

City of Pearland Texas

Bid Information

Bid Owner Julie Blackmore Buyer
Email jblackmore@pearlandtx.gov
Phone 281 (652) 1790
Fax

Bid Number 0116-17
Title General Plumbing Services
Bid Type Invitation to Bid
Issue Date 01/14/2016
Close Date 1/29/2016 10:00:00 AM Central

Contact Information

Address 3519 Liberty Drive
Suite 201
Pearland, TX 77581

Contact
Department
Building City Hall
Floor/Room 2nd Floor
Telephone 281 (652) 1790
Fax 281 (652) 1738
Email ebids@pearlandtx.gov

Ship to Information

Address

Contact
Department
Building
Floor/Room
Telephone
Fax
Email

Supplier Information

Company Name _____
Contact Name _____
Address _____

Telephone _____
Fax _____
Email _____

Signature _____

Supplier Notes

Date ____ / ____ / ____

Bid Notes

It is the intention of the City of Pearland to contract for the services of a qualified vendor to perform general plumbing services throughout the City of Pearland facilities.

Bid Activities

Date	Name	Description
1/25/2016 10:00:00 AM	Pre-Bid Conference (non-mandatory)	This is non-mandatory meeting; however, bidders are encouraged to attend. Location: 3501 E. Orange Street, Pearland, TX 77581

Bid Messages

Bid Attachments

The following attachments are associated with this opportunity and will need to be retrieved separately

Line	Filename	Description
Header	0116-17 - General Plumbing Services.pdf	Bid Specifications
Header	Exhibit A City of Pearland Facilities List 1-13-16.pdf	Exhibit A Location List
Header	Insurance Requirements.pdf	Insurance Requirements
Header	Local Bidder Preference Claim Form Revised.pdf	Local Bidder Preference

Header	Non-Collusion Statement Revised.pdf	Non-Collusion Statement
Header	Contractor Questionnaire Revised.pdf	Contractor Questionnaire
Header	Vendor References Revised.pdf	Vendor References
Header	CIQ - 2015 New.pdf	Conflict of Interest Questionnaire

Bid Attributes

Please review the following and respond where necessary

#	Name	Note	Response
1	Specification Acknowledgement	Bidder has reviewed specifications and agrees that their bid adheres fully. If not, bidder will need to provide written explanation of any exceptions. Valid Responses: [Please Select], Yes, No, explanation of exception is attached.	_____ (Required)
2	Insurance Requirement Acknowledgement	I have read and agree to the City of Pearland's Contractor Insurance Requirements & Agreement.	_____ (Required)
3	Local Bidder Preference Claim Form	Bidder claims Pearland local bidder preference, pursuant to provisions of Local Bidder Preference claim form and Texas Local Government Code, Chapter 271.9051. Valid Responses: [Please Select], Yes, I have included a notarized copy with my bid., No	_____ (Required)
4	Conflict of Interest Questionnaire	I am submitting a completed and signed copy of the Conflict of Interest Questionnaire.	_____ (Required)
5	Non-Collusion Statement	I am submitting a completed and signed copy of the Non-Collusion Statement.	_____ (Required)
6	Cooperative Purchase	Are these items on a cooperative purchasing agreement/contract? If so, please state which agreement and the contract number.	_____ (Required)
7	Vendor References	I have attached my company's list of references, as required.	_____ (Required)
8	Normal Business Hours	Please state your normal business hours in which standard hourly rates will apply.	_____ (Required)
9	Emergency Service	If emergency or after hours service is required, can your company respond? Valid Responses: [Please Select], Yes, No	_____ (Required)
10	Emergency Response Time	Please state your estimated emergency response time.	_____ (Required)
11	Minimum Charge per Call-Out	Do you have a minimum charge per call-out for emergency (after hours) repairs? If so, please state the minimum charge.	_____ (Required)
12	Response Time	Per bid specifications, a two (2) hour response time is required for service. Can your company comply with this requirement? Valid Responses: [Please Select], Yes, No	_____ (Required)
13	Phone Number	Please state the phone number that should be called during normal working hours if the City of Pearland needs service.	_____ (Required)

- 14 Emergency Phone Numbers Please list the phone numbers that should be called if the City of Pearland needs service after hours, on a weekend or on a holiday. Please also provide the contact name for each phone number given. _____ (Required)
- 15 Materials/Supplies Mark-Up Please provide the percentage mark-up above your company's cost for materials/supplies that will be passed on to the City of Pearland. _____ % (Required)
- 16 Warranty for Labor/Workmanship Please state your warranty for labor/workmanship. _____ (Required)
- 17 Warranty for Parts Please state your warranty for parts. _____ (Required)
- 18 Service Call/Trip Charge Please indicate if your company charges a service call/trip charge per callout. _____ (Required)
Valid Responses: [Please Select], Yes, No
- 19 Service Call/Trip Charge Amount Please indicate the amount of the service call/trip charge your company charges per callout. _____ (Required)
- 20 Quotes Does your company charge for quotes, and if yes explain pricing structure/fee charge for quotes. _____ (Optional)
- 21 Licenses and/or Registration Numbers I have attached copies of all licenses and registration numbers with my bid submittal. _____ (Required)
Valid Responses: [Please Select], I agree, Not Applicable

Line Items

#	Qty	UOM	Description	Response
1	10	HR	Standard hourly rate - Master Plumber	\$_____

Manufacturer: Manufacturer #:

Supplier Notes: _____

Item Attributes: Please review the following and respond where necessary

#	Name	Note	Response
1	After hours rate	Please state your emergency repair rate per hour for a Master Plumber. This is the rate that will be charged after standard business hours and on holidays.	\$_____ (Required)
2	License Number	Please enter your Master Plumber's license number.	_____ (Required)
3	Master Plumber's Name	Please enter your Master Plumber's full name as listed on license.	_____ (Required)

2	70	HR	Standard hourly rate - Journeyman Plumber	\$_____
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Manufacturer: Manufacturer #:

Supplier Notes: _____

Item Attributes: Please review the following and respond where necessary

#	Name	Note	Response
1	After hours rate	Please state your emergency repair rate per hour for a Journeyman Plumber. This is the rate that will be charged after standard business hours and on holidays.	\$_____ (Required)

3	20	HR	Standard hourly rate - Plumber's Helper/Apprentice	\$_____
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Manufacturer: Manufacturer #:

Supplier Notes: _____

Item Attributes: Please review the following and respond where necessary

#	Name	Note	Response
1	After hours rate	Please state your emergency repair rate per hour for a Plumber's Helper/Apprentice. This is the rate that will be charged after standard business hours and on holidays.	\$_____ (Required)