

Department of Purchasing & Contracting 1300 Commerce Drive, 2<sup>nd</sup> Floor Decatur, Georgia 30030 Fax: (404) 371-7006

Date: January 2, 2019

### **Request for Quotation No. 19-3003718**

#### DIGITAL PROJECTOR FOR POLICE SERVICES EMERGENCY OPERATIONS CENTER

DeKalb County, Georgia is requesting a quotation for the following:

#### Digital Projectors for DeKalb County Police Services Emergency Operations Center

#### I. Proposed Term:

Thirty (30) Calendar Days

#### II. Attachments:

- A. Scope of Work /Minimum Specifications/ Quote Form
- B. Reference Form and Reference Check Release Statement
- C. Bidder Affidavit
- D. Insurance Requirements if applicable

#### III. Payment Terms:

Net 30

#### IV. Scope of Work:

See Attachment A

#### V. Federal Work Authorization Program:

All qualifying contractors and subcontractors performing work with DeKalb County, Georgia must register and participate in the federal work authorization program to verify the work eligibility information of new employees. In order for a Quotation to be considered, it is mandatory that the Bidders Affidavit, Attachment C, be completed with bidder's proposal.

#### VI. Due Date:

# All questions are due to Jenifer Chapital via email at <u>JChapital@dekalbcountyga.gov</u> on or before 5:00 p.m. EST on Monday, January 6, 2020.

Quotes are due on or before 5:00 p.m. Wednesday, January 8, 2020. Bidder must complete and return the quote form, reference form, bidder affidavit and provide a copy of Bidder's valid business license to DeKalb County by email to the attention of Jenifer Chapital or email to JChapital@dekalbcountyga.gov.

#### All quotes are to be provided on Attachment A, Quote Form.

Thank you for your interest in doing business with DeKalb County.

Sincerely,

Jenifer Chapital Procurement Technician Department of Purchasing and Contracting

Attachments

#### ATTACHMENT A

#### Scope of Work / Minimum Specifications / Quote Form

#### Minimum Specifications:

- 10,000 Lumens minimum
- 1920X1080 pixels minimum
- Aspect Ratio of 16:9
- Lens
- Associated cables, connectors, hardware, switches, relays, terminal blocks, panels, etc.
- On-site Installation
- Programming/Development Input new codes for new projectors

| Description       | Estimated<br># of Units | Unit      | Unit Price |
|-------------------|-------------------------|-----------|------------|
| Digital Projector | 2                       | Each      | \$         |
| Manufacturer:     |                         |           |            |
| Model:            |                         |           |            |
| Description:      |                         |           |            |
| Freight           |                         |           | \$         |
|                   | Т                       | otal Cost |            |

The responder, declares that he has carefully examined, RFQ#19-3003718, Digital Projector, the Scope of Work contained, and that he proposes and agrees that if his quote is accepted, to provide the necessary services and will furnish all materials and labor specified in the RFQ, necessary to complete the Work in the manner therein specified within the time specified, as therein set forth for the following monthly amount which sum is hereinafter referred to as the "Total Quote."

|  | Total Quote § |  |
|--|---------------|--|
| (State amount in writing on this line) | (In figures)  |  |

#### ATTACHMENT B

#### **Reference Form and Reference Check Release Statement**

List below at least two (2) references, including company name, contract period, contact name, email address, telephone numbers and project name of individuals who can verify your experience and ability to perform the type of services listed in the solicitation.

| Company Name                  |                 | Contract Period          |
|-------------------------------|-----------------|--------------------------|
| Contact Person Name and Title | Teleph<br>code) | one Number (include area |
| Email Address                 |                 |                          |
| Project Name                  |                 |                          |

| Company Name                  |                 | Contract Period           |  |
|-------------------------------|-----------------|---------------------------|--|
| Contact Person Name and Title | Teleph<br>code) | none Number (include area |  |
| Email Address                 | <u> </u>        |                           |  |
| Project Name                  |                 |                           |  |

#### **REFERENCE CHECK RELEASE STATEMENT**

You are authorized to contact the references provided above for purposes of this RFQ.

| Signed                           |      |  |
|----------------------------------|------|--|
| Title                            |      |  |
| (Authorized Signature of Bidder) |      |  |
| Company Name                     | Date |  |

#### ATTACHMENT C

#### **BIDDER AFFIDAVIT**

By executing this affidavit, the undersigned verifies its compliance with O.C.G.A. § 13-10-91, as amended, stating affirmatively that the bidder submitting a bid, contractor, firm or corporation which is contracting with DEKALB COUNTY, GA, a political subdivision of the State of Georgia, has registered with and is participating in a federal work authorization program\* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603, in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91, as amended]. The affiant agrees to continue to use the federal work authorization program throughout the contract period.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with the COUNTY, contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 13-10-91, as amended, on the Subcontractor Affidavit form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the COUNTY, within five (5) days from when the subcontractor(s) is retained to perform such service.

| BY: | Authorized Officer or Agent |
|-----|-----------------------------|
|     | (Bidder's Name)             |

Federal Work Authorization Enrollment Date

Title of Authorized Officer or Agent of Bidder

Identification Number

Printed Name of Authorized Officer or Agent

Company Name & Address (do not include a post office box)

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_

Notary Public My Commission Expires: \_\_\_\_\_

Purchasing & Contracting Form No. 25, 7/28/00

#### ATTACHMENT D

#### **INSURANCE REQUIREMENTS**

#### **IMPORTANT NOTICE**

### IMPORTANT — PLEASE READ CAREFULLY & FOLLOW INSTRUCTIONS LISTED HEREIN

- A. The Contractor shall, without expense to the County, provide certificates of insurance, and copies of signed insurance policies including declarations pages from companies that are authorized to engage in the insurance business in the state of Georgia and are otherwise acceptable to the County Finance Director or his/her designee, attached hereto as Attachment H. Such insurance shall be placed with admitted insurers that maintain an A.M. Best's rating of not less than A (Excellent) with a Financial Size Category of VII or better with coverage forms acceptable to Contractor. The insurance described below shall be maintained uninterrupted for the duration of the project, including any warranty periods, and shall protect Contractor, and others as required by contract, for liabilities in connection with work performed by or on behalf of Contractor, its agents, representatives, employees or Contractors.
  - (1) *Workers Compensation Insurance*. Statutory workers compensation insurance is to be provided in compliance with the requirements of Georgia law with limits not less than the following:

Employer's liability insurance by accident, each accident\$1,000,000Employer's liability insurance by disease, policy limit\$1,000,000Employer's liability insurance by disease, each employee\$1,000,000

## (2) *Commercial General Liability Insurance*. Commercial general liability insurance is to be provided with limits not less than the following:

\$1,000,000 per occurrence for bodily injury and property damage liability
\$1,000,000 personal and advertising injury liability
\$2,000,000 general aggregate
\$2,000,000 products-completed operations aggregate
\$100,000 damage to rented premises (each occurrence)
\$5,000 medical expense (any one person)

(3) Umbrella or Excess Insurance. Umbrella or excess insurance is to be provided with General Liability, Auto Liability and Employers Liability scheduled as underlying policies with limits not less than the following:

\$5,000,000 per occurrence \$5,000,000 aggregate

- (4) Comprehensive Automobile Liability Insurance. Comprehensive automobile liability insurance with form coverage is to be provided for all owned, non-owned and hired vehicles with combined single limit of \$1,000,000. Automobile liability insurance shall be written on ISO Business Auto Coverage Form CA 0001 (1990 edition or later), or a substitute form providing equivalent coverage, and shall cover liability for bodily injury and property damage arising from the use or operation of any automobile, including those owned, hired or otherwise operated or used by or on behalf of Contractor. The policy must include Broadened Pollution Liability Endorsement CA9948 12 93.
- (5) Builder's Risk Insurance Coverage (If Applicable). DeKalb County shall procure and maintain Builders Risk Insurance on the entire work which provides "All-risk" form that shall at least include insurance for physical loss or damage to the Work, temporary buildings, falsework, and materials and equipment in transit, and shall insure against at least the following perils or causes of loss: fire, lightning, extended coverage, theft, vandalism, malicious mischief, earthquake, collapse, debris removal, demolition occasioned by enforcement of Laws and Regulations, water damage (other than caused by flood), and such other perils or causes of loss as may be specifically required by Supplementary Conditions) until Final Completion and Acceptance of the Project. Such policy of insurance shall contain at least the following sub-limits of insurance and deductibles:

| Sub-limits:                         |                              |
|-------------------------------------|------------------------------|
| Property in Transit                 | \$1,000,000                  |
| Property in Offsite Storage         | \$1,000,000                  |
| Plans & Blueprints                  | \$25,000                     |
| Debris Removal                      | 25% of Insured Physical Loss |
| Delay in Completion / Soft Cost     | TBD                          |
| Ordinance of Law (Increased Cost of | \$1,000,000                  |
| Construction)                       |                              |
| Flood and Earthquake                | TBD – Full Contract Value    |
| Deductibles:                        |                              |
| Flood and Earthquake                | \$25,000                     |
| Water Damage other than Flood       | \$100,000                    |
| All other Perils                    | \$10,000                     |

D. The County, its elected officials, officers, employees and agents, hereinafter referred to in this article and in the article entitled "Certificates of Insurance" as "the County and its officers" are to be named as additional insured on all policies of insurance except worker's compensation insurance with no cross suits exclusion. The County and its officers shall be included as additional insureds under commercial general liability and commercial umbrella insurance, for liabilities arising out of both the ongoing and completed operations of Contractor.

Such additional insured coverage shall be endorsed to Contractor's policy by attachment of ISO Additional Insured Endorsement forms CG 20 10 10 01 (ongoing operations) and CG 20 37 10 01 (products-completed operations), or form(s) providing equivalent coverage.

- E. All coverages required of the Contractor will be primary over any insurance or self-insurance program carried by the County.
- F. If the Contractor is a joint venture involving two (2) or more entities, then each independent entity will satisfy the limits and coverages specified here or the joint venture will be a named insured under each respective policy specified.
- G. In addition to procuring and maintaining commercial general liability insurance, automobile liability and commercial umbrella insurance, for the Contract Term, Contractor shall continue to procure and maintain the products-completed operations liability insurance coverage and commercial umbrella insurance after the Work is substantially complete for the entire Contract Term or for the applicable five-year statutory limitation, whichever is greater. For such period of time, all terms and conditions of such coverage shall remain unchanged, including the limits specified herein and the requirement to provide the County with coverage as an additional insured.
- H. Contractor agrees to waive all rights of subrogation and other rights of recovery against the County and its officers and shall cause each Subcontractor to waive all rights of subrogation for all coverage.
- I. Failure of the County to demand such certificate or other evidence of full compliance with these insurance requirements or failure of the County to identify a deficiency from evidence provided will not be construed as a waiver of the Contractor's obligation to maintain such coverage.
- J. Contractor understands and agrees that the purchase of insurance in no way limits the liability of the Contractor.

#### **CERTIFICATES OF INSURANCE**

- A. Certificates shall state that the policy or policies shall not expire, be cancelled or altered without at least sixty (60) days prior written notice to the County. Policies and Certificates of Insurance listing the County and its officers as additional insureds (except for workers' compensation insurance) shall conform to all terms and conditions (including coverage of the indemnification and hold harmless agreement) contained in this Contract.
- B. The Contractor agrees to name the County and its officers as additional insured on the commercial general liability insurance, using the ISO Additional Insured Endorsement forms CG20101001 (ongoing operations) and CG20371001 (products-completed operations) forms, or form(s) providing equivalent coverage.

- C. Certificates of Insurance must contain the policy number, policy limits, and policy expiration date of all policies issued in accordance with this Contract; the location and operations to which the insurance applies. Certificates must be provided annually for the duration of the project. If applicable, a specific statement must be included that blasting coverage is included to the extent such risk is present; that Contractor's protective coverage applies to any Subcontractor's operations; and Contractor.
- D. This insurance for the County as the additional insured shall be as broad as the coverage provided for the named-insured Contractor. It shall apply as primary insurance before any other insurance or self-insurance, including any deductible, non-contributory, and waiver of subrogation provided to the County as the additional insured.
- E. The Contractor shall be wholly responsible for securing certificates of insurance coverage as set forth above from all Subcontractors who are engaged in the Work.
- F. If the County shall so request, the Contractor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies.
- G. Contractor shall be responsible and have the financial wherewithal to cover any deductibles or retentions included on the certificate of insurance.
- H. Such certificates should be sent to the County and must identify the "Certificate Holder" as follows:

DeKalb County, Georgia Director of Purchasing & Contracting The Maloof Center 1300 Commerce Drive, 2<sup>nd</sup> Floor Decatur, Georgia 30030