

	<b>Piedmont Technical College</b> Procurement Office PO Box 1467 Greenwood, SC 29648 Telephone: (864) 941-8314	<b>Request for Quotation</b>  <b>THIS IS NOT AN ORDER</b>
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Quotations must be received No Later Than 2:00 pm <b>August 5, 2015</b>	Send quotation to the above address Attention of <b>Kevin Wells</b>	Quotation Number: <b>PTC-271</b>	Date: <b>7/1/2015</b>
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Print Company Name and Address

Please quote your lowest delivered price of the items or services listed below. The Materials Management Department reserves the right to reject any or all quotes and to waive any or all technicalities.

1. If an item cannot be furnished, indicate by **NO QUOTE**.
2. All quotes must be signed by the vendor's Representative and terms noted, failure to comply with this instruction may result in disqualification of the quote.

**NON-RESIDENT VENDORS ONLY:** Yes \_\_\_\_\_ No \_\_\_\_\_ We have read and applied for (or already have) a non-resident taxpayer affidavit (I-312).

**RESIDENT VENDOR PREFERENCE:** Yes \_\_\_\_\_ No \_\_\_\_\_ SC Resident Vendor Preference as defined in Section 11-35-1524 of the SC Consolidated Procurement Code.

S.C. Address:

Federal I.D. or Social Security No. \_\_\_\_\_ SC Minority Certification Number (If Applicable) \_\_\_\_\_

Submitted by (Print Name) \_\_\_\_\_ Signature \_\_\_\_\_ Telephone \_\_\_\_\_

Item no.	Quantity and Unit	Description of Commodity or Services	Unit Price	Total Price
1	5000 EA.	Student Accident Insurance Fall Semester Provide student accident insurance in accordance with attached specifications		
2	5100 EA.	Student Accident Insurance Spring Semester Provide student accident insurance in accordance with attached specifications		
3	3000 EA.	Student Accident Insurance Summer Semester Provide student accident insurance in accordance with attached specifications		

TOTAL BID AMOUNT \$ \_\_\_\_\_

Actual student enrollment totals for each semester will be provided at each renewal period for billing purposes.

**Piedmont Technical College**  
**Student Accident**  
**Insurance Specifications**

**I. Name of Policyholder:**

Piedmont Technical College

**II. Classes of persons to be insured are:**

All students enrolled in credit courses.

**III. Insurance shall provide protection while:**

Attending school on campus, excluding participations in any organized sport, but to include travel to and from scheduled off campus courses. Clinics, field trips, off-campus work projects, internships, practicums and participation therein.

Successful bidder will be the secondary (excess) carrier for student accident claims.

**IV. Premium shall be:**

**Per number insured per semester** (not subject to a minimum).

Billing shall be done on a semester basis for credit students.

**V. Minimum coverages shall be:**

Accidental Injury Expense.....\$10,000 Benefit Maximum  
Subject to deductible amount of.....\$ No Deductible

And Limits of:

Hospital Room and Board Allowance.....U&C per Day  
Accidental Death and Dismemberment.....\$1,500 Principal Sum  
Dental Coverage.....\$1,000

**VI. Accidental Injury Expense Benefit:**

(See Attached)

**VII: Accidental Death and Dismemberment Benefit:**

(See Attached)

**VIII: Exclusions and Limitations:**

(See Attached)

**ACCIDENTAL INJURY EXPENSE BENEFIT**

Upon receipt of due proof that the Injured Person has received treatment for injury covered under this policy, the Company will pay benefits, subject to the Deductible amount and limitations for the usual and customary expense required for such treatment not to exceed the Benefit Maximum as a result of any one injury for the following:

1. Out-Patient Hospital Expenses such as the use of the emergency room, X-rays, casts, dressing and medical supplies.
2. Hospital Room and Board Expense for daily charges made by the hospital for room and board during resident in-patient confinement.
3. Hospital Miscellaneous Charges made by hospital for services and supplies other than room and board such as cost of operating room, laboratory, X-rays, drugs and medicines. Anesthesia and dressings while confined in a hospital as a resident in-patient.
4. Treatment by a physician or chiropractor.
5. Graduate Registered Nurse other than a nurse who is related to the Insured Person by blood or marriage or ordinarily resides in the Injured Persons home.
6. Professional Ambulance Service for transportation to or from a hospital.
7. Dental treatment made necessary by injury to natural teeth.

**ACCIDENTAL DEATH AND DISMEMBERMENT BENEFIT**

Upon receipt of due proof that the Injured Person has sustained an injury covered under the Policy which within one hundred and eighty (180) days after the date of accident, results in any of the losses set forth in the Schedule of Losses below, the Company will pay the amount shown opposite such loss.

Where two or more losses separately named in the Schedule below occur as a result of any one accident, the maximum amount payable will be the amount specified for the largest.

AGGREGATE MAXIMUM PAYABLE FOR LISS OF LIFE BENEFIT ARISING OUT OF ANY ONE ACCIDENT SHALL BE \$150,000.00.

**SCHEDULE OF LOSSES**

**For Loss of:**

Life..... The Principal Sum

Both Hands or Both Feet.....	The Principal Sum
Sight of Both Eyes.....	The Principal Sum
One Hand and One Foot.....	The Principal Sum
Sight of One Eye and One Hand or One Foot.....	The Principal Sum
Sight of One Eye.....	One-Half The Principal Sum
One Hand or One Foot.....	One-Half The Principal Sum

“**Loss**” shall mean with regard to hands, loss of four fingers entire; with regard to feet, actual severance through or above ankle joints; with regard to eyes, entire and irrecoverable loss of sight beyond remedy by surgical or other means.

Payment of any Accidental death benefit will be made to the first surviving class of the following classes of successive preference beneficiaries: Insured Person’s (a) spouse; (b) surviving children; (c) surviving parents; (d) estate.

### **EXCLUSIONS AND LIMITATIONS**

The benefits of the Policy will not be paid for loss caused, contributed to of resulting from:

- (a) Dental treatment except for injury to natural teeth
- (b) Eyeglasses or prescriptions thereof or other equipment for corrective treatment of sight
- (c) Infections except pyrogenic infections caused solely by injury
- (d) Loss resulting from war, or any act of war, or while in service in the armed forces.
- (e) Suicide or attempted suicide while sane or insane, or intentionally self inflicted injury
- (f) Elective surgery except cosmetic surgery made necessary as a result of a covered injury
- (g) Loss resulting from flying in non-scheduled airlines, private flying or skydiving
- (h) Any charges which the Insured Person is not legally obligated to pay
- (i) Loss resulted from participation in a riot or civil disorder, or commission of or attempt to commit a felony
- (j) Injury resulting from the use of narcotics or drugs not prescribed by a physician or occurring while under the influence or affected by intoxicants
- (k) Confinement in a hospital owned or operated by the Federal, State, County, or Local Government unless, in the absence of insurance, there is a legal obligation to pay for treatment or services
- (l) Hernia, regardless of cause
- (m) Injury sustained in the consequence of play, practice or travel in connection with inter-collegiate sports.

### Questions:

Deadline for receipt of questions regarding this Solicitation: 07/22/15 2:00PM

Quotations will be opened on **Wednesday, August 5, 2015** in Room 175A of the Procurement Office of PTC.

To submit questions or request additional information, send your written question/request to be received in Piedmont Technical College's Procurement Office no later than the date and time shown above.

Send Questions to:

Mail:

Piedmont Technical College  
Kevin Wells  
PO Box 1467  
Greenwood, SC 29648

Email: [wells.k@ptc.edu](mailto:wells.k@ptc.edu)  
Phone: (864) 941-8314  
Fax: (864) 941-8313

**Mark Envelopes, faxes or emails:** Questions: **PTC- 271**

## I. Scope of Solicitation

## Scope

The purpose of this solicitation is to provide a source or sources for goods or services as listed herein. This contract will be for the initial period of **September 1, 2015 to August 31, 2016**, followed by up to four renewal periods. The maximum contract period shall be **9/1/15 – 8/31/20**. Renewals will be automatic unless either party notifies the other of any change.

### Type of Contract

A contract will be awarded by the Piedmont Technical College Procurement Office in the form of a purchase order for the items indicated and in accordance with the provisions and conditions of this solicitation.

## II. Instructions to Offerors

### A. General Instructions

AMENDMENTS TO SOLICITATION (JUL 2006) (a) The Solicitation may be amended at any time prior to opening. All actual and prospective Offerors which have received a bid package will receive a copy of any amendments issued. (b) Bidders shall acknowledge receipt of any Amendment to this solicitation (1) by signing and returning the Amendment, (2) by letter, or (3) by submitting a bid that indicates in some way that the bidder received the amendment.

**BID / PROPOSAL AS OFFER TO CONTRACT (JUL 2006)** By submitting Your Bid, Quotation or Proposal, You are offering to enter into a contract with Piedmont Technical College. Without further action by either party, a binding contract shall result upon final award. Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror on the Cover Page. An Offer may be submitted by only one legal entity; "joint bids" are not allowed.

BOARD AS PROCUREMENT AGENT (JUL 2006) (a) Authorized Agent. All authority regarding the conduct of this procurement is vested solely with the responsible Procurement Officer. Unless specifically delegated in writing, the Procurement Officer is the only government official authorized to bind the government with regard to this procurement. (b) Purchasing Liability. The Procurement Officer is an employee of Piedmont Technical College acting on behalf of the College pursuant to the Consolidated Procurement Code. Any contracts awarded as a result of this procurement are between the Contractor and the College.

**SUBMISSION OF OFFER:** Offers must be received in the Procurement office in a sealed envelope by date and time stated on cover page.

**DEADLINE FOR SUBMISSION OF OFFER (JUL 2006)** Any offer received after the procurement officer of the governmental body or his designee has declared that the time set for opening has arrived, shall be rejected unless the offer has been delivered to the

designated purchasing office or the governmental bodies' mail room which services that purchasing office prior to the bid opening. [R.19-445.2070(H)]

OMIT TAXES FROM PRICE (JUL 2006) Do not include any taxes in Your price that the College may be required to pay.

QUESTIONS FROM OFFERORS (JUL 2006) (a) Any prospective offeror desiring an explanation or interpretation of the solicitation, drawings, specifications, etc., must request it in writing. Questions must be received by the Procurement Officer no later than five (5) days prior to opening unless otherwise stated on the Cover Page. Oral explanations or instructions will not be binding. Any information given a prospective offeror concerning a solicitation will be furnished promptly to all other prospective offerors as an Amendment to the solicitation, if that information is necessary for submitting offers or if the lack of it would be prejudicial to other prospective offerors. (b) The College seeks to permit maximum practicable competition. Offerors are urged to advise the Procurement Officer - as soon as possible - regarding any aspect of this procurement, including any aspect of the Solicitation that unnecessarily or inappropriately limits full and open competition.

AMENDMENTS: All amendments to and interpretations of this solicitation shall be in writing from the College's Procurement Office. The Procurement officer shall not be legally bound by any amendment or interpretation that is not in writing.

RESPONSIVENESS / IMPROPER OFFERS (JUL 2006) (a) Bid as Specified. Offers for supplies or services other than those specified will not be considered unless authorized by the Solicitation.

SIGNING YOUR OFFER (JUL 2006) Every Offer must be signed by an individual with actual authority to bind the Offeror. (a) If the Offeror is an individual, the Offer must be signed by that individual. If the Offeror is an individual doing business as a firm, the Offer must be submitted in the firm name, signed by the individual, and state that the individual is doing business as a firm. (b) If the Offeror is a partnership, the Offer must be submitted in the partnership name, followed by the words "by its Partner," and signed by a general partner. (c) If the Offeror is a corporation, the Offer must be submitted in the corporate name, followed by the signature and title of the person authorized to sign. (d) An Offer may be submitted by a joint venture involving any combination of individuals, partnerships, or corporations. If the Offeror is a joint venture, the Offer must be submitted in the name of the Joint Venture and signed by every participant in the joint venture in the manner prescribed in paragraphs (a) through (c) above for each type of participant. (e) If an Offer is signed by an agent, other than as stated in subparagraphs (a) through (d) above, the Offer must state that it has been signed by an Agent. Upon request, Offeror must provide proof of the agent's authorization to bind the principal.

REJECTION/CANCELLATION (JUL 2006) The College may cancel this solicitation in whole or in part. The College may reject any or all proposals in whole or in part. [SC Code Section 11-35-1710 & R.19-445.2065.]

TAXPAYER IDENTIFICATION NUMBER (JUL 2006) (a) If Offeror is owned or controlled by a common parent as defined in paragraph (b) of this provision, Offeror shall submit with its Offer the name and TIN of common parent.

WITHDRAWAL OR CORRECTION OF OFFER (JUL 2006) Offers may be withdrawn by written notice received at any time before the exact time set for opening. If the Solicitation authorizes facsimile offers, offers may be withdrawn via facsimile received at any time before the exact time set for opening. A bid may be withdrawn in person by a bidder or its authorized representative if, before the exact time set for opening, the identity of the person requesting withdrawal is established and the person signs a receipt for the bid. The withdrawal and correction of Offers is governed by S.C. Code Section 11-35-1520 and Regulation 19-445.2085.

## **B. Special Instructions**

Bidding Instructions:

Bid as specified.

Include shipping/delivery cost.

Include quote for annual service/maintenance cost.

INCLUDE TOTAL BID AMOUNT

\$ \_\_\_\_\_

## S.C. RVP & SC/US PREFERENCES

**SOUTH CAROLINA RESIDENT VENDOR PREFERENCE:** A vendor is considered to be a resident of this state if the vendor is authorized to transact business within the state, \*maintains an office in the state, maintains an inventory for expendable items which are representative of the general type of commodities on which the bid is submitted and located in South Carolina at the time of the bid having a total value of ten thousand dollars or more based on the bid price, but not to exceed the amount of the contract, or is a manufacturer which is headquartered and has at least a ten million dollar payroll in South Carolina and the product is made or processed from raw materials into a finished end-product by such manufacturer or an affiliate (as defined in section 1563 of the Internal Revenue Code) of such manufacturer, and has paid all assessed taxes. (RE: Section 11-35-1524 of the South Carolina Procurement Code).

I certify that I am a resident vendor meeting all qualifications as defined in Section 11-35-1524 of the South Carolina Consolidated Procurement Code and hereby request the preference be exercised on my behalf in the consideration of award on this bid.

In order to make claim for this preference in the award of this bid, the person signing the bid must place their initials here: \_\_\_\_\_.

\*Address phone # of S.C. Office. (Must be completed if making claim)

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

**SC/US MADE, MANUFACTURED OR GROWN END-PRODUCT PREFERENCE:** By signing this bid and checking the appropriate space(s) provided and identified on the bid pricing schedule, vendor certifies that the end-product(s) as shown in this bid are either made, manufactured or grown in South Carolina or other states of the United States. (RE: 11-35-1524))

**NOTE: THESE DO NOT APPLY TO A VENDOR OF GOODS WHETHER IN QUANTITY OR NOT WHEN THE PRICE OF A SINGLE UNIT IS MORE THAN THIRTY THOUSAND DOLLARS (\$30,000.00), whether or not more than one unit is bid or offered or to any solicitation, bid, offer or procurement where the contract award is less than \$10,000.**

### **NOTICE – IMPORTANT INFORMATION PERTAINING TO PREFERENCES –**

SC RVP & SC Made Preferences have been increased to 7% effective June, 1997. If a bidder has not requested the preferences he will neither be entitled to claim any preference against another bidder nor will he be protected from application of another bidder's claim to a preference against his bid in determining contract award.

# **BIDDER'S CHECKLIST**

## *AVOID COMMON BIDDING MISTAKES*

Review this checklist prior to submitting your bid.  
If you fail to follow this checklist, you risk having your bid rejected.

DO NOT INCLUDE ANY OF YOUR STANDARD CONTRACT FORMS!

UNLESS EXPRESSLY REQUIRED, DO NOT INCLUDE ANY ADDITIONAL BOILERPLATE CONTRACT CLAUSES.

REREAD YOUR ENTIRE BID TO MAKE SURE YOUR BID DOES NOT TAKE EXCEPTION TO ANY OF THE STATE'S MANDATORY REQUIREMENTS.

MAKE SURE YOU HAVE PROPERLY MARKED ALL PROTECTED, CONFIDENTIAL, OR TRADE SECRET INFORMATION IN ACCORDANCE WITH THE HEADING ENTITLED: FOIA BIDDING INSTRUCTIONS, SUBMITTING CONFIDENTIAL INFORMATION. **DO NOT MARK YOUR ENTIRE BID AS CONFIDENTIAL, TRADE SECRET, OR PROTECTED! DO NOT INCLUDE A LEGEND ON THE COVER STATING THAT YOUR ENTIRE RESPONSE IS NOT TO BE RELEASED!**

HAVE YOU PROPERLY ACKNOWLEDGED ALL AMENDMENTS? INSTRUCTIONS REGARDING HOW TO ACKNOWLEDGE AN AMENDMENT SHOULD APPEAR IN ALL AMENDMENTS ISSUED.

MAKE SURE YOUR BID INCLUDES A COPY OF THE SOLICITATION COVER PAGE. MAKE SURE THE COVER PAGE IS SIGNED BY A PERSON THAT IS AUTHORIZED TO CONTRACTUALLY BIND YOUR BUSINESS.

MAKE SURE YOUR BID INCLUDES THE NUMBER OF COPIES REQUESTED.

CHECK TO ENSURE YOUR BID INCLUDES EVERYTHING REQUESTED!

CHECK *AGAIN* TO ENSURE YOUR BID INCLUDES EVERYTHING REQUESTED!

IF YOU HAVE CONCERNS ABOUT THE SOLICITATION, DO NOT RAISE THOSE CONCERNS IN YOUR RESPONSE! **AFTER OPENING, IT IS TOO LATE! IF THIS SOLICITATION INCLUDES A PRE-BID CONFERENCE OR A QUESTION & ANSWER PERIOD, RAISE YOUR QUESTIONS AS A PART OF THAT PROCESS!** PLEASE SEE BIDDING INSTRUCTIONS AND ANY PROVISIONS REGARDING PRE-BID CONFERENCES.

This checklist is included only as a reminder to help bidders avoid common mistakes.  
Responsiveness will be evaluated against the solicitation, **not** against this checklist.  
You do not need to return this checklist with your response.

**Revision: 07/06**