

WALLACE COMMUNITY COLLEGE – DOTHAN

1141 WALLACE DRIVE
Dothan, Alabama 36303
March 21, 2023

Dear Sir or Madam:

Sealed bids for items or services detailed herein will be accepted in the Business Office of Wallace Community College – Dothan (WCCD) until the time and date indicated below.

As provided by state statute, the college reserves the right to accept or reject all bids or any portion thereof.

DR. LINDA C. YOUNG, President
Marc Nicholas, Dean of Business Affairs

Bid Instructions:

1. Price to be quoted should include shipping cost, if any, for delivery to Dothan, AL.
2. No price shall include state tax or federal excise tax. Certificates furnished upon request.
3. Bid must be submitted in ink with signatures and/or initials as required. Pencil will not be accepted.
4. Bid must be notarized.
5. Bidder must use the form provided and clearly indicate the bid number and opening date on the outside of the return envelope.
6. If a requested item or service cannot be furnished as specified, a substitute may be made by giving full description of item or service being bid.
7. No errors to evaluation criteria will be corrected after bids are opened. However, the College reserves the right to waive or allow correction of technical errors in accordance with Alabama law. The College also reserves the right to negotiate price and terms with the awarded bidder.
8. Alabama laws require that, as a condition for the award of a contract by a school board to a business entity or employer with one or more employees working in Alabama, **the business entity or employer must provide documentation of enrollment in the E-Verify program.** During the performance of the contract, the business entity or employer shall participate in the E-Verify program and shall verify every employee that is required to be verified according to the applicable federal rules and regulations. The contractor's E-Verify Memorandum of Understanding must be included with the bid. If you do not believe these requirements are applicable to your entity, include an explanation justifying such exemption. An entity can obtain the E-Verify Memorandum of Understanding upon completion in the E-Verify enrollment process located at the Federal website www.e-verify.gov. The Alabama Department of Homeland Security <http://immigration.alabama.gov> has also established an E-Verify employer agent account for any business entity or employer with 25 or fewer employees that will provide a participating business entity or employer with the required documentation of enrollment in the E-Verify program. An Employee Identification Number (EIN) also known as a Federal Tax Identification Number, is required to enroll in E-Verify or to establish an E-Verify employer agent account.
9. Bids exceeding \$10,000.00 must include a Bid Bond for 5% of total bid, provided that bonding is available for included services, equipment, or materials. The Bid Bond must be furnished **prior** to contract award. **A Cashier's Check made payable to Wallace Community College – Dothan for 5% of the total bid amount may be substituted in lieu of a bid bond.** For bidders who are not awarded the contract, the cashier's check will be returned with the rejection letter. For the bidder(s) who are awarded the contract, the cashier's check will be returned upon contract completion.

BID NO. 1595 Vending Services for the Wallace Community College Campuses TO BE OPENED AT APPROX. 2:00 PM Tuesday, April 11, 2023 - Business Affairs Conference Room, Grimsley Hall, Dothan Campus.

Wallace Community College – Dothan (WCCD) is seeking bids from qualified firms to provide vending services at both the Dothan and Eufaula campuses according to the specifications herein. Please review **ALL** information—failure to properly review and address all aspects of this documentation could result in an incomplete bid.

A. CONTRACTOR REQUIREMENTS

The vendor must:

- 1) Have sufficient capability to provide all the materials and/or services listed in the following paragraphs to all WCCD Campuses.
- 2) Provide necessary vehicle, liability and workman's compensation insurance as currently required by Alabama law.
- 3) Agree to hold WCCD harmless to all claims, loss, or liability with regard to the destruction of property or the injury of persons in the service area.
- 4) Provide a point of contact to act as a designated contract manager to ensure compliance with contract provisions.

To be provided by the vendor:

- 1) Soft drink and snack machines in the quantities and location described below.
- 2) A micro market for the Dothan Campus as described below.
- 3) Full vending services to both the Dothan and Eufaula Campuses, including restocking machines on a basis that freshness and variety of products are maintained.
- 4) Commissions paid to the Business Office on the Dothan Campus.
- 5) Written guidelines for reconciling patron complaints and refund requests due to machine malfunction.

VENDING MACHINES

LOCATION	TYPE & NUMBER OF MACHINES	PRICE PER BOTTLE	COMMISSION PER BOTTLE
Drink Machines (20 oz.)			
Dothan	11	_____	_____
Eufaula	2	_____	_____
Specialty Drink Machines		PERCENT COMMISSION	
Dothan	1	_____	
Eufaula	0	_____	
Snack Machines		PERCENT COMMISSION	
Dothan	9	_____	
Eufaula	1	_____	

In addition to the vending machines detailed above, the College expects the vendor to install and maintain a micro market to include the following:

A micro market for a section of wall measuring approximately 30 linear feet including refrigerators, snack displays, a coffee maker, and a payment kiosk. The College expects to sell drinks and snacks in the Heersink Family Health Science Building, so the market will be accessible during normal operational hours, Monday through Thursday, 7:30 am to 4:30 pm, and Friday, 7:30 am to 2:00 pm.

MICRO MARKET

ITEM TYPE	PERCENT COMMISSION
Drinks	_____
Snacks	_____
Other (please specify)	_____

The vendor should include information related to brands and variety of products available in both the vending machines and the micro market.

In submitting this bid, the vendor agrees to provide quality products and service to the students and employees of Wallace Community College. The vendor also agrees to ensure that all vending machines and the micro market are clean, pest free, maintained in good working condition and stocked with a variety of products that meet the manufacturer's guidelines for freshness and storage.

The College is aware that vendors often offer incentives such as signing bonuses and negotiable commission rates based on sales. Please detail any other considerations such as this in the space below.

B. CONTRACT TERM

The services described herein will commence on May 1, 2023 and will continue through April 30, 2026 with 2 one-year option periods available extending the total contract through April 30, 2028. Each option year will be exercised independently. The College will inform the contractor of their intent regarding option periods by March 1st of each option year. The contractor agrees to respond by March 15th of each option year accepting or declining the option period. If either party declines to exercise the option period, services shall continue at the stated conditions until April 30th of the respective year.

C. COMMISSION PAYMENT

While the contract will be awarded on a base period and option period basis, commission payment should be made to the College monthly. The vendor should make commission payment to Wallace Community College by the 10th day of the succeeding month of service.

D. TERMINATION

- 1) The successful bidder and the College reserve the right to terminate the contract upon a 90-day written notice, without cost, or obligation to either party.
- 2) The College reserves the right to terminate the contract for non-performance should the contractor not meet the criteria of the contract. If the contractor does not meet the contract requirements, the College will issue a cure notice specifying the deficiencies found and allowing a time for correction (normally 10 days). If the deficiencies are not corrected in the time frame specified, the College may terminate the contract.

- 3) The contractor should continue performance at the contracted level during any notice period. If the College is required to procure services from other sources, the contractor may be responsible for those costs.

E. BID SUBMITTAL

Responses should be submitted in a sealed envelope marked "Vending Services Bid #1595" by Tuesday, April 11, 2023 at 2:00 PM to Marc Nicholas, Dean of Business Affairs, 1141 Wallace Drive, Dothan, AL 36303. Any questions can be directed to the Purchasing Manager, Joley Anderson, at 334-556-2288.

F. EVALUATION PROCESS

The bid providing the best overall service and cost to the College will be awarded the contract based solely on the following evaluation factors:

a) Commission percentages	80%
b) Variety of available products	10%
c) Other considerations (as detailed by bidder)	10%
Total:	100%

G. AWARD

The contract will be awarded within two weeks of bid opening. The awarded contractor will be notified by email and postal mail. Rejection letters will be mailed to participating vendors who do not receive the award.

The College reserves the right to accept or reject any or all proposals, to waive technical errors, and to award this contract to the bidder who provides the best overall service, reliability, and cost to the College in accordance with the provisions of The Code of Alabama 1975, Title 41 Chapter 16, Public Contracts.

H. CERTIFICATION/ACKNOWLEDGEMENT

In compliance with Act 2016-312, the contractor hereby certifies that it is not currently engaged in, and will not engage in, the boycott of a person of an entity based in, or doing business with, a jurisdiction with which this State can enjoy open trade.

We are in position to furnish the items/services specified herein and can begin services within _____ days after entering contract. I hereby affirm I have not been in any agreement or collusion among bidders or prospective bidders in restraint of freedom of competition by agreement to bid, at a fixed price, or to refrain from bidding or otherwise.

Firm: _____

Signature: _____

Terms: _____

Date: _____

Address: _____

Phone No: _____

Sworn to and subscribed before me this _____ day of _____ 20_____ _____ Notary Public My Commission Expires: ____ / ____ / _____
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State of Alabama Disclosure Statement

(Required by Act 2001-955)

ENTITY COMPLETING FORM

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS RESPONSIBLE FOR GRANT AWARD

ADDRESS

CITY, STATE, ZIP

TELEPHONE NUMBER

This form is provided with:

☐ Contract ☐ Proposal ☐ Request for Proposal ☐ Invitation to Bid ☐ Grant Proposal

Have you or any of your partners, divisions, or any related business units previously performed work or provided goods to any State Agency/Department in the current or last fiscal year?

☐ Yes ☐ No

If yes, identify below the State Agency/Department that received the goods or services, the type(s) of goods or services previously provided, and the amount received for the provision of such goods or services.

STATE AGENCY/DEPARTMENT	TYPE OF GOODS/SERVICES	AMOUNT RECEIVED
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Have you or any of your partners, divisions, or any related business units previously applied and received any grants from any State Agency/Department in the current or last fiscal year?

☐ Yes ☐ No

If yes, identify the State Agency/Department that awarded the grant, the date such grant was awarded, and the amount of the grant.

STATE AGENCY/DEPARTMENT	DATE GRANT AWARDED	AMOUNT OF GRANT
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1. List below the name(s) and address(es) of all public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF PUBLIC OFFICIAL/EMPLOYEE	ADDRESS	STATE DEPARTMENT/AGENCY
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OVER

2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

NAME OF FAMILY MEMBER	ADDRESS	NAME OF PUBLIC OFFICIAL/ PUBLIC EMPLOYEE	STATE DEPARTMENT/ AGENCY WHERE EMPLOYED
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If you identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the public officials, public employees, and/or family members as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

Describe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the public official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (Attach additional sheets if necessary.)

List below the name(s) and address(es) of all paid consultants and/or lobbyists utilized to obtain the contract, proposal, request for proposal, invitation to bid, or grant proposal.

NAME OF PAID CONSULTANT/LOBBYIST	ADDRESS
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By signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and correct to the best of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed \$10,000.00, is applied for knowingly providing incorrect or misleading information.

Signature	Date
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Notary's Signature	Date	Date Notary Expires
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Act 2001-995 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.

State of _____

County of _____

CERTIFICATE OF COMPLIANCE WITH THE BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (ACT 2011-535, as amended by Act 2012-491)

RE Contract/Grant/Incentive (describe by number or subject): _____ **by and between** _____ **(Contractor/Grantee)**
and _____ **(State Agency or Department or other Public Entity)**

The undersigned hereby certifies to the State of Alabama as follows:

1. The undersigned holds the position of _____ with the Contractor/Grantee named above, is authorized to provide the representations that are set out in this Certificate as the official and binding act of that entity, and has knowledge of the provisions of THE BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT (ACT 2011-535 of the Alabama Legislature, as amended by Act 2012-491) which is described herein as "the Act".
2. Applying the following definitions from the Section 3 of the Act, the Contractor/Grantee business structure is as indicated by my initials.

BUSINESS ENTITY. Any person or group of persons employing one or more persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood, whether for profit or not for profit. "Business entity" shall include, but not be limited to the following:

- a. Self-employed individuals, business entities filing articles of incorporation, partnerships, limited partnerships, limited liability companies, foreign corporations, foreign limited partnerships, foreign limited liability companies authorized to transact business in this state, business trusts, and any business entity that registers with the Secretary of State.
- b. Any business entity that possesses a business license, permit, certificate, approval, registration, charter, or similar form of authorization issued by the state, any business entity that is exempt by law from obtaining such a business license, and any business entity that is operating unlawfully without a business license.

EMPLOYER. Any person, firm, corporation, partnership, joint stock association, agent, manager, representative, foreman, or other person having control or custody of any employment, place of employment, or of any employee, including any including any person or entity employing any person for hire within the State of Alabama, including a public employer. This term shall not include the occupant of a household contracting with another person to perform casual domestic labor within the household.

_____ a. The Contractor/Grantee is a business entity or employer as those terms are defined in Section 3 of the Act.

_____ b. The Contractor/Grantee is not a business entity or employer as those terms are defined in Section 3 of the Act.

3. As of the date of this Certificate, Contractor/Grantee does not knowingly employ an unauthorized alien, as that term is defined in Section 3 of the Act, within the State of Alabama and hereafter it will not knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama.

{Alien is any person who is not a citizen or national of the United States, as described in 8 U.S.C. § 1101, et seq., and any amendments thereto.}

{Unauthorized Alien is an alien who is not authorized to work in the United States as defined in 8 U.S.C. § 1324a(h)(3).}

4. Contractor/Grantee is enrolled in E-Verify unless {initial the following selections which apply}:

_____ (a) it is not eligible to enroll because of the rules of that program or other factors beyond its control.

_____ (b) it is excused from the requirement of enrollment in E-Verify because it does not have an employee in the State of Alabama.

Certified this _____ day of _____ 20_____.

Name of Contractor/Grantee/Recipient

By: _____

Its _____

The above Certification was signed in my presence by the person whose name appears above, on this _____ day of _____ 20_____.

WITNESS _____

Print Name of Witness

Certification Pursuant to Act No. 2006-557

Alabama Law (Section 41-4-116, Code of Alabama 1975) provides that every bid submitted and contract executed shall contain a certification that the Vendor, Contractor, and all its affiliates that make sales for delivery into Alabama or leases for use in Alabama are registered, collecting, and remitting Alabama State and Local Sales, Use, and/or Lease tax on all taxable sales and leases into Alabama. **By submitting this bid, the bidder is hereby certifying that they are in full compliance with Act No. 2006-557.** They are not barred from bidding or entering into a contract pursuant to 41-4-116, and acknowledge that the awarding authority may declare the contract void if the certification is false.

Company Name _____

Signature _____ Date _____

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name /disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
					-				

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.