|                              | Bidder is unable to meet the solicitation goal or if any of the above items (1-red "no", the Bidder must submit a letter of justification.   |
| Signature of                 | Bidder Title   |
| Date                         |  |

#### ATTACHMENT NO. 4 SMALL BUSINESS UNAVAILABILITY CERTIFICATE

| I,(Name)  |                                | ,                            | (Title)                            | , of   |         |
|---|--------------------------------|------------------------------|------------------------------------|--|---------|
| (Business Nan   | ne)                            |                              | -                                  | low, I contacted the following small bus<br>or Services to be utilized on HCC Projec |         |
| DATE CONTACTED  | SMALL BUSINESS                 | TELEPHONE NO.                | CONTACT PERSON                     | MATERIALS OR SERVICES  | RESULTS |
| 1.  |                                |                              |                                    |  |         |
| 2.  |                                |                              |                                    |  |         |
| 3.  |                                |                              |                                    |  |         |
| 4.  |                                |                              |                                    |  |         |
| 5.  |                                |                              |                                    |  |         |
| 6.  |                                |                              |                                    |  |         |
| To the best of my knowledge and belief, said small business was unavailable for this solicitation, unable to prepare a bid/proposal or prepared a bid that was rejected for the reason(s) stated in the RESULTS column above. |                                |                              |                                    |  |         |
| The above statement is a true and accurate account of why I was unable to award a subcontract(s) or supply orders(s) to the small business listed above.  |                                |                              |                                    |  |         |
| NOTE: This form to be submitte  | ed with all Bidder documents f | for Waiver of small business | participation. (See Instructions t | to Bidders)  |         |
|   |                                |                              |                                    | Signature:(Bidder/Offere   | r)      |

## ATTACHMENT NO. 5 SMALL BUSINESS DEVELOPMENT QUESTIONNAIRE

**Note**: Vendors are to complete this form along with a **copy** of the Contractor and First Tier Subcontractor/Supplier Participation Form and return it in a separate envelope to:

Houston Community College System Economic Development Office Post Office Box 667517 Houston, TX 77266-7517

| FIRM NAME:   |   | <del></del>   |
|--|---|---|
| FIRM ADDRESS:  |   |   |
| TELEPHONE:   |   |   |
| FAX NUMBER:  |   |   |
| EMAIL ADDRESS:   |   |   |
| CONTACT PERSON'S NAME AND PH   | ONE NO  |   |
| SIGNATURE OF FIRM'S AUTHORIZE  | D OFFICIAL:                                   |   |
| NAME AND TITLE (Type or Print):  |   |   |
| COMPANY MAJORITY OWNERSHI  | $\mathbf{\underline{P}}$ (Check one in each c | olumn)  |
| <u>ETHNICITY</u>   | <u>GENDER</u>                                 | LOCATION  |
| African American (AA)  | Male  | Houston (H)   |
| Asian Pacific American (APA)   | Female  | Texas (T)   |
| Caucasian ( C)   |   | Out of State (O)  |
| Hispanic American (HA)   |   | Specify State   |
| Native American (NA)   |   | Public Owned (PO)   |
| Other (O) Specify  |   |   |
| BUSINESS CLASSIFICATION  |   |   |
| DBE Disadvantaged Business Ent WBE Women Owned Business E HUB Historically Underutilized E | nterprise                                     | SB Small Business MBE Minority Business Enterprise Other: |
| Please provide information regarding certi   | fying agency (if any)                         |   |
| Name of Agency   | Certificate Nun                               | nber Expiration Date                                      |

Project No. 06-14

#### **ATTACHMENT NO. 6**

#### CONTRACTOR AND FIRST TIER SUBCONTRACTOR/SUPPLIER PARTICIPATION

Bidder/offerer presents the following participants in this solicitation and any resulting Contract. All bidders / offerers, including small businesses bidding as prime contractors, are required to demonstrate good faith efforts to include eligible small businesses in their bid submissions as subcontractors and/or suppliers.

|                   |                |  | Indicate if Small             | Percentage of   |       |  |
|-------------------|----------------|--|-------------------------------|-----------------|-------|--|
| PRIME CONTRACTOR  |                | Type of Work to be Performed or Materials Supplied | Business, DBE, HUB, MBE, etc. | Contract Effort | Price |  |
| Business Name:    |                |  |                               |                 |       |  |
| Business Address: |                |  |                               |                 |       |  |
| Telephone No. :   |                |  |                               |                 |       |  |
| Contact Person:   |                |  |                               |                 |       |  |
| SUBCONTRACTORS    |                |  |                               |                 |       |  |
| Business Name:    |                |  |                               |                 |       |  |
| Business Address: |                |  |                               |                 |       |  |
| Telephone No.:    |                |  |                               |                 |       |  |
| Contact Person:   |                |  |                               |                 |       |  |
| Business Name:    |                |  |                               |                 |       |  |
| Business Address: |                |  |                               |                 |       |  |
| Telephone No.:    |                |  |                               |                 |       |  |
| Contact Person:   |                |  |                               |                 |       |  |
| SUPPLIERS         |                |  |                               |                 |       |  |
| Business Name:    |                |  |                               |                 |       |  |
| Business Address: |                |  |                               |                 |       |  |
| Telephone No. :   |                |  |                               |                 |       |  |
| Contact Person:   |                |  |                               |                 |       |  |
| Business Name:    |                |  |                               |                 |       |  |
| Business Address: |                |  |                               |                 |       |  |
| Telephone No. :   |                |  |                               |                 |       |  |
| Contact Person:   |                |  |                               |                 |       |  |
| Submitted by:     | Business Name: |  | TOTAL                         | \$              |       |  |
| Address:          |                |  | Contractor                    | \$              |       |  |
| Telephone/Fax:    | Date:          |  | Subcontractor(s) \$           |                 |       |  |
|                   |                |  | Supplier (s):                 | \$              |       |  |

#### NON-DISCRIMINATION STATEMENT

The undersigned certifies that he/she will not discriminate against any employee or applicant for employment or in the selection of subcontractors because of race, color, age, religion, gender, national origin or disability. The undersigned shall also take action to ensure that applicants are employed, and treated during employment, without regard to their race, color, religion, gender, age, national origin or disability. Such action shall include, but shall not be limited to the following: employment, upgrading or transfer, recruitment or recruitment advertising, layoff or termination, rates of pay or other compensation, and selection for training, including apprenticeship.

| Name/Title:       |                 |       |
|-------------------|-----------------|-------|
|                   | (Type or Print) |       |
| Signature:        |                 | Date: |
| Company Name:     | (Type or Print) |       |
| Address:          |                 |       |
| Геlephone Number: |                 |       |

#### CERTIFICATION AND DISCLOSURE STATEMENT

A person or business entity entering into a contract with HCC is required by Texas Law to disclose, in advance of the contract award, if the person or an owner or operator of the business entity has been convicted of a felony. The disclosure should include a general description of the conduct resulting in the conviction of a felony as provided in section 44.034 of the <u>Texas Education Code</u>. The requested information is being collected in accordance with applicable law. This requirement does not apply to a publicly held corporation.

| If an individual:  |   |  | YES or NO   |
|--|---|--|---|
| Have you been convicted  | d of a felony?  |  |   |
| If a business entity:  |   |  | YES or NO   |
| Has any owner of your b  | ousiness entity been o  | convicted of a felony?   |   |
| Has any operator of your If you answered yes to a the conduct resulting in applicable dates, the Stat I attest that I have answered. | ny of the above quest<br>the conviction of the and County where | tions, please provide a<br>the felony, including<br>the conviction occurre | a general description of<br>the Case Number, the<br>ed, and the sentence. |
| Ву:  |   | Date:  |   |
| Name:  |   |  |   |
| Title:   |   |  |   |
| Business Entity:   |   |  |   |
| Signature of Firm's Auth   | norized Official:   |  |   |
| State of Texas   |   |  |   |
| sworn to and subscribed  | before me at  |  |   |
| Texas, this the  | day of  |  | , 2006  |
|  |   |  |   |
| Notary Public for the Sta  | nte<br>Of   |  |   |
|  | OI  |  |   |

#### STATE OF TEXAS AFFIDAVIT

This company, contractor, or subcontractor agrees to refrain from discrimination in terms and conditions of employment on the basis of race, color, religion, sex, physical handicap, or national origin, and agrees to take affirmative action as required by Federal Statutes and Rules and Regulations issued pursuant thereto in order to maintain and ensure nondiscriminatory employment practices.

| Si                               | gned:  |         |
|----------------------------------|--------|---------|
|                                  | pany:  |         |
| Address of Comp                  | pany:  |         |
|                                  |        |         |
| State of Texas                   |        |         |
| Sworn to and subscribed before 1 | ne at  |         |
| Texas, this the                  | day of | , 2006. |
|                                  |        |         |
| Notary Public for the State      |        |         |
| Of                               |        |         |

## ATTACHMENT NO. 10 BUSINESS QUESTIONNAIRE

| FIRM NAME:  |   |
|---|---|
| FIRM ADDRESS:   |   |
| TELEPHONE:  |   |
| FAX NUMBER:   |   |
| EMAIL ADDRESS:  |   |
| CONTACT PERSON'S NAME AND PHONE NO  | O. (Type or Print):   |
| SIGNATURE OF FIRM'S AUTHORIZED OFFIC  | CIAL:   |
| NAME AND TITLE (Type or Print):   |   |
| Do you or any officer, partner, owner, sales represe Community College System?  | entative and/or spouse work for the HoustonYesNo  |
| If yes, please specify:   |   |
| State in which your home office / headquarters is l                             | ocated?   |
| If headquarters is located out of state, does that sta If yes, list percentage% | te have preferential treatment on Bids?   |
| Name of Financial Institution   | Contact Person Title  |
| Please indicate how you became aware of this produced                           | curement? Source:   |
|   | ouston Star, African American News, etc.) Housto<br>Website, Chamber of Commerce, etc.) |

| TYPE OF ORGANIZATION  |                         |  |
|---|-------------------------|--|
| Individual Partnership  | Sole Propri Corporation | etorship<br>1, Incorporated in   |
| Federal Employer Identification N<br>Social Security Number, if an indi | lumber<br>vidual        |  |
| How long in business under preser<br>Number of persons now employed     | nt name                 |  |
| BUSINESS CLASSIFICATION   |                         |  |
| DBE Disadvantaged Busin WBE Women Owned Bus HUB Historically Underw     | siness Enterprise       | SB Small Business MBE Minority Business Enterprise Other:                        |
| of race, religion, nation   | •                       | tich does not discriminate on the basis<br>bility. HCC encourages small and<br>s |
| REFERENCES  |                         |  |
|   |                         | now your customer and at least one in to that specified in this solicitation.    |
| Name of Firm Address  | Point of Contact        | Telephone #  |
| 1   |                         |  |
| 2.  |                         |  |
| 3.  |                         |  |
| State of Texas  |                         |  |
| Sworn to and subscribed b   | pefore me at            |  |
| Texas, this the   | day of                  | , 2006   |
|   | Notary Pul              | plic for the State   |
|   | c.                      |  |

#### ASSURANCE OF SBDP GOAL

The undersigned certifies that he/she has read, understands and agrees to be bound by the small business provisions set forth in this Solicitation. The undersigned further certifies that he/she is legally authorized to make the statements and representations in the Solicitation and that said statements and representations are true and accurate to the best of his/her knowledge. The undersigned will enter into formal agreement(s) for work identified on the **CONTRACTOR AND FIRST TIER SUBCONTRACTOR PARTICIPATION** form conditioned upon execution of a contract with HCC. The undersigned agrees to attain the small business utilization percentages of the total offer amount as set forth below:

#### Small Business Participation Goal = BEST EFFORT

The undersigned certifies that the firm shown below has not discriminated against any small business or other potential subcontractor because of race, color, religion, gender, age, veteran's status, disability or national origin, but has provided full and equal opportunity to all potential subcontractors irrespective of race, color, religion, gender, age, disability, national origin or veteran status.

The undersigned understands that if any of the statements and representations are made knowing them to be false or there is a failure to implement any of the stated commitments set forth herein without prior approval of HCC's Chancellor or the duly authorized representative, the Bidder may be subject to the loss of the contract or the termination thereof resulting from this bid and could be ineligible for future HCC contract awards.

| Signature        |                 |
|------------------|-----------------|
| Title            | Date of Signing |
| Firm Name        |                 |
| Address          |                 |
|                  |                 |
| Telephone Number |                 |

#### ATTACHMENT NO. 12 HCCS VENDOR APPLICATION

The Houston Community College System Purchasing department has developed an online vendor application system. This system is designed to allow firms or individuals that are interested in doing business with HCC to register online and become part of our vendor database. Once registered, you will receive a password and personal login information that will allow you to modify your vendor information anytime a change occurs with your company. You will have the flexibility to add or delete commodity lines, update phone numbers and contact information, etc. This database will allow HCC to notify, via email, all companies that match the desired commodity criteria for procurement opportunities within Houston Community College System. What a great way to never miss out on an HCC bid or proposal opportunity again.

Please take a moment to go to the Houston Community College System Purchasing department website and register as a vendor. The website address to access the vendor registration form is <a href="http://216.119.142.201/HCCS/Supplier\_Registration\_Form.asp">http://216.119.142.201/HCCS/Supplier\_Registration\_Form.asp</a>

Once you have completed your application, please print out a copy of the completed application and submit it with your completed bid package. If you do not have internet access you are welcome to use a computer at any HCC library to access the website and register.

## ATTACHMENT NO. 13 HOUSTON COMMUNITY COLLEGE SYSTEM INSURANCE REQUIREMENTS

The insurance coverage and limits listed below are the minimum requirements that the vendor/contractor shall carry during performance of the contract for Emergency Medical Training Products (Installation) Services, Project No. 06-09

#### 1. Commercial General Liability for Bodily Injury/Property Damage Limits:

| • | Occurrence/Personal Injury/Advertising/Produ | icts/Completed     |
|---|--|--------------------|
| • | Operations                                   | \$1,000,000.CSL    |
| • | Annual Aggregate                             | \$2,000,000. CSL   |
| • | Products Aggregate                           | \$2,000,000. CSL   |
| • | Fire, Lightning or Explosion                 | \$1,000,000. CSL   |
| • | Medical Expense                              | \$5,000 Per Person |

#### 2. Automobile Liability:

• Bodily Injury/Property Damage \$1,000,000. CSL

#### 3. Workers' Compensation:

**a.** Part A – Statutory

**b.** Part B - \$1,000,000. Each Accident \$1,000,000. Policy Limits \$1,000,000. Each Employee

#### 4. Endorsements:

The following endorsements and other stated information is required on the original certificate of insurance:

- 90 days Notice of Cancellation;
- Houston Community College System be named as Additional Insured on all policies except Worker's Compensation;
- Waiver of Subrogation on all policies;
- The assigned project number and/or purchase order number.

#### 5. Submission of Certificate of Insurance:

The original certificate of insurance, indicating the coverage, limits and endorsements stated herein, shall be furnished to Houston Community College System within 14 calendar days after receipt of a written purchase order or some other duly executed contractual document. Mail the original certificate of insurance to:

Houston Community College System Risk Management Office Post Office Box 667517 (MC-1119) Houston, Texas 77266

## **Houston Community College System Purchasing Department**



# HOUSTON COMMUNITY COLLEGE SYSTEM SAMPLE CONTRACT DOCUMENTS FOR RADIOGRAPHY IMAGING SYSTEM

PROJECT NO. 06-14

#### SAMPLE CONTRACT EXHIBITS

#### **EXHIBIT A**

#### **BID/AWARD FORM**

(Attachment No. 1 will become Exhibit A in the resulting contract.)

#### **EXHIBIT B**

#### SCHEDULE OF ITEMS AND PRICES

(Attachment No. 2 will become Exhibit B in the resulting contract.)

#### **EXHIBIT C**

#### GENERAL TERMS AND CONDITIONS

#### 1. Contract Award

A response to the solicitation is an offer to contract with Houston Community College System ("HCC") based on the terms and conditions contained therein. Bids do not become contracts until they are accepted by HCC through issuance of written purchase orders or other duly executed documents.

#### 2. **Delivery Term**

The Delivery term shall be for thirty to sixty (30-60) days after receipt of a purchase order (A.R.O.), unless otherwise extended by Houston Community College System in accordance with the terms and conditions of this Contract.

#### 3. Interpretation, Jurisdiction and Venue

The Contract shall be construed and interpreted solely in accordance with the laws of the State of Texas. Venue of any suit, right or cause of action arising under or in connection with the contract shall be exclusively in Harris County, Texas.

#### 4. Compliance with Laws

The Contractor shall give all notices and comply with all Federal, State of Texas and local laws. Upon request, the Contractor shall furnish to HCC certificates of compliance with all such laws.

#### 5. Taxes

HCC is tax exempt as a governmental subdivision of the State of Texas under Section 501C (3) of the Internal Revenue Code. Limited Sales Tax Number: 1-74-1709152-1.

#### 6. Termination for Convenience

HCC may, at its option and discretion, terminate or reduce the statement of work or other requirements of the contract at any time, without any default on the part of the contractor, by giving thirty (30) calendar days written notice thereof to the Contractor.

#### 7. Termination for Default

HCC may terminate the contract immediately for default, by giving written notice thereof to the Contractor, if the Contractor neglects to execute the work properly; performs in an unsatisfactory manner or fails to perform any provisions of the contract. In the event of termination for default, HCC shall have against the Contractor, all remedies provided by law and equity.

#### 8. Ethics Conduct

Any direct or indirect actions taken to unduly influence competitive purposes, to circumvent equal consideration for competitive bidders, or to disregard ethical and legal trade practices will disqualify vendors and contractors from current and future consideration for participation in HCC orders and contracts.

#### 9. Small Business Development Program (SBDP)

• The Contractor hereby agrees to put fort it's BEST EFFORT to attain small business participation under this contract.

#### 10. Small Business Compliance Review

To ensure compliance with the stated small business participation goal of this contract, the Contractor shall meet with the procurement staff member responsible for the project at the 50% and 75% completion phase to verify small business participation activity.

#### 11. Changes

HCC shall have the right, at any time, to make changes within the scope of the contract. If such change causes a material increase in the contractor's cost and/or the time for performance, the Contractor shall so notify HCC in writing within ten (10) calendar days from the date of the contractor's receipt of the notice of change, and an equitable adjustment in the price and/or the time of performance shall be mutually agreed upon between the parties. No such change shall be effective in the absence of express written direction of HCC.

#### 12. <u>Insurance Requirements</u>

The Contractor agrees to comply with the insurance requirements contained herein, if any.

#### 13. **Indemnification**

The Contractor shall hold HCC, its agents, employees, trustees and other officers harmless from any claim or liability asserted against it by reason of the negligence of the Contractor, its agents, servants and employees in the performance of the Contract.

#### 13. **Independent Contractor**

It is agreed and understood that the Contractor shall be deemed to be an independent contractor in all its operations and activities hereunder; that the employees furnished by the Contractor to perform the services required by the contract shall be deemed to be Contractor's employees or independent subcontractors; that the Contractor's employees shall be paid by the Contractor; and the Contractor and its employees shall be responsible for all obligations and reports covering social security, unemployment insurance, income tax, and other reports and deductions required by State and Federal law.

#### 15. Assignment

The Contractor may not assign or transfer any of its rights, duties or obligations under this Agreement, in whole or in part, without the prior written consent of HCC. This Contract shall inure to the benefit of, and be binding upon, the parties hereto and their respective successors and permitted assigns.

#### 16. Drug Policy

HCC is a drug-free workforce and workplace. The manufacture, sale, distribution, dispensation or use of illegal drugs or alcohol by the Contractor or its employees while on HCC's premises is strictly prohibited. Any violation of this provision by the Contractor or its employees will be considered a breach of contract by the Contractor.

#### 17. Notices

All notices hereunder by either party to the other shall be in writing, delivered personally, by certified or registered mail, return receipt requested, or by overnight courier, and shall be deemed to have been duly given when delivered personally or when deposited in the United States mail, postage prepaid addressed as follows:

| <b>Houston Community College System:</b>       | Contractor: |  |
|--|-------------|--|
| Purchasing Department (11 <sup>th</sup> Floor) |             |  |
| 3100 Main Street                               |             |  |
| Houston, Texas 77002                           |             |  |
| ATTN: Michael Kyme,                            | ATTN:       |  |
| Executive Director, Procurement Operations     |             |  |

#### 18. Entire Agreement

This Contract and its accompanying exhibits contain the entire understanding of the parties regarding the services or materials provided and supersede all prior agreements, oral or written, and all other communications between the parties relating to the subject matter. This Agreement may not be amended or modified, except by mutual written agreement between the parties hereto.

#### 19. **Invoicing and Payment**

The Contractor shall submit an original invoice to the address shown below for the goods or services which have been inspected and accepted by HCC:

Houston Community College System
Accounts Payable
P.O. Box 667460
Houston, Texas 77266-7460
Reference: Project No. 06-14 and Purchase Order No. \_\_\_\_\_\_

Generally, payment will be made within thirty (30) calendar days after receipt of a properly prepared invoice or acceptance of the goods or services, whichever is later. Payment shall be considered made when HCC deposits the Contractor's payment in the mail or the date on which an electronic transfer of funds occurs.

Project No. 06-14 EXHIBIT D

#### CONTRACTOR AND FIRST TIER SUBCONTRACTOR/SUPPLIER PARTICIPATION

Bidder/offerer presents the following participants in this solicitation and any resulting Contract. All bidders / offerers, including small businesses bidding as prime contractors, are required to demonstrate good faith efforts to include eligible small businesses in their bid submissions as subcontractors and/or suppliers.

|                   |                |  | Indicate if Small             | Percentage of   |       |
|-------------------|----------------|--|-------------------------------|-----------------|-------|
| CONTRACTOR        |                | Type of Work to be Performed or Materials Supplied | Business, DBE, HUB, MBE, etc. | Contract Effort | Price |
| Business Name:    |                |  |                               |                 |       |
| Business Address: |                |  |                               |                 |       |
| Telephone No.:    |                |  |                               |                 |       |
| Contact Person:   |                |  |                               |                 |       |
| SUBCONTRACTORS    |                |  |                               |                 |       |
| Business Name:    |                |  |                               |                 |       |
| Business Address: |                |  |                               |                 |       |
| Telephone No.:    |                |  |                               |                 |       |
| Contact Person:   |                |  |                               |                 |       |
| Business Name:    |                |  |                               |                 |       |
| Business Address: |                |  |                               |                 |       |
| Telephone No. :   |                |  |                               |                 |       |
| Contact Person:   |                |  |                               |                 |       |
| SUPPLIERS         |                |  |                               |                 |       |
| Business Name:    |                |  |                               |                 |       |
| Business Address: |                |  |                               |                 |       |
| Telephone No. :   |                |  |                               |                 |       |
| Contact Person:   |                |  |                               |                 |       |
| Business Name:    |                |  |                               |                 |       |
| Business Address: |                |  |                               |                 |       |
| Telephone No. :   |                |  |                               |                 |       |
| Contact Person:   |                |  |                               |                 |       |
| Submitted by:     | Business Name: |  | TOTAL                         | <b>.</b> \$     |       |
| Address:          |                |  | Contractor                    | r\$             |       |
| Telephone/Fax:    | Date:_         | Subcontractor(s) \$                                |                               |                 |       |
|                   |                |  | Supplier (s):                 | : \$            |       |

#### **EXHIBIT E**

#### HOUSTON COMMUNITY COLLEGE SYSTEM SUBCONTRACTOR / SUBCONSULTANT / SUPPLIER PAYMENT CERTIFICATION

#### Project No. 06-14

(This form is to be completed by the Subcontractor/Subconsultant or Supplier for each payment received from the Prime Contractor/Consultant.)

| (Time form is to be completed by the succentration succentration                                    | as of Supplier for each payment received from the Timbe Contractor, Co |
|---|--|
| NAME OF FIRM:   |  |
| ADDRESS:  |  |
|   |  |
| The above firm is a: (check one)  |  |
| Subcontractor Subconsultant Supplier  |  |
| I hereby certify that the above firm has received payment on  | from in the amount of  |
| \$ as full payment of our invoice dated<br>during under subject Contract/Project No.  (Time Period) | for work performed or materials provided                               |
| (To be signed by Officer of the Firm)   |  |
| Signature   | <u>Please Mail This Form To:</u><br>Houston Community College System   |
| Printed or Typed Name   | Purchasing Department<br>3100 Main Street, (11 <sup>th</sup> Floor)    |
| Title   | Houston, TX 77002<br>Attn: Georgia Coats, Senior Buyer                 |

#### **EXHIBIT F**

#### HOUSTON COMMUNITY COLLEGE SYSTEM

#### PROGRESS ASSESSMENT REPORT OF WORK SUBCONTRACTED

| Reporting Period: From                                |                                      | To  |  |  |
|---|--------------------------------------|---|--|--|
| Consultant / Contractor                               |                                      | Project No.                               | 06-14                                      |  |
| Total Contrac   | et Amount (Prime Contractor)         | : \$                                      |  |  |
| Subconsultant / Subcontractor / Supplier (Name)       | Total Subcontract Amount             | Amount Paid This Period                   | Total Paid to Date                         |  |
| , ,   | \$                                   | \$  | \$   |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
|   |                                      |   |  |  |
| I hereby certify that                                 | has made timely neyments             | from proceeds of prior payments, and wi   | Ill make payments within five (5) calendar |  |
| (Prime Contractor)                                    | has made unlery payments             | from proceeds of prior payments, and wi   | in make payments within five (3) calendar  |  |
| days of receipt of funds now due from HCC to our sub- | contractors and suppliers in accorda | ance with contractual arrangements with t | hem.                                       |  |
| To be reported monthly:                               |                                      |   |  |  |
| Name:   | M                                    | ail This Form To:                         |  |  |
| Signature:  |                                      | ouston Community College Syste            | em   |  |
| Title:  | _ Pu                                 | irchasing Department                      |  |  |
| Phone:  | _ 31                                 | 00 Main Street, (11 <sup>th</sup> Floor)  |  |  |
| Date:   |                                      | ouston, TX 77002                          | · · · · · · · · · · · · · · · · · · ·      |  |
|   | At                                   | tn: Georgia Coats, Senior Buyer           | r  |  |

# EXHIBIT G INSURANCE REQUIREMENTS HOUSTON COMMUNITY COLLEGE SYSTEM INSURANCE REQUIREMENTS

The insurance coverage and limits listed below are the minimum requirements that the vendor/contractor shall carry during performance of the contract for Emergency Medical Training Products (Installation) Services, Project No. 06-09

#### 1. Commercial General Liability for Bodily Injury/Property Damage Limits:

• Occurrence/Personal Injury/Advertising/Products/Completed

| • | Operations                   | \$1,000,000.CSL    |
|---|------------------------------|--------------------|
| • | Annual Aggregate             | \$2,000,000. CSL   |
| • | Products Aggregate           | \$2,000,000. CSL   |
| • | Fire, Lightning or Explosion | \$1,000,000. CSL   |
| • | Medical Expense              | \$5,000 Per Person |

#### 2. Automobile Liability:

• Bodily Injury/Property Damage \$1,000,000. CSL

#### 3. Workers' Compensation:

**c.** Part A – Statutory

**d.** Part B - \$1,000,000. Each Accident \$1,000,000. Policy Limits \$1,000,000. Each Employee

#### 4. Endorsements:

The following endorsements and other stated information is required on the original certificate of insurance:

- 90 days Notice of Cancellation;
- Houston Community College System be named as Additional Insured on all policies except Worker's Compensation;
- Waiver of Subrogation on all policies;
- The assigned project number and/or purchase order number.

#### 5. Submission of Certificate of Insurance:

The original certificate of insurance, indicating the coverage, limits and endorsements stated herein, shall be furnished to Houston Community College System within 14 calendar days after receipt of a written purchase order or some other duly executed contractual document. Mail the original certificate of insurance to:

Houston Community College System Risk Management Office Post Office Box 667517 (MC-1119) Houston, Texas 77266