



**18630**

**Routine Cleaning Services for Bettendorf Clinics**

Issue Date: 6/22/2026

Questions Deadline: 7/7/2026 03:00 PM (CT)

Response Deadline: 7/21/2026 03:00 PM (CT)

**Contact Information**

Contact: Joshua Hannan

Address: Purchasing

PCO

202

202 PCO

Iowa City, IA 52242-2500

Phone: 319 (384) 3342

Fax: 319 (335) 2443

Email: [joshua-hannan@uiowa.edu](mailto:joshua-hannan@uiowa.edu)

## Event Information

Number: 18630  
Title: Routine Cleaning Services for Bettendorf Clinics  
Type: Request for Proposal - Sealed  
Issue Date: 6/22/2026  
Question Deadline: 7/7/2026 03:00 PM (CT)  
Response Deadline: 7/21/2026 03:00 PM (CT)  
Notes: **Please be aware that this is an extensive bid. All Suppliers are cautioned to allow ample time for the submittal of RFP responses well before the due date time requirement. Bids must be submitted via the eBid system.**

## Billing Information

Contact: University of Iowa  
Address: Accounts Payable  
PCO  
202  
202 PCO  
Iowa City, IA 52242-2500  
Phone: (319) 335-0379  
Email: acntpay@uiowa.edu

## Bid Activities

### Site Visits

7/2/2026 1:00:00 PM (CT)

The University will be providing site visits for the clinics on 7/2/26 at 1 pm. Supplier participation is not required, but recommended. Please email Joshua Hannan at [joshua-hannan@uiowa.edu](mailto:joshua-hannan@uiowa.edu) to RSVP. He will then provide further information and details about the visits. Please let me know to reserve a spot.

The schedule will be as follows. Please confirm the RSVP i s for one of the clinics or both.

1pm: Lincoln Road Health Building  
865 Lincoln Road, Bettendorf

2pm: Cancer Services Quad Cities  
1351 Kimberly Road, Bettendorf

## Bid Attachments

**Professional-Services-Agreement-with-Travel-Addendum-2026.02.25-FINAL Accessible.docx**

[Download](#)

Professional Services Agreement with Travel Addendum with Accessibility Update

**Standard Terms and Conditions 2026.06.11. FINAL.pdf**

[Download](#)

Standard Terms and Conditions with correct IT email

**Appendix B - Background Check and Badging Information.pdf**

[Download](#)

UIHC Safety and Security

## Download

Download

## Download

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## Download

## Appendix A - Clinic detail list (002).xlsx

## Appendix A - Clinic detail list

**Bettendorf Housekeeping RFP Cleaning Requirements 6.9.26 (002).pdf**

## Bettendorf Housekeeping RFP Cleaning Requirements

## Requested Attachments

## Financial documents

*(Attachment required)*

Supplier must provide audited financial statement as stated in the bid attributes.

## Communications Log

*(Attachment required)*

## Communications Log

## Bid Attributes

## 1 SUPPLIER INSTRUCTIONS

This Request for Proposal (RFP) may contain multiple pages. You can move from page to page by clicking on the right side of the gray bar that appears at the top of the Attributes and Line Item sections. Bids **MUST** be submitted electronically through the eBid system. Bids submitted by any other means will not be accepted.

(Optional: Maximum 4000 characters allowed)

## 2 Introduction

The University of Iowa (hereafter, The University/University) located in Iowa City, Iowa, desires to obtain written proposals from qualified Suppliers to provide **all labor, supervision, materials, and equipment required to perform routine cleaning services at the Cancer Services Quad Cities Clinic, located at 1351 Kimberly Road, Bettendorf, and the Lincoln Road Health Building Clinic, located at 865 Lincoln Road, Bettendorf.**

Please be aware that this is an extensive bid. All Suppliers are cautioned to allow ample time for the submittal of RFP responses well before the due date time requirement. Bids must be submitted via the eBid system.

Questions regarding the bid may be submitted via the Questions tab within eBid prior to the question cutoff date.

### 3 Definitions

THE UNIVERSITY/UNIVERSITY: Indicates The University of Iowa, Iowa City, Iowa (all terms synonymous).

MAY: Indicates something that is not mandatory but permissible/desirable.

POINT OF CONTACT: The Supplier's representative available for all questions pertaining to the response for this Request for Proposal.

RFP: Request for Proposal.

SHALL/MUST: Indicates mandatory requirement. Failure to meet these mandatory requirements may result in rejection of your proposal as non-responsive.

SHOULD: Indicates something that is recommended but not mandatory. If the Supplier fails to provide recommended information The University may, at its sole option, ask the Supplier to provide the information or evaluate the proposal without the information.

Supplier/Successful Respondent: Proposer submitting a response to the Request for Proposal.

INDEPENDENT PURCHASING AUTHORITY(IPA): means the State of Iowa entities or agencies, such as the Iowa Board of Regents, Regent institutions, Department of Administrative Services, the Department of the Blind, the Iowa Lottery Authority, the Iowa Telecommunications and Technology Commission, and the Department of Transportation, that have separate and distinct purchasing authority, including the authority to contract autonomously under the Iowa Code or another provision of law.

POLITICAL SUBDIVISION: is any county, city, school district, or any combination thereof.

### 4 Background Information

#### The University of Iowa

The University of Iowa is a broad-based public university of international stature. As of fall 2025, its enrollment totaled 31,563 students. It is recognized for its academic achievement; leadership in research; and its academic health system, University of Iowa Health Care. As of Fiscal Year 2026, the University has an overall budget of \$6.3 billion and employs approximately 20,150 full-time faculty and staff. More information can be found at the [Office of the Registrar](#).

#### The University of Iowa Health Care

University of Iowa Health Care is Iowa's comprehensive academic health system, which includes the Roy J. and Lucille A. Carver College of Medicine, the UI Health Care clinical enterprise, and UI Physicians, the multispecialty medical and surgical group practice. The clinical enterprise includes medical centers on the university campus, downtown Iowa City campus, and North Liberty campus in the neighboring community of North Liberty, Iowa. UI Health Care also has outpatient clinic locations in the Iowa City area and communities throughout the state. The downtown campus, formerly Mercy Iowa City Hospital, joined UI Health Care in January 2024. The North Liberty campus, the first construction of a new hospital away from the university campus, opened in April 2025. At its medical centers and clinics, UI Health Care provides adult and pediatric primary and specialty care to patients and families from across Iowa, throughout the nation, and around the world. Its clinical enterprise is comprised of more than 1,200 staff physicians and dentists, nearly 875 resident and fellow physicians, and over 6,000 nursing team members. Collectively, the three medical center campus locations include more than 1,000 inpatient beds. For fiscal year 2024, UI Health Care reported more than 34,000 inpatient admissions and over 1.3 million clinic visits at its medical centers and clinics. UI Health Care is ranked annually by U.S. News & World Report as the state's top medical center and one of the nation's best hospitals, with several of its specialties ranked among the top 50 in the country. UI Health Care Stead Family Children's Hospital is Iowa's only children's hospital nationally ranked by U.S. News. UI Health Care was the first in Iowa to be designated a Magnet Hospital (2004) by the American Nurses Credentialing Center and the first in Iowa to be re-designated four times (2008, 2013, 2018, and 2023). Through innovation, collaboration, and expertise, UI Health Care is committed to providing safe, high-quality care with excellent service and exceptional outcomes. In addition to serving as a center for highly specialized care, UI Health Care conducts research to better understand, prevent, and treat injuries and illnesses, and it also educates students and trainees in medicine and allied health professions.

**5 Purchasing Department Exclusivity for Formal Bid Requests**

No individual, department, school, college or office at the University of Iowa has the authority to solicit or receive official proposals from suppliers, other than the Purchasing Department. All solicitation is performed under the direct supervision of the Director of Purchasing and in accordance with University, Regent, State and Federal laws, policies, procedures and guidelines.

**6 University Rights/Obligations: Acceptance or Rejection of Proposal**

The University of Iowa reserves the right to accept or reject any or all proposals, waive irregularities, accept any part of a proposal, to withhold the award, and to make no award as is deemed to be in the best interests of the University.

☐ Supplier Understands and Agrees

*(Required: Check if applicable)*

**7 University Rights/Obligations: Payment for Information**

The University will not pay for any information requested herein, nor is it liable for any costs incurred by the Supplier in responding to this request. All proposals submitted become the property of The University and will not be returned to the Supplier.

☐ Supplier Understands and Agrees

*(Required: Check if applicable)*

**8 Supplier/Proposal Obligations: Requested Information Compliance**

Failure to supply requested information may be cause for rejection of the proposal as non-compliant.

☐ Supplier Understands and Agrees

*(Required: Check if applicable)*

**9 Supplier/Proposal Obligations: Determination of Compliance**

Determination of compliance and responsiveness to the requirements of the RFP will be made after a thorough and careful review of the proposals. Public review of the submitted proposals will not be possible until an award has been made.

☐ Supplier Understands and Agrees

*(Required: Check if applicable)*

**10 Supplier/Proposal Obligations: Contractual Obligations of Final Agreement**

The contents and any clarification thereto of the successful Supplier's submitted proposal shall become a part of the contractual obligation incorporated by reference into the ensuing agreement (unless modified by mutual agreement).

☐ Supplier Understands and Agrees

*(Required: Check if applicable)*

**11 Supplier/Proposal Obligations: State of Iowa Business Licensing**

The successful Supplier must be licensed to do business in the State of Iowa and comply with provisions of Chapter 490 of the Iowa Code.

☐ Supplier Understands and Agrees

*(Required: Check if applicable)*

**12 Termination - Non-appropriation of Funds**

Notwithstanding any other provisions, if funds anticipated for the continued fulfillment of the resulting agreement are at any time not forthcoming or insufficient, either through the failure of the Iowa Legislature or the Federal government to provide funds or alteration of the program under which funds were provided, then the University shall have the right to terminate the agreement without penalty by giving written notice documenting lack of funding.

☐ Supplier Understands and Agrees

*(Required: Check if applicable)*

1  
3**Determination of Bidding Supplier Qualifications**

- The University of Iowa may make such investigations as deemed necessary to determine the ability of the Supplier to provide and perform the specified service stated herein.
- The Supplier shall keep informed of and provide all permits and comply with all applicable laws, ordinances, rules, regulations and orders of the state and federal government, or public bodies having jurisdiction affecting this proposal and the service referenced herein.

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4**Energy Star Purchases**

Whenever possible, the University of Iowa will purchase equipment that is rated energy efficient by this joint program of the U.S. Environmental Protection Agency and the U.S. Department of Energy.

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5**Responses**

Your proposal must contain information relative to each of the items listed below to be considered responsive. Answers should be detailed and complete. It is the responsibility of the Supplier to clearly mark and identify any and all trade secret, proprietary, or confidential information.

1  
6**Evaluation of Proposal: Method of Award**

Evaluation of proposals will be based on, but not limited to, the following criteria: response to specifications, demonstrated expertise and service record, system technical maintainability and usability, financial responsibility/stability of the Supplier, references of the Supplier, new functionalities, pricing schedule, supplier experience, commitment, and demonstrated understanding. The University reserves the right to further subdivide these categories.

☐ Supplier Understands and Agrees  
(Required: Check if applicable)

1  
7**Tie Proposals**

Tie proposals that are equal in all respects and tied in price will be resolved by drawing lots. Whenever practicable, the drawing will be held in the presence of the suppliers who are tied in price. However, if this is not possible, the drawing will be made in front of at least three (3) persons and the drawing documented.

Whenever a tie involves an Iowa firm and/or an Iowa produced or manufactured products; and a firm or items produced or manufactured outside the State of Iowa, the preference will be given to the Iowa firm and/or the Iowa produced or manufactured products and items according to the Code of Iowa.

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8**Financials**

The University requests that the Supplier's audited financial statements and annual report for the previous two (2) years be submitted as attachments to your response to this RFP.

☐ Read and Acknowledged  
(Required: Check if applicable)

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9**Evaluation Committee**

A committee designated by The University of Iowa will evaluate proposals to discern and recommend award to Supplier(s) proposal deemed most valuable to The University. Supplier's submission of a proposal constitutes Supplier acceptance of the evaluation technique and Supplier recognition and acceptance that subjective judgments will be used by The University of Iowa during the assignment of points.

**20 Supplier Information: Core Competencies**

Provide a brief description of Suppliers core competencies including the name(s) of its owner(s) and/or principal officer(s), the date of origin and/or incorporation and the length of time your company has been providing similar products/services.

(Required: Maximum 4000 characters allowed)

**21 Supplier Background**

If applicable, Supplier shall ensure that background checks are obtained and documented with respect to all assigned Supplier and subcontractor personnel with all such background checks being current within the last 12 months as of the time when each individual is first assigned to the performance of the Services and including investigation and identification of all state or federal misdemeanor or felony convictions of such individual. At the request of the University, Supplier shall deliver a written certification to the University that a background check has been performed, and the subject individual has passed such verification procedures as set forth in this Section.

☐ Supplier Understands and Agrees

(Required: Check if applicable)

**22 Supplier References**

The successful Supplier must satisfy to the University that it has adequate experience. Please submit **three (3)** references for which the Supplier has provided these services. Of particular interest would be Supplier's previous work with comparable institutions using products/services outlined in this Request for Proposal. References should represent major accounts of the Supplier. Include the business or institution's name and address, as well as the contact's name, telephone number, and e-mail address.

**23 Reference 1**

Include the business or institution's name and address, as well as the contact's name with a telephone number and e-mail address.

(Required: Maximum 4000 characters allowed)

**24 Reference 2**

Include the business or institution's name and address, as well as the contact's name with a telephone number and e-mail address.

(Required: Maximum 4000 characters allowed)

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### Reference 3

Include the business or institution's name and address, as well as the contact's name with a telephone number and e-mail address.

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(Required: Maximum 4000 characters allowed)

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### Contractual Contact Information

It is required that a contractual contact be submitted with bid response. Please include: Name, mailing address, e-mail address, and phone number.

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(Required: Maximum 4000 characters allowed)

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### Managerial Contact Information

It is required that managerial contact information be submitted with bid response. Please include: Name, mailing address, e-mail address, and phone number.

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(Required: Maximum 4000 characters allowed)

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### Sales Representative Contact Information

It is required that sales representative contact information be submitted with bid response. Please include: Name, mailing address, e-mail address, and phone number.

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(Required: Maximum 4000 characters allowed)

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### Presentations

Suppliers may be asked to provide a presentation on our campus. If needed, these events will be scheduled on a mutually agreed upon date and time. The University is not responsible for any cost incurred for this.

☐ Supplier Understands and Agrees

(Required: Check if applicable)



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### Customer Service

The University of Iowa consider excellent customer service to be of great importance. Per the University of Iowa's customer service guidelines: "Our goal is to exceed our customer's needs and expectations while treating them with respect and a positive attitude. Positive, respectful, and courteous behavior conveys that you are a professional." Please describe in detail your customer service capabilities addressing, at a minimum, the following:

1. Hours of availability (either by phone, website and/or email)
2. Average wait time
3. Customer satisfaction
4. Escalation process
5. Availability for holidays and off hours

(Required: Maximum 4000 characters allowed)

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### Sustainability Efforts

The University of Iowa is committed to comprehensive sustainability efforts including, but not limited to: achieving net-negative energy growth, pursuing renewable energy sources, decreasing waste production, reducing the carbon impact of transportation, increasing student opportunities to learn and practice principles of sustainability, support interdisciplinary research in sustainability-focused areas, and develop partnerships to advance collaborative initiatives. As a Supplier please detail how your company contributes to environmentally sustainable practices.

(Required: Maximum 4000 characters allowed)

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### Offer Validity

The response constitutes an offer by the Supplier which shall remain open and irrevocable for a period of one hundred twenty (120) calendar days from the bid due date.

☐ Supplier Understands and Agrees

(Required: Check if applicable)

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3**Formation of Agreement**

At its option, the University may take either of the following actions to form an agreement between the University and the selected Supplier:

- Accept a proposal as submitted by issuing a written notice to the selected Supplier which refers to this Request for Proposal and accepts the proposal received, or,
- Enter into negotiations with one or more Supplier(s) in an effort to reach a mutually satisfactory written agreement that will be based on this Request for Proposal, the proposal submitted by the Supplier, and the associated negotiations.

The terms and conditions contained in this RFP as well as the Supplier's response will be considered part of any resulting agreement.

☐ Supplier Understands and Agrees

(Required: Check if applicable)

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4**Business Associate Agreement**

The successful Supplier must agree to the University's Business Associate Agreement ("BAA") if it, or any of its agents or subcontractors, will be performing any of the following functions:

- Accessing, using, transferring, disclosing, or maintaining patient information, or "Protected Health Information" ("PHI") as that term is defined under the Health Insurance Portability and Accountability Act, Pub. L. No. 104-191 110 Stat. 1936 (1996) and its implementing regulations; or
- Providing training or otherwise assisting the University health care providers in the calibration, insertion, or other technical implementation of medical devices or products at bedside or in the operating room during patient procedures.

☐ Supplier Understands and Agrees

(Required: Check if applicable)

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5**Term of Agreement**

The intended term of any award contract that results from this bid, shall be for a period of one (1) year. Thereafter, the Agreement may be extended four (4) additional one-year periods each based upon written mutual agreement. Any price changes will be mutually agreed to in writing with each extension option exercised.

The University reserves the right to issue multiple awards at its sole discretion.

☐ Supplier Understands and Agrees

(Required: Check if applicable)

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6**Agreement Documentation**

If the bid results in an award contract, the University documents will be used.

- **Professional Services Agreement:** If the Supplier has employees or representatives that will visit and work on campus, a Professional Services Agreement (PSA) will need to be completed and signed. This form may be viewed at website: <https://ap-purchasing.fo.uiowa.edu/purchasing/professional-services-agreements>
- **Memorandum of Agreement:** If a standard contract is needed, the University will generate a Memorandum of Agreement (MOA) and send to the supplier.

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7**Agreement Extensibility**

All other agencies of the State of Iowa, Independent Purchasing Authorities, and all Political Subdivisions of the State of Iowa may make purchases pursuant to the University award agreement and/or ancillary agreements. A Buyer may include additional contractual requirements and the Supplier agrees to be bound by the additional requirements if it accepts the Purchase Instrument.

☐ Supplier Understands and Agrees

(Required: Check if applicable)

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8**Export Control Classification Number (ECCN)**

Suppliers are required to provide Export Control Classification Number(s) (ECCN) for any product/good/equipment that is included as part of Supplier's proposal. ECCNs are five-character alpha-numeric designations used on the Commerce Control List (CCL) to identify dual-use items for export control purposes. An ECCN categorizes items based on the nature of the product, i.e. type of commodity, software, or technology and its respective technical parameters.

Should Supplier be awarded this bid, if the products/services that Supplier would provide do not have, nor need, an ECCN, then Supplier must respond "Not applicable".

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(Required: Maximum 4000 characters allowed)

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9**Offshore Data**

The University prefers not to permit Suppliers to transfer, transmit, maintain, or store University data or information outside the geographic borders of the United States of America. The University also prefers not to permit Suppliers' personnel, employees, staff, or subcontractors to access or use University data or information when such personnel, employees, staff, or subcontractors are physically located outside of the borders of the United States of America. Does the Supplier acknowledge these limitations with respect to offshoring the University's data and information? If no, please provide additional detail on Supplier's data and information security programs.

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(Required: Maximum 4000 characters allowed)

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0**Proprietary and Confidential Information**

The University will treat all information submitted by a supplier as public information unless the supplier properly requests that specific parts of the solicitation remain confidential at the time of submitting the response. Iowa Code Chapter 22 governs the University's release of information. Suppliers are encouraged to familiarize themselves with Iowa Code Chapter 22 prior to submitting a bid or proposal. The University will provide copies of public records as necessary for compliance within the public records laws.

Any request for confidential treatment of specific information must be included in the transmittal letter with the supplier's response. In addition, the supplier must enumerate the specific grounds in Iowa Code Chapter 22 or other applicable law that support treatment of the material as confidential and explain why disclosure is not in the best interest of the public; however, the University does not consider pricing information confidential and **will not withhold documents based on the asserted confidentiality of pricing information**. The request for confidential treatment of information must also include the name, address, and telephone number of the person authorized by the supplier to respond to any inquiries by the University concerning the confidential status of the materials.

☐ Supplier Confirms, Accepts and Understands

(Required: Check if applicable)

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#### Iowa Preference Law

Preference shall be given to purchasing products produced within the State of Iowa when they are of a quality reasonably suited to the purpose intended and can be secured without additional cost over foreign products or products of other states, according to Iowa Code §§73.1.

Preference shall be given to purchasing from Iowa based businesses if the offers submitted are comparable in price to those submitted by other suppliers and meet the required specifications, according to Iowa Code §§73.1.

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#### Preferred Payment Methods

The University of Iowa's preferred methods of payment are electronic payments via Automated Clearing House (ACH), ghost, or other form of virtual payment. The University's intent is to not pay via physical check.

Please describe the methods of electronic payment available in the event of bid award.

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(Required: Maximum 1000 characters allowed)

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#### Visa Credit Card Payment

In the event of bid award, the University reserves the right to make payment via Visa credit card. In the event of credit card payment the University shall not be responsible for any credit card processing fees associated with payments under this agreement. The Supplier shall absorb all such fees.

Please confirm acceptance and understanding of this requirement.

☐ Yes, Supplier Confirms, Accepts, and Understands

(Required: Check if applicable)

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#### Payment Terms: Net 30 Days

Bid response should be submitted with minimum of Net 30 days. If a prompt payment discount is offered, please state it here.

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(Required: Maximum 1000 characters allowed)

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#### Freight: F.O.B. Destination

All shipments shall be F.O.B. Destination University of Iowa. All costs associated to shipping are expected to be borne by the awarded supplier(s).

Indicate your agreement to this requirement.

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(Required: Maximum 1000 characters allowed)

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#### Exceptions to Terms and Conditions

Any purchase resulting from this bid process will reference the University of Iowa Standard Terms and Conditions (found under the 'Attachments' tab.)

Any exceptions to these terms and conditions must be provided with the proposal submission.

**If no exceptions are provided, the bidding supplier certifies compliance with all terms and conditions stated herein.**

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(Required: Maximum 4000 characters allowed)

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#### Value Added Opportunities

Describe in detail any other value added opportunities (i.e.; rebates, education, representative presence, customer service, free overnight shipping, etc.) that may not be requested herein, that would be available to the University if Supplier is selected.

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(Required: Maximum 4000 characters allowed)

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#### University's eSupplier Portal

In the event of bid award, Supplier is **required** to register to manage their supplier records in the University's eSupplier portal. Information regarding this portal can be viewed at <https://ap-purchasing.fo.uiowa.edu/tools-vendors>.

Please confirm acceptance and understanding of this requirement.

☐ Yes, Supplier Confirms, Accepts, and Understands

(Required: Check if applicable)

## Scope of Work

The University is seeking qualified suppliers to furnish all labor, supervision, materials, and equipment necessary to provide routine cleaning services at the Cancer Services Quad Cities Clinic, 1351 Kimberly Road, Bettendorf, and the Lincoln Road Health Building Clinic, 865 Lincoln Road, Bettendorf. These clinic locations are shown in **Appendix A**.

Cleaning services are required on all days the clinics are open:

- **Cancer Services Quad Cities Clinic:** Monday through Friday, after clinic hours beginning at 5:00 p.m., excluding the Mobile Clean Room.
- **Lincoln Road Health Building:**
  - Urgent Care: daily, after clinic hours beginning at 7:00 p.m. (Sunday–Saturday)
  - All other clinics: Monday through Friday, after clinic hours beginning at 5:00 p.m., excluding Suite 1100

Suppliers will generally not be required to work on University holidays. Specific service schedules and start times will be determined and communicated by the Clinic. Parking is available at no cost at both locations, each of which maintains its own dedicated lot for patients and staff.

Detailed cleaning specifications are provided in the attachment.

The Supplier must provide, maintain, and use all necessary cleaning equipment, including but not limited to maid carts, mop buckets, wringers, mops, brooms, vacuum cleaners, and carpet extractors. The University will provide secure on-site storage for this equipment as needed. The Supplier is also responsible for supplying all cleaning chemicals and materials in accordance with the UIHC-approved products list, including:

- Virex Plus (Diversey)
- Prominence Floor Cleaner (Diversey)
- Glance Glass Cleaner (Diversey)
- Microfiber mops and cloths

The University will supply all consumable items such as toilet tissue, paper towels, hand soap refills, hand sanitizer refills, and trash liners. The University plans to implement any award contract(s) beginning September 11, 2026.

Please confirm your understanding of these requirements and explain how your organization is uniquely qualified to deliver the requested services.

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*(Required: Maximum 4000 characters allowed)*

**50 Emergent Cleaning**

The supplier must provide **emergency and short-notice cleaning services** upon request by the University, with all related costs fully included in the proposed pricing. Please **confirm your compliance** with this requirement and **describe the types of emergency cleaning situations** your organization is prepared to manage.

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*(Required: Maximum 4000 characters allowed)*

**51 Relevant Experience**

The University requests verification that the Supplier possesses substantial and relevant experience in cleaning medical facilities. Please provide a detailed description of the Supplier's experience over the past ten (10) years, with particular emphasis on work performed in medical clinics and medical office buildings.

Personnel assigned to each location must complete all badging requirements established by UIHC Safety and Security, as detailed in Appendix B. No individual will be allowed access to UIHC facilities

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*(Required: Maximum 4000 characters allowed)*

**52 UIHC Safety and Security**

Personnel assigned to each location must complete all badging requirements established by UIHC Safety and Security, as detailed in Appendix B. No individual will be allowed access to UIHC facilities without the appropriate badge authorization. The Contractor is responsible for providing sufficient staffing levels and supervision to maintain service quality, as well as assigning a replacement custodian in the event of any planned or unplanned absence.

The Supplier is required to complete all background checks and badging requirements prior to the commencement of services. Failure to obtain the necessary clearances before the start date may result in termination of the contract for the awarded Supplier.

☐ Read and Understood

*(Required: Check if applicable)*

**5  
3 Coverage**

Adequate staffing must be provided to ensure all required cleaning services are performed at the University locations. Please confirm the Supplier's ability to meet this staffing requirement. In addition, describe the Supplier's current staffing levels and the strategies that will be used to ensure sufficient personnel are consistently available to support the University's needs. Please also explain the Supplier's approach for maintaining service continuity and coverage during inclement weather, employee absences, or unexpected call-ins.

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*(Required: Maximum 4000 characters allowed)*

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4 Quality Assurance**

Ongoing quality concerns regarding cleaning practices are unacceptable if they are not addressed immediately. Deficiencies in cleanliness negatively impact overall quality standards and create an unfavorable impression for patients and visitors.

To meet service expectations, the clinic must be thoroughly cleaned and consistently maintained at a high standard to ensure a safe environment and full compliance with cleanliness requirements and clinic regulations. Failure to resolve these issues or complete all required cleaning tasks may result in termination of the contract(s).

The supplier is expected to strictly follow all cleaning protocols and adhere to instructions provided by clinic staff. Please provide detailed documentation outlining how staff training, disciplinary processes, and supervisory oversight are currently being implemented or will be implemented to ensure cleaning responsibilities are performed consistently and effectively.

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*(Required: Maximum 4000 characters allowed)*

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5 Communication Log**

Each clinic or service location must maintain a Communications Log. The Supplier is responsible for consistently documenting all services performed in this log, which will be reviewed on a regular basis to confirm that assigned tasks have been completed. At the University's request, the Supplier shall also attend meetings with the off-site clinic supervisor to discuss and resolve any service-related concerns.

Please confirm compliance with these requirements and provide a sample Communications Log by uploading it in the Response Attachments tab.

☐ Read and Understood  
*(Required: Check if applicable)*



**5  
6 Responsiveness**

A key requirement of this solicitation is the Supplier's ability to respond promptly to emergent and on-demand cleaning requests during normal operating hours. For instance, if a patient becomes ill in an exam room, the University expects the Supplier to complete spot cleaning within one (1) to two (2) hours of notification. This response expectation applies to all urgent and as-needed cleaning situations.

Please provide a detailed response plan describing how the Supplier will meet or exceed the University's required response times.

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*(Required: Maximum 4000 characters allowed)*

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7 Technician Licenses**

Awarded Supplier shall furnish upon request, at no cost to the University of Iowa, the names and certifications/licenses of technicians performing services for the University of Iowa.

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*(Required: Maximum 4000 characters allowed)*

**5  
8 Service Meetings**

It is the expectation of the University that the Supplier actively attend and participate in meetings with the University on an as needed basis to address performance concerns, successes, and other topics needed to ensure the success of any resultant agreement.

Please detail Supplier's ability to participate in these meetings as well as Supplier's recommended frequency of meetings and topics that would be beneficial to address.

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*(Required: Maximum 4000 characters allowed)*

59

**Supplier Communication to the University**

For services of this type effective communication is essential. Please describe in detail Supplier's proposed method(s) of communicating to the University, the frequency Supplier would foresee communicating and the types of information provided in communication. Responses should include the benefits of providing proposed communication to the University and how these communication approaches have proven successful for the Supplier.

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(Required: Maximum 4000 characters allowed)

60

**Account Management and Customer Service**

Please describe in detail Supplier's proposed Account Management and customer service structure that would be provided to the University in the event of bid award. Responses should include who and how to engage for service need questions, issues, or concerns. Supplier should also provide a brief summary of why this proposed service model is being proposed and the benefit to the University.

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(Required: Maximum 4000 characters allowed)

61

**Invoicing Requirements**

In the event of bid award the University shall issue a purchase order to the Awarded Supplier. The Supplier is required submit invoices to the University Accounts Payable Department with the following information:

- Supplier name
- Supplier remit to address
- Invoice number
- Payment terms
- Purchase Order number
- Name of individual(s) performing the work
- Description of Products Delivered (if applicable)
- Manufacturer Name and Product Code Number (if applicable)
- Job title/position/certification/license
- Number of hours worked
- Hourly rate
- Dates of service

Please confirm acceptance and understanding of this requirement.

☐ Yes, I agree to terms

(Required: Check if applicable)

62

Availability

Please detail Suppliers availability in the following. Any additional information pertaining to availability please outline here.

• Define core hours

• Availability holidays and off hours

• Emergency contact information

(Required: Maximum 4000 characters allowed)

63

Financial Statements

Supplier shall have adequate financial resources and be financially sound as demonstrated by the furnished audited balance sheet/financial statements, showing that the Supplier has been in business continually for the last three (3) years.

Please use attachment section of the bid to add balance sheet/financial statements as requested.

☐ Yes, I agree to terms

(Required: Check if applicable)

64

Strategic Relationships

Provide a list of any strategic relationships with other Universities, including a description of the relationship, the duration of the relationship, and a description of the delivery system. Provide a list of any strategic relationships with other Suppliers that pertain to this bid. Including a description of the relationship, the duration of the relationship, and a description of the delivery system.

(Required: Maximum 4000 characters allowed)

Bid Lines

1

Package Header

Cancer Services Quad Cities Clinic

Total:

\$

Supplier Notes:

☐ No bid

☐ Alternate specification  
(Attach separate sheet)

☐ Additional notes  
(Attach separate sheet)

Page 19 of 22 pages

Deadline: 7/21/2026 03:00 PM (CT)

18630

## Package Items

### 1.1 Monthly Rate

(Response required)

Price: \$

Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

- ☐ No bid  
☐ Additional notes  
(Attach separate sheet)

### 1.2 Rate per sq. ft. to Shampoo Carpets

(Response required)

Price: \$

Total: \$

Item Notes: Service to be completed SEMI-ANNUALLY. Dates to be coordinated with Clinic

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

- ☐ No bid  
☐ Additional notes  
(Attach separate sheet)

### 1.3 Hourly Labor Rate

(Response required)

Price: \$

Total: \$

Item Notes: For additional/as needed duties outside of the original scope

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

- ☐ No bid  
☐ Additional notes  
(Attach separate sheet)

## 2 Package Header

Lincoln Road Health Building Clinic

Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

- ☐ No bid  
☐ Alternate specification  
(Attach separate sheet)  
☐ Additional notes  
(Attach separate sheet)

## Package Items

### 2.1 Monthly Rate

(Response required)

Price: \$

Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

- ☐ No bid  
☐ Additional notes  
(Attach separate sheet)

**2.2 Rate per sq. ft. to Shampoo Carpets***(Response required)*

Price:

Total:

Item Notes: Service to be completed SEMI-ANNUALLY. Dates to be coordinated  
with Clinic

Supplier Notes: \_\_\_\_\_

- ☐ No bid
- ☐ Additional notes  
(Attach separate sheet)

**2.3 Hourly Labor Rate***(Response required)*

Price:

Total:

Item Notes: For additional/as needed duties outside of the original scope

Supplier Notes: \_\_\_\_\_

- ☐ No bid
- ☐ Additional notes  
(Attach separate sheet)

Supplier Information

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Supplier Notes

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By submitting your response, you certify that you are authorized to represent and bind your company.

Print Name

Signature