

BID RESPONSE PACKET
SEAIFB-21-01
Truck Driving Simulator

BID CHECKLIST

Completed and Signed Bid Signature Page	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exceptions Form, if applicable	<input type="checkbox"/> Yes <input type="checkbox"/> N/A
Official Solicitation Price Sheet	<input type="checkbox"/> Yes <input type="checkbox"/> No
Copy of Company's Equal Employment Opportunity Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No
Restriction of Boycott of Israel Form	<input type="checkbox"/> Yes <input type="checkbox"/> No
Company W-9	<input type="checkbox"/> Yes <input type="checkbox"/> No
EO 98-04 (Contract and Grant) Disclosure Form	<input type="checkbox"/> Yes <input type="checkbox"/> No

The Israel Boycott Restriction and Contract and Grant Disclosure Forms can be found online at <https://www.transform.ar.gov/procurement/vendors/forms-and-reporting/>.

A W-9 Form is available at <https://www.seark.edu/sites/default/files/2020-08/W9%20Form.pdf>.

EXCEPTIONS FORM

Prospective Contractor should document all exceptions related to terms in the “Standard Contract” and “Solicitation Terms and Conditions.”

ITEM #	REFERENCE (SECTION, PAGE, PARAGRAPH)	DESCRIPTION	PROPOSED LANGUAGE
1.			
2.			
3.			

BID SIGNATURE PAGE

Type or print the following information:

PROSPECTIVE CONTRACTOR'S INFORMATION			
Company:			
Address:			
City:		State:	
		Zip Code:	
Business Designation:	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Public Service Corp
	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Nonprofit
Minority and Women-Owned Designation*:	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> American Indian	<input type="checkbox"/> Service Disabled Veteran
	<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic American	<input type="checkbox"/> Women-Owned
	<input type="checkbox"/> Asian American	<input type="checkbox"/> Pacific Islander American	
	AR Certification #: _____		* See <i>Minority and Women-Owned Business Policy in Solicitation Terms and Conditions</i>

PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for bid solicitation-related matters.</i>			
Contact Person:		Title:	
Phone:		Alternate Phone:	
Email:			

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> 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.
<i>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 Solicitation Terms and Conditions for additional information.</i>

ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Bid Solicitation</i> , Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants and shall not employ or contract with illegal immigrants during the term of a contract awarded as a result of this bid solicitation.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, Prospective Contractor agrees and certifies that they do not boycott Israel and shall not during the aggregate term of a contract awarded as a result of this bid solicitation.
<input type="checkbox"/> Prospective Contractor does not and shall not boycott Israel.

An official authorized to legally bind the Prospective Contractor must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* may cause the Prospective Contractor's proposal to be rejected.

Authorized Signature: _____ **Title:** _____
Use ink only.

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

OFFICIAL SOLICITATION PRICE SHEET

ITEM	MATERIAL/DESCRIPTION	QTY	UM	UNIT PRICE	EXTENDED PRICE
1.	Truck Driving Simulator	1	Each	\$ _____	\$ _____
2.	Freight/Delivery Charge	1	Each	\$ _____	\$ _____

*** DO NOT INCLUDE SALES TAX IN PRICE.**

Total Bid Price: \$ _____

Additional itemized specification information and/or cost breakdown may be included following this page in bid submission.

Per IFB item 1.6:

The agency requests delivery within sixty (60) to one hundred twenty (120) calendar days after receipt of the order. If this delivery date cannot be met, the Prospective Contractor **shall** state below the alternate number of days required to begin the service and/or place the commodity in the ordering agency's designated location. Failure to state the alternate delivery time obligates the Contractor to complete delivery by the agency's requested date. Extended delivery dates may be considered when in the best interest of the State.

Alternate Delivery: _____ days after receipt of order.