BALLISTIC HELMETS

EVENT No. 6936

**Bidder’s Checklist – Envelope Requirements**

This checklist shall be attached to the outside of the envelope of a bid. Failure to complete, sign, and attach this checklist may result in a bid being deemed nonresponsive. Nonresponsive bids will be returned to the vendor unopened.

Firm name: ________________________________________________________________
Contact person: ____________________________________________________________
Address: _________________________________________________________________
Phone number: ____________________________________________________________
Email address: _____________________________________________________________

The envelope must contain the following documents:

<table>
<thead>
<tr>
<th>Initials</th>
<th>Document</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Bid Proposal Form, Including Acknowledgement of Any Addenda</td>
</tr>
<tr>
<td></td>
<td>Exception Sheet</td>
</tr>
<tr>
<td></td>
<td>Contractor Affidavit and Agreement (Employee Eligibility Verification)</td>
</tr>
<tr>
<td></td>
<td>Affidavit Verifying Status for City of Savannah Benefit Application</td>
</tr>
<tr>
<td></td>
<td>Insurance</td>
</tr>
<tr>
<td></td>
<td>Any Other Requirements as Stated in the Specs</td>
</tr>
</tbody>
</table>

By signing below, bidder is attesting that all items listed in the checklist above have been included in the envelope.

Signature: ___________________________  Date: ___________________________
BALLISTIC HELMETS FOR SPD

EVENT NO. 6936

SPECIFICATIONS AND SPECIAL CONDITIONS

4.0   The purpose of these specifications is to describe requirements for concealable, ballistic, armor vest including carriers, for the Savannah Police Department.

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. Manually submitted bids must be submitted on the bid proposal forms contained in these specifications in order to be considered.

A pre-bid conference has been scheduled to be conducted at the Purchasing Office, 301 West Oglethorpe Avenue, Savannah Civic Center, Savannah, Georgia, 31401. This meeting will allow contractors to discuss the specifications and resolve any questions and/or misunderstandings that may arise with City staff. You are invited to attend.

4.1   Detailed Specification and Standards
Helmets shall meet Paraclete Mich with BOA Strap System and Pads, NIJ-STD-0106.01 Level IIA, or an approved equal.

Standard features:
A.  Closure System
   •  Harness/Retention System
B.  Helmet Style
   •  Mid-cut
   •  Brimless Helmet
   •  Seven-pad suspension system
C.  Helmet Material
   •  Aramid
D.  Helmet Capabilities (IIA)
   •  9MM (1670 fps)
   •  3.57 Mag (1662 fps)
   •  Stops
      o  2 (4836 fps)
      o  4 (3702 fps)
      o  16 (2608 fps)
      o  17 (STANAG 2920) (2453 fps)
      o  64 (1956 fps)
E.  Ballistic Weight
   •  Small – 2.6 lbs.
   •  Medium – 2.6 lbs.
   •  Large – 2.8 lbs.
   •  X-Large – 3.3 lbs.
F.  Helmet Sizes
   •  Small – 19–22 inches
• Medium – 21-23 inches
• Large – 22-25 inches
• X-Large – 24-26 inches

G. Helmet Color
• Black

4.2 NIJ Certification
Helmet shall comply with the latest requirements of the voluntary NIJ-Compliant Level IIIA Ballistics NIJ-STD-0106.01.

4.3 Harness Retention Padding
Each helmet shall be supplied with one additional seven-pad suspension system.

4.4 Replacement Parts
• Harness/retention system
• Seven-pad system

4.5 Helmet Labels
A label must be fixed on individual body armor stating the following:

A. Name of manufacturer
B. Threat level and NIJ-STD-0106.01
C. Date of manufacturer
D. Size
E. Officer's name
F. Care instructions

4.6 Measurement and Fitting
Individual measurements shall be taken by an authorized factory trained representative.

Helmet shall be fitted as follows:

A. Authorized factory trained representative must measure individuals according to ballistic helmet standard guidelines to include:

1. Head measurement

The vendors, local and non-local, must perform all measurements at the office of the Quartermaster twice a month on either a Monday, Tuesday, or Thursday between the hours of 8:30 A.M. and 4:30 P.M.

4.7 This is an annual contract. Prices shall remain firm. This agreement may be renewed for up to two additional twelve month periods, if all contracting parties so agree and services provided by the vendor have been satisfactory. The first term of this contract shall begin upon award and shall end on December 31, 2019. All remaining renewal options, if exercised, shall begin on January 1 and end on December 31 of each subsequent year.

4.8 The helmet manufacturer shall provide a minimum of $20 million dollar product liability insurance per occurrence. Self-insurance is not acceptable. Insurance coverage shall be 100% of the minimum amount required. Policy shall not have any deductibles.

4.9 Orders must be received within six weeks from the date the order is placed.

4.10 Prompt order discount will not be considered with this award.

4.11 Oversize charges shall not be considered.
Quantities are provided as estimates only. Actual quantities ordered may be more or less.

## General Conditions

5.0 The bid response shall include all documents required in the bidder’s checklist.

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

5.2 Original invoices should be sent to:

   City of Savannah  
   Accounts Payable  
   P.O. Box 1027  
   Savannah, Georgia 31402

A duplicate invoice shall be sent to:

   Savannah Police Department  
   Attn: Dr. Kimberly Cunningham, Quartermaster's Office  
   78 Ross Road  
   Savannah, Georgia 31405

5.3 Invoices to the City must contain name, payroll number, size, quantities, unit prices, and a description of the item as it appears on bid proposal pages.

5.4 Bids shall be submitted in **DUPLICATE**.

5.5 The vendor is responsible for determining and acknowledging any addenda issued in connection with this bid solicitation. All addenda issued for this event must be acknowledged in order for a bid to be considered.

5.6 To be awarded bids, vendors must be registered as suppliers on the City of Savannah’s website at [www.savannahga.gov](http://www.savannahga.gov).

5.7 This contract will be awarded to the vendor offering the lowest net price to the City, and meeting or exceeding all specifications herein.
EXCEPTION SHEET
Event No. 6936

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
BID PROPOSAL FORM
(SUBMIT AS THE COVER SHEET)

City of Savannah Purchasing Department
301 W. Oglethorpe Avenue, Savannah Civic Center
2nd floor
Savannah, Georgia 31401
ATTN: Purchasing Director

EVENT NUMBER: 6936
Business Location: (Check One)
_____ Chatham County
_____ City of Savannah
_____ Other

ATTENTION: Purchasing Director

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

MANUALLY SUBMITTED BIDS MUST BE SUBMITTED ON THIS BID PROPOSAL FORM IN ORDER TO BE CONSIDERED.

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: ____________)

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>ESTIMATED QUANTITY</th>
<th>UNIT PRICE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ballistic Helmet, or an approved equal</td>
<td>500 Each</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Replacement Harness/Retention System, or an approved equal</td>
<td>150 Each</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Replacement Seven-Pad Suspension System, or an approved equal</td>
<td>150 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

DO YOU HAVE THE REQUIRED INSURANCE? ______

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
NON-DISCRIMINATION STATEMENT

The prime contractor / 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, women, and individuals belonging to other socially and economically disadvantaged groups;

(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
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

____________________________________________
Signature of Authorized Officer or Agent

____________________________________________
Title of Authorized Officer or Agent of Contractor

____________________________________________
Date

____________________________________________
Printed Name of Authorized Officer or Agent

*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
_____DAY OF ________, 20___
Notary Public
My Commission Expires:

* Alien Registration number for non-citizens.
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.