

GRAND RAPIDS PUBLIC SCHOOLS

Wide Area Network

Bidder Response Form

April 2014

SECTION I - GENERAL TERMS AND CONDITIONS

1. GENERAL

This section (1. GENERAL) must be completed in full by every respondent (including proposal partnerships) proposing to provide services and/or equipment in response to this RFP.

Vendor Name: _____

RFP Author Name: _____

RFP Author Telephone Number: _____

RFP Author Fax Number: _____

RFP Author e-mail address: _____

Primary Contact Name _____

Primary Contact Telephone Number: _____

Primary Contact Fax Number: _____

Primary Contact e-mail address: _____

1.1 INTENT

Include with your proposal all relevant information.

1.5 PROPOSAL FORMAT

1.5.2 System Literature and Brochures

Include with your proposal all appropriate product brochures.

1.5.3 Cutsheets

Include with your proposal all appropriate product cutsheets/technical documentation.

1.5.4 Bill of Material

Include a complete bill of material with your proposal. It should be organized by system component to include:

- A. System Component Name/Description
- B. Quantity Quoted
- C. Unit Price
- D. Extended Price

Be sure to include all costs for telecommunications service. Include a sample invoice, which lists all costs, for GRPS review.

1.5.5 Description of Technical Solution

For each section the bidder is responding to, there is to be a brief narrative explaining the proposed design and any unique strengths/weaknesses that those reviewing it shall be aware of.

1.5.6 Diagram of Design

For each section where requested, the bidder shall submit a diagram of their design providing a pictorial representation of their proposed solution.

1.5.7 Implementation Schedule

Include a project time line of an anticipated schedule for delivery. Assume contract award within two (2) weeks of proposal due date.

1.5.8 Additional Information

Any additional information the bidder would like to submit, including any Add/Alternate designs should be attached here.

1.37 Universal Service Fund

SPIN: _____

SECTION II – WIDE AREA NETWORK

2. VENDOR PROFILE

2.1 VENDOR NAME

2.2 VENDOR HISTORY

Year in which company was founded:

Is company wholly owned? If not, state parent company:

State the gross sales of the company's last fiscal year:

2.3 PERSONNEL/FACILITIES

State the number of facilities located within a 50 mile radius of the Owner and their city locations:

State the location of the facility that will be responsible for this installation:

Out of the above office, state the number of:

Total Employees: _____

Minority Employees: _____

Women Employees: _____

Service Technicians: _____

Service Technicians available and trained

For use on the proposed product(s):

Service Technicians available and Certified (if applicable)

For use on the proposed product(s):

3. REFERENCES AND SUBCONTRACTORS

List three (3) similar installations of the recommended system which were installed by your company. Please note those that were handled by the office which will be responsible for this installation:

VENDOR REFERENCE #1

Reference Name: _____

Reference Phone # and Contact Name: _____

Date of Installation: _____

Equipment Type: _____

Number of Users/Sites: _____

Applications Implemented: _____

Will your facility that served this customer be responsible for the proposed project?

YES: _____ NO: _____

VENDOR REFERENCE #2

Reference Name: _____

Reference Phone # and Contact Name: _____

Date of Installation: _____

Equipment Type: _____

Number of Users/Sites: _____

Applications Implemented: _____

Will your facility that served this customer be responsible for the proposed project?

YES: _____ NO: _____

VENDOR REFERENCE #3

Reference Name: _____

Reference Phone # and Contact Name: _____

Date of Installation: _____

Equipment Type: _____

Number of Users/Sites: _____

Applications Implemented: _____

Will your facility that served this customer be responsible for the proposed project?

YES: _____ NO: _____

SUBCONTRACTORS

Will a subcontractor(s) be used?

Yes ___ No ___

If YES, name of subcontractor(s):

Have you worked with this subcontractor within the last 12 months? Yes ___ No ___

Responsibilities to include:

4. SERVICE RATES AND RESPONSE

This information will be assumed to be applicable over all equipment quoted in your proposal. If certain equipment is serviced under a separate set of rates or is handled through a separate organization, note your exceptions in a narrative or copy this page and fill it out for each product's different service arrangement.

1. Is on-site service available?
2. What is the 5x8 hourly service rate for a system certified technician?
3. What is the trip charge (or travel time charge)?
4. If travel time is charged, explain how so:
5. What is the normal service call response time? Guaranteed maximum?
Normal: _____ Maximum: _____
6. What is the emergency service call response time? Guaranteed maximum?
Normal: _____ Maximum: _____
7. How do you define an "emergency"?
8. Explain your established trouble reporting procedures: _____

RFP COMPLIANCE SUMMARY SHEET

RFP Compliance Summary Sheet

Bidders are to mark either the Comply, Exception, or Not Comply column for each item. Comply indicates the bidder understands and agrees to comply fully. Exceptions must be fully explained on the bottom of this document in the Compliance Exceptions area. The Owner reserves the right to reject any proposal for non-compliance with one or more of the specifications.

Section	Requirement	Comply	Exception	Not Comply
SECTION I - GENERAL TERMS AND CONDITIONS				
1.1	Intent			
1.2	Notification of Intent to Participate			
1.3	Deadline for Proposals			
1.4	Bid Clarifications			
1.5	Proposal Format			
1.5.1	Bidder Response Forms			
1.5.2	System Literature and Brochures			
1.5.3	Cutsheets			
1.5.4	Bill of Material			
1.5.5	Description of Technical Solution			
1.5.6	Diagram of Design			
1.5.7	Implementation Schedule			
1.5.8	Additional Information			

SECTION I - GENERAL TERMS AND CONDITIONS				
1.6	Confidential Information			
1.7	Right to Request Additional Information			
1.8	Right of Refusal			
1.9	Proposal Preparation Costs			
1.10	System Design Costs			
1.11	Pricing Eligibility Period			
1.12	Additional Charges			
1.13	Turnkey Solution			
1.14	Federal or State Sales, Excise, or Use Taxes			
1.15	Contract Requirements			
1.16	Survival Clause			
1.17	Force Majeure Clause			
1.17.1	Force Majeure Requisites			
1.17.2	120 Day Maximum			
1.17.3	Right of Cancellation			
1.18	Incorporation by Reference			
1.19	Risk During Equip. Storage and Installation			
1.20	Non-Waiver of Agreement Rights			
1.21	Patents, Copyrights, and Proprietary Rights Indemnification			
1.22	Nondiscrimination by Vendors or Agents			
1.23	Subcontractors			

SECTION I - GENERAL TERMS AND CONDITIONS				
1.24	Effect of Regulation			
1.25	Project Management Staff Designation			
1.26	Assignments			
1.27	Vendor as Independent Contractor			
1.28	Insurance			
1.29	Warranty of Fitness for a Particular Purpose			
1.30	Final Acceptance of the System			
1.31	Standard Forms and Contracts			
1.32	Non-Collusion Covenant			
1.33	Advertisement			
1.34	Selection Criterion			
1.35	Special Notes			
1.36	Universal Service Fund			
1.37	Payment Terms			

SECTION II – Wide Area Network				
2.	Vendor Profile			
3.	References and Subcontractors			
4.	Service Rates and Responses			
5.1	Introduction			
5.2	System Scope			
5.3.1	Design			
5.3.2	Topology			
5.3.3	Fault Tolerance			
5.3.4	Monitoring and Notification			
5.3.5	Usage Measurement			
5.3.6	Customer Premise Equipment/Handoff			
5.3.7	Layer 1 Requirements			
5.3.8	Layer 2 Requirements			
5.3.9	Layer 3/Core Network Requirements			
5.3.10	Network Core Connectivity Fault Tolerance			
5.3.11	Layer 3 Processing Fault Tolerance			
5.3.12	Cost			
5.3.13	Phone Support			
5.3.14	Product Longevity			
5.3.15	Planned Maintenance			
5.4	System Service and Support			
5.5	Billing and Fees			
5.6	Other Information			
5.7	Implementation Schedule			
5.8	New Facility Installation			

5.9	Consolidating Locations			
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I authorize that the statements in this response are accurate and true.

(Signature)

(Date)

(Print)

(Title)

(Signature of Company Representative)

**THE AFFIDAVIT SET FORTH BELOW MUST BE EXECUTED ON BEHALF OF
THE VENDOR AND FURNISHED WITH EVERY BID**

NON-COLLUSION AFFIDAVIT

STATE OF: _____

COUNTY OF: _____

TAX ID NUMBER: _____

_____, being duly sworn, deposes and says he/she is the
(Name)

(Title)

of _____ the bidder which has submitted
(Company)

to **Grand Rapids Public Schools** a proposal for a Wide Area Network all as fully set forth in said proposal and that, except as specified below, the aforementioned bidder constitutes the only person, firm or corporation having any interest in said bid or in any contract, benefit or profit which may, might or could accrue as a result of said proposal, said exceptions being as follows:

(If no exceptions, please state)

Affiant further states that said proposal is, in all respects, fair and is submitted without collusion or fraud; and that no member of **Grand Rapids Public Schools** is directly or indirectly interested in said bid.

(Affiant)

SWORN TO and subscribed before me, a Notary Public, in and for the above named State and County

this _____ day of _____, _____.
(Day) (Month) (Year)

(Notary Public)

Compliance Exceptions