SPECIFIC SPECIFICATIONS AND SPECIAL CONDITIONS

EVENT # 5871 PERSONAL PAPER PRODUCTS

4.0 The purpose of these specifications is to describe requirements for personal paper and janitorial products to be delivered to the City of Savannah.

To submit pricing electronically for this event, enter pricing for each line item shown under the lines tab on the event summary. To enter pricing manually, complete the attached bid proposal form. **All items bid must have manufacturer's submittal sheet attached.**

4.1 Detailed Specifications:

4.1.1 Document describes various paper/janitorial products as follows:

A. Cone Paper Cups  E. Degreaser/Cleanser
B. Roll Towels   F. Mop-heads
C. Multi-fold towels  G. Corn Brooms
D. Bathroom Tissue

4.1.2 **Paper Cups** (cone cups)

<table>
<thead>
<tr>
<th>Specification</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size</td>
<td>4 ounces</td>
</tr>
<tr>
<td>Model No</td>
<td>4R-2050</td>
</tr>
<tr>
<td>Shape</td>
<td>Cone, with rolled rim</td>
</tr>
<tr>
<td>Usage</td>
<td>Drinking</td>
</tr>
<tr>
<td>Quantity</td>
<td>20 cases (estimated). Minimum of 5,000 per case</td>
</tr>
</tbody>
</table>

4.1.3 **Paper Roll Towels** (Recycled)

<table>
<thead>
<tr>
<th>Specification</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brand Name</td>
<td>SCA or equal</td>
</tr>
<tr>
<td>Model No</td>
<td>SC RK-800 E</td>
</tr>
<tr>
<td>Case Weight</td>
<td>25 pounds minimum</td>
</tr>
<tr>
<td>Width</td>
<td>7 1/2 inches minimum</td>
</tr>
<tr>
<td>Length</td>
<td>800 feet per roll minimum or 4800 feet per case</td>
</tr>
<tr>
<td>Color</td>
<td>Unbleached</td>
</tr>
<tr>
<td>Core</td>
<td>1 3/4 inches minimum</td>
</tr>
<tr>
<td>Quantity</td>
<td>400 cases (estimated)</td>
</tr>
<tr>
<td>Post-Consumer Waste</td>
<td>Minimum 40%</td>
</tr>
</tbody>
</table>

4.1.4 **White multi-fold recycled paper towels**

<table>
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<tr>
<th>Specification</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brand Name</td>
<td>SCA or equal</td>
</tr>
<tr>
<td>Model No</td>
<td>MB540A</td>
</tr>
<tr>
<td>Case Weight</td>
<td>19 pounds minimum</td>
</tr>
<tr>
<td>Case Count</td>
<td>16 per case, minimum 250 towels per package,</td>
</tr>
</tbody>
</table>
4.1.5 **Bathroom Tissue Regular**: Minimum 2-ply facial quality bathroom tissue.

- **Brand Name**: Atlas
- **Model No**: Atlas 280
- **Case Weight**: 35 pounds minimum
- **Case Count**: 80 rolls
- **Dimensions**: 4.5 inches x 4.5 inches, 500 2-ply sheets per roll
- **Color**: White
- **Post-Consumer Waste**: Minimum 40%

4.1.6 **Bathroom Tissue Jumbo**: Minimum 2-ply recycled facial quality bathroom tissue.

- **Brand Name**: Cascade Décor or equal
- **Model No**: 4097
- **Case Weight**: 26 pounds minimum
- **Case Count**: 12 rolls
- **Dimensions**: 3 3/8 inches x 1000 feet
- **Color**: White
- **Post-Consumer Waste**: Minimum 40%

4.1.7 Paper qualities must be consistent with the above mentioned brand. Texture and softness shall be a consideration in the award on towels and tissue. These qualities must be consistent with the above mentioned brand. The City will be the sole judge in the matter.

4.1.8 **Heavy Duty Cleaner and Degreaser**: For use in cleaning and degreasing kitchen floors and equipment, removing grease and residue from concrete, ceramic tile, wood, glass and plastic. Also for use on aluminum, tin, zinc (galvanized) and other ferrous metals. Product should contain **no solvents**. Non-flammable and bio-degradable. Product supplied in 5-gallon pails. National Chem Lab or equal.

Technical specifications being not less than:

- **Ph (1.16) dilution**: 12.2 \( \% \) /02%
- **Abrasives**: None
- **Phosphates, NTA, enzymes**: None
- **Biodegradable**: Yes
- **Flash Point (ASTMD92)**: None
- **Specific Gravity @ 60\(^\circ\)F**: 1.045

4.1.9 **Cotton Mop Heads**: Heavy Duty, stirrup type-Greenwood or equal.

- **Sizes**: a. True 16 ounces
  b. True 24 ounces
  c. True 32 ounces

4.1.10 **Corn Brooms**: Heavy duty, warehouse-type, wire-bound at handle, with four (4) sews 32 pounds, all corn.
4.2 Special Conditions:

4.2.1 Successful bidder shall be required to maintain in stock, at all times, a minimum of:

- Paper Cups-3 cases
- Paper Roll Towels-50 cases
- Multi-Fold Towels-100 cases
- Bathroom Tissue-50 cases
- Bathroom Tissue Jumbo-50 cases
- Heavy Duty Degreaser/Cleaner-50 gallons
- Corn Brooms-96 ea.
- Cotton Mop Heads -16 ounces - 48 ea.
  24 ounces - 48 ea.
  32 ounces - 48 ea.

4.2.3 Upon request, a sample must be submitted if brand other than specified is bid. Requested samples must be received by the City no later than seven (7) days after the request is made. Sample of items requested will be required of vendor prior to award to ensure items meet bid specifications.

4.2.4 Orders shall be delivered within three (3) days of date ordered. If a partial shipment is made, the balance shall be delivered within five (5) days or a 10% penalty fee will be deducted from invoice if product is not received after five (5) days of order.

4.2.5 Inside delivery will be required. Delivery of paper towels and tissue must be on pallets.

4.2.6 Prices quoted shall be F.O.B. Central Warehouse, 1100 W. Gwinnett Street Bldg. C, Savannah, GA 31415. Quantities given are estimates only. The City reserves the right to purchase more or less than the estimated quantities.

4.3 Basis of Award:

4.3.1 Award will be made to the vendor offering the lowest net cost to the City who meets or exceeds these specifications.

4.3.2 The City of Savannah reserves the right to split this award if deemed in the City's best interest.

5.0 General Specifications:

5.1 The bid response must include the following documents in this order.

- Bid Proposal
- Exception Sheet
- Non-Discrimination Statement
- Proposed Schedule of DBE Participation
- Other requested submittals as stated

All referenced documents must be completed and returned in their entirety to constitute a complete bid.

5.2 Bids may be submitted manually to the address listed in the bid documents or electronically via the supplier portal in sufficient time to ensure receipt by the Purchasing Department on or
before 1:30 P.M. on the date specified in the web page listing for this event. Requested documentation may be attached to the bidder’s response. A supplier guide for assistance in submitting responses can be found by clicking on the Important Documents tab of the Purchasing SavEPro webpage at: http://www.savannahga.gov/index.aspx?NID=590 before 1:30 P.M. on the date specified in the web page listing for this event. Requested documentation may be attached to the bidder’s response.

5.3 To submit and be awarded bids, vendors must be registered as suppliers on the City of Savannah’s website at www.savannahga.gov.

5.4 Bidders must provide the manufacturer’s name and part number of each item bid in the space provided on the bid form.

5.5 Original invoices shall be mailed to:

City of Savannah
Accounts Payable Dept.
P.O.1027
Savannah, GA 31402

5.6 The successful vendor must have the following items on every invoice to the City:
A) The exact description of the purchased item as described in this contract,
B) The unit price of the item, and
C) The total of the invoice.

5.7 This is an annual contract and prices are to be held firm. The first term shall begin on the date of award and end on December 31, 2018. All renewal options if exercised shall begin on January 1st and shall end on December 31st of each subsequent year. This agreement may be renewed for up to two (2) additional twelve (12) month periods, if all contracting parties so agree and services provided by the vendor have been satisfactory.

5.8 Vendor is responsible for determining and acknowledging any addenda issued in connection with this bid solicitation.

5.9 Those intending to respond to this event, their employees, agents and attorneys, shall not make contact with City Council members or with City staff outside of the Purchasing Department during the bidding process and evaluation phase.
BID PROPOSAL FORM

(SUBMIT AS THE COVER SHEET)

City of Savannah Purchasing Department
3rd Floor, City Hall
P. O. Box 1027
Savannah, Georgia 31402

ATTN: Purchasing Director

EVENT NUMBER: 5871

Business Location: (Check One)

_____ Chatham County

_____ City of Savannah

_____ Other

ALL BIDDERS MUST BE REGISTERED VENDORS ON THE CITY’S WEBSITE TO BE AWARDED AN EVENT. PLEASE REGISTER AT WWW.SAVANNAHGA.GOV.

Name of Bidder: ______________________________________________________

Street Address: ______________________________________________________

City, State, Zip Code: ________________________________________________

Phone: ___________________ Fax: ________________________________

Email: _______________________________

DO YOU HAVE A BUSINESS TAX CERTIFICATE ISSUED IN THE STATE OF GEORGIA? (CHECK ONE)  YES: ________ NO: ________

FROM WHAT CITY/COUNTY __________________

TAX CERTIFICATE #: ___________   FED TAX ID #: ________________

INDICATE LEGAL FORM OF OWNERSHIP OF BIDDER (STATISTICAL PURPOSES ONLY): CHECK ONE:  ______ CORPORATION   ______ PARTNERSHIP

______ INDIVIDUAL   ______ OTHER (SPECIFY: ___________)

INDICATE OWNERSHIP STATUS OF BIDDER
(CHECK ONE):

_____ NON-MINORITY OWNED       _____ ASIAN AMERICAN

_____ AFRICAN AMERICAN                _____ AMERICAN INDIAN

_____ HISPANIC                                     _____ OTHER MINORITY (describe) _________

_____ WOMAN (non-minority)

Do you plan to subcontract any portion of this project? Yes____   No _____

If yes, please complete the attached schedule of DBE participation. Also complete the schedule if you will be using any DBE suppliers.
ADDENDA ACKNOWLEDGEMENT
My signature below confirms my receipt of all addenda issued for this proposal.

________________________________
Signature

*This acknowledgement is separate from my signature on the fee proposal form. My signature on the fee proposal form will not be deemed as an acknowledgement of addenda.

THE UNDERSIGNED PROPOSES TO FURNISH THE FOLLOWING ITEMS IN STRICT CONFORMANCE TO THE BID SPECIFICATIONS AND BID INVITATION ISSUED BY THE CITY OF SAVANNAH FOR THIS BID. ANY EXCEPTIONS ARE CLEARLY MARKED IN THE ATTACHED COPY OF BID SPECIFICATIONS.

<table>
<thead>
<tr>
<th>ITEM NO</th>
<th>DESCRIPTION</th>
<th>MANUFACTURER NAME &amp; MODEL NUMBER</th>
<th>EST QUANTITY</th>
<th>UNIT OF MEASURE</th>
<th>UNIT PRICE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cups Drinking Cone 4 ½ oz.</td>
<td></td>
<td>10</td>
<td>Case</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Towels Roll</td>
<td></td>
<td>900</td>
<td>Case</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Towels Fold Multi</td>
<td></td>
<td>1000</td>
<td>Case</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Tissue Toilet</td>
<td></td>
<td>300</td>
<td>Case</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Tissue Toilet Jumbo</td>
<td></td>
<td>700</td>
<td>Case</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Degreaser/Cleaner (5-Gal/Pail)</td>
<td></td>
<td>65</td>
<td>Pail</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Mop Heads 16 oz. Cotton</td>
<td></td>
<td>144</td>
<td>Each</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Mop Heads 24 oz. Cotton</td>
<td></td>
<td>192</td>
<td>Each</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Mop Heads 32 oz. Cotton</td>
<td></td>
<td>120</td>
<td>Each</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Broom Warehouse Corn</td>
<td></td>
<td>192</td>
<td>Each</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Bid: $ _________________
PAYMENT TERMS: PLEASE CHECK ONE AND FILL IN BLANKS
(Minimum of 10 working days must be allowed for discount to be considered in bid award)

___ Less ___ % ___Days Prompt Payment Discount (if offered)

___ Net - 30 Days (no discount offered) - 0 -

TOTAL NET BID $ ===============

TIME REQUIRED FOR DELIVERY AFTER RECEIPT OF ORDER: ________DAYS

HAVE YOU ATTACHED SUBMITTAL SHEETS FOR ALL ITEMS BID?

HAVE YOU PROVIDED THE MANUFACTURER'S NAME AND PART NUMBER IN THE SPACE PROVIDED?______________

CONFIRM RECEIPT OF ANY ADDENDA ISSUED FOR THIS BID:
ADDENDUM __________ #
DATE __________________

I certify this Bid complies with the General and Specific Specifications and Conditions issued by the City except as clearly marked in the attached copy.

_________________________________  ___________________  _______________
Please Print Name                Authorization Signature          Date
If the commodity(ies) and/or services proposed in the response to this bid is in anyway different from that contained in this proposal or bid, the bidder is responsible to clearly identify by specification section number, all such differences in the space provided below. Otherwise, it will be assumed that bidder's offer is in total compliance with all aspects of the proposal or bid.

Below are the exceptions to the stated specifications:

___________________________    ______________________________
Date      Signature

______________________________
Company

______________________________
Title
NON-DISCRIMINATION STATEMENT

The bidder certifies that:

(1) No person shall be excluded from participation in, denied the benefit of, or otherwise discriminated against on the basis of race, color, national origin, or gender in connection with any bid submitted to the City of Savannah or the performance of any contract resulting therefrom;

(2) That it is and shall be the policy of this company to provide equal opportunity to all business persons seeking to contract or otherwise interested in contracting with this company, including those companies owned and controlled by racial minorities, cultural minorities, and women;

(3) In connection herewith, we acknowledge and warrant that this company has been made aware of, understands and agrees to take affirmative action to provide such companies with the maximum practicable opportunities to do business with this company;

(4) That this promise of non-discrimination as made and set forth herein shall be continuing in nature and shall remain in full force and effect without interruption;

(5) That the promises of non-discrimination as made and set forth herein shall be and are hereby deemed to be made as part of and incorporated by reference into any contract or portion thereof which this company may hereafter obtain and;

(6) That the failure of this company to satisfactorily discharge any of the promises of non-discrimination as made and set forth herein shall constitute a material breach of contract entitling the City of Savannah to declare the contract in default and to exercise any and all applicable rights and remedies including but not limited to cancellation of the contract, termination of the contract, suspension and debarment from future contracting opportunities, and withholding and/or forfeiture of compensation due and owing on a contract.

____________________________________ ______________________________
Signature     Title
# DBE SUBCONTRACTOR PAYMENT REPORT

Report No. ________

<table>
<thead>
<tr>
<th>Contract #:</th>
<th>Contract Amount:</th>
<th>Date Form Submitted:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Name:</td>
<td>Project Completion Date:</td>
<td></td>
</tr>
<tr>
<td>Prime Contractor:</td>
<td>Period Ending:</td>
<td>Amt. Paid to Prime:</td>
</tr>
<tr>
<td>Contact Person:</td>
<td>Telephone#: ( )</td>
<td>Fax#: ( )</td>
</tr>
</tbody>
</table>

## SUBCONTRACTING INFORMATION

TO BE SUBMITTED TO THE CITY OF SAVANNAH OFFICE OF BUSINESS OPPORTUNITY

<table>
<thead>
<tr>
<th>DBE Subcontractor</th>
<th>Telephone #</th>
<th>Description of Work</th>
<th>Original Agreed Price</th>
<th>% of work Completed to Date</th>
<th>Amount Paid This Period</th>
<th>Amount Paid To Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Total Amount Paid to Subcontractors to Date: ________

I certify that the information submitted in this report is in fact true and correct to the best of my knowledge.

Signature: ________ Title: ________ Date: ________

Note: The information provided herein is subject to verification by the Office of Business Opportunity.
## OFFICE OF BUSINESS OPPORTUNITY
### SCHEDULE OF DISADVANTAGED BUSINESS ENTERPRISE (DBE) PARTICIPATION

<table>
<thead>
<tr>
<th>EVENT NUMBER:</th>
<th>PROJECT TITLE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIME CONTRACTOR NAME:</td>
<td>ADDRESS:</td>
</tr>
<tr>
<td>PHONE:</td>
<td>FAX:</td>
</tr>
<tr>
<td>SUBCONTRACTOR NAME</td>
<td>ADDRESS and PHONE NUMBER</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**TOTAL BASE BID** $ 
**TOTAL PROPOSED DBE SUBCONTRACTS** $ 
**BIDDER’S PROPOSED DBE PARTICIPATION** % 

I hereby certify that the above is a true reflection of proposed subcontracts, and that said firms shall be contracted to work on the trades specified and/or supply materials and/or equipment for this project. I have included a properly executed letter of intent for each DBE firm mentioned in this schedule with our response.

Name and Title of Authorized Representative | Signature | Date

1 Form to be completed and signed by the bidder/offeror; Use additional sheets if necessary.
2 To be provided only when the solicitation requires that the bidder/offeror include the dollar amount in its bid.
3 Total proposed DBE participation ($) divided by bidder’s total base bid (less any exclusions specifically mentioned in the solicitation), or total of all DBE Participation (%) if dollar amount is not required.
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 contracting with the City of Savannah 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.

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 City of Savannah, contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. 13-10-91 on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the City of Savannah at the time the subcontractor(s) is retained to perform such service.

EEV / Basic Pilot Program* User Identification Number

BY:

______________________________  ________________________________
Contractor Name      Date

______________________________  ________________________________
Signature of Authorized Officer or Agent   Printed Name of Authorized Officer or Agent

______________________________  ________________________________
Title of Authorized Officer or Agent of Contractor

*As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV / Basic Pilot Program" operated by the U. S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).
Instructions for Completing Contractor Affidavit and Agreement Form

As required under Senate Bill 529 – “Georgia Security and Immigration Compliance Act” of 2006, O.C.G.A. Section 2, Article 3 13-10-91, public employers, their contractors and subcontractors are required to verify the work eligibility of all newly hired employees through an electronic federal work authorization program. The Georgia Department of Labor has added a new Chapter 300-10-1, entitled "Public Employers, Their Contractors and Subcontractors Required to Verify New Employee Work Eligibility Through a Federal Work Authorization Program," to the Rules and Regulations of the State of Georgia. (See website: http://www.dol.state.ga.us/pdf/rules/300_10_1.pdf.) The new rules designate the “Employment Eligibility Verification (EEV) Basic Pilot Program” operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security as the electronic federal work authorization program to be utilized for these purposes. The EEV/Basic Pilot Program can be accessed at: https://everify.uscis.gov/enroll/StartPage.aspx?JS=YES. Bidders shall comply with this new rule and submit with your bid the attached “Contractor Affidavit and Agreement.”
Affidavit Verifying Status for City of Savannah Benefit Application

By executing this affidavit under oath, as an applicant for a City of Savannah, Georgia Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit, Contract or other public benefit as reference in O.C.G.A. Section 50-36-1, I am stating the following with respect to my bid for a City of Savannah contract for _________________________________. [Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1.) __________ I am a citizen of the United States.

OR

2.) __________ I am a legal permanent resident 18 years of age or older.

OR

3.) __________ I am an otherwise qualified alien (8 § USC 1641) or nonimmigrant under the Federal Immigration and Nationality Act (8 USC 1101 et seq.) 18 years of age or older and lawfully present in the United States.*

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia.

Signature of Applicant: ________________  Date __________

Printed Name: ________________________________________

SUBSCRIBED AND SWORN * __________________________________
BEFORE ME ON THIS THE Alien Registration number for non-citizens.
_____DAY OF ________, 20___

Notary Public
My Commission Expires:
Instruction for Completing Systematic Alien Verification for Entitlement (SAVE) Form

O.C.G.A. § 50-36-1, requires Georgia’s cities to comply with the federal Systematic Alien Verification for Entitlements (SAVE) Program. SAVE is a federal program used to verify that applicants for certain “public benefits” are legally present in the United States. Contracts with the City are considered “public benefits.” Therefore, the successful bidder will be required to provide the Affidavit Verifying Status for City of Savannah Benefit Application prior to receiving any City contract. The affidavit is included as part of this bid package but is only required of the successful bidder.