

# JANITORIAL SERVICES FOR THE TOWN OF KIAWAH ISLAND

## Invitation to Bid

The **Town of Kiawah Island** requests Proposals for Janitorial Services for its Municipal Center located at 21 Beachwalker Drive, Kiawah Island, SC 29455 and its new Municipal Center at 4475 Betsy Kerrison Parkway when completed. The successful bidder shall provide all necessary services as outlined in the **INVITATION TO BID** document entitled **SCOPE OF SERVICES**.

The **SUBMITTAL FORM** requests the lump sum costs for the services along with other required information in the entitled **SUBMITTAL FORM**. Complete proposals must include qualifications, insurance documentation, experience, proposed fee and all other required documents.

Complete proposals must be mailed or delivered to Town Hall in a sealed envelope marked “**Janitorial Services Bid**” by 2:00pm on Wednesday, August 17, 2016 to: Petra Reynolds, Town of Kiawah Island, 21 Beachwalker Drive, Kiawah Island, SC 29455.

A copy of the complete **INVITATION TO BID** and the **SUBMITTAL FORM** documents referenced above may be obtained on the Town website at [www.kiawahisland.org](http://www.kiawahisland.org) or at Town Hall located at 21 Beachwalker Drive.

For questions or additional information please contact **Rusty Lameo** by calling 843-768-9166 or by email at [rlameo@kiawahisland.org](mailto:rlameo@kiawahisland.org).

# **Janitorial Services for the Town of Kiawah Island**

## **SCOPE OF SERVICES**

Twice weekly cleaning of the following areas located at Town Hall, 21 Beachwalker Dr. Entrances, Lobby, Visitors Center, Restrooms (5), Town Hall (2 floors), and Stairwell through May 31, 2017 or until the Town moves to its new location at 4475 Betsy Kerrison Parkway. The current Town Hall cleaning portion is approximately 8,000 square feet; and the New Town Hall located at 4475 Betsy Kerrison Parkway is approximately 14,000 square feet.

Please provide separate bids for 21 Beachwalker Drive, and 4475 Betsy Kerrison Parkway. Copy of floor plans for new building are attached. Completion date on or about June 2017.

### **Weekly Cleaning performed on Tuesday's and Friday's after 5:00 pm:**

- Vacuum all carpet areas
- Surface dust horizontal surfaces on desks, tables cabinets
- Spot clean all horizontal areas for spillage, marks, etc.
- Empty all trash and recycling containers and dispose in proper collection points (rear of building). Replace liners as necessary
- Sweep and mop all hard floor surfaces
- Clean inside and outside of entry glass and any glass partition
- Sweep stairs and mop floor in stairwell

### **Restrooms / Kitchen**

- Empty trash receptacles. Replace liner as necessary
- Clean and disinfect sinks, toilets, toilet seats and urinals
- Clean all dispensers, mirrors, fixtures, refill as needed
- Spot clean walls and partitions to remove smudges and marks
- Sweep and mop floor with disinfectant
- Disinfect door handles, partition handles and light switches
- Wipe down all counters, chairs and tables
- Restock all paper towels and hand soap

### **Store Room / Janitors' Closet**

- Maintain SDS sheets (post in booklet form)
- Maintain an orderly arrangement of all supplies and paper products
- Maintain an orderly arrangement of equipment; mops, brooms, buckets and vacuum cleaner
- Clean and disinfect service sink
- Sweep and mop service area floor
- Deodorize and disinfect as required

### **Miscellaneous Tasks**

- Report all maintenance problems to Rusty Lameo, Support Services Manager
  - Report when consumable supplies are low
  - Turn off lights
  - Check and lock all doors
  - Set both building alarms
- 

### **Monthly Services provided once per month after 5:00 pm**

- Dust baseboards, remove ink marks and smudges from walls
- Clean chair bases and arms
- High dusting of accessible air vents and ceiling corners, 12 feet and below
- High and low dusting of corners of walls and floors to ensure there are no cobwebs
- Disinfect all door knobs and light switches

### **Quarterly Services:**

Provided on the first weekend of the following months: March, June, September, and December. Clean inside windows and window ledges (inside only).

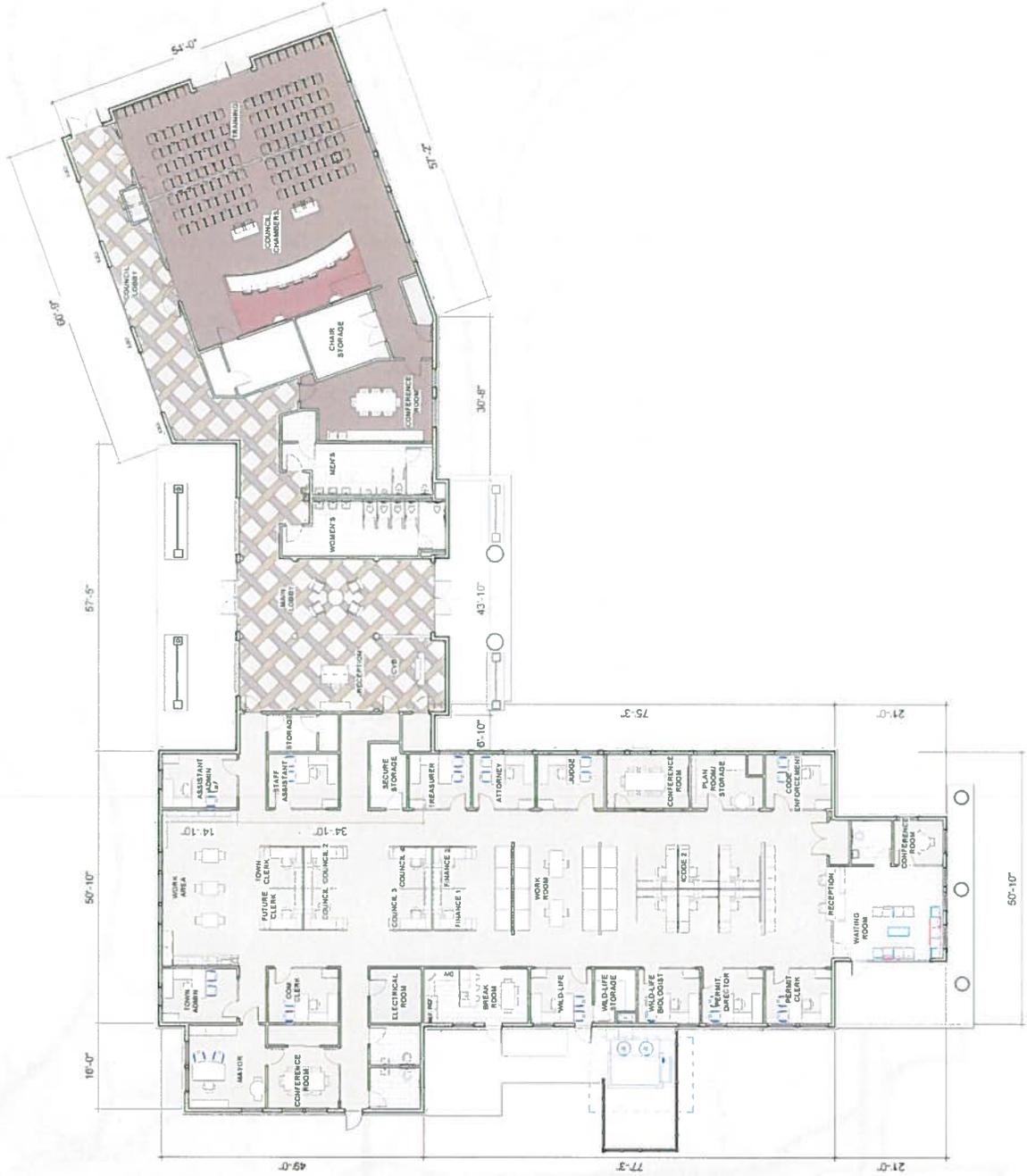
### **Other Services as Requested:**

These services will be performed at the Town's request. Services will include cleaning the carpets and upholstery of office chairs, not more than two times per year.

The Town will supply the following consumable products:

- Paper Towels
- Toilet paper and seat liners
- Hand soap
- Staff kitchen supplies

All other cleaning supplies and/or equipment to be supplied by contractor.



## OFFEROR'S CHECKLIST

*NOTE: These items are the criteria on which your proposal will be evaluated.*

Please make sure that the following items are included with your submittal:

- Submittal Form (**Required**)
- Non-Collusion Oath (**Required**)
- Documentation of Insurance Coverage (**Required**)
- Copy of Business License (If applicable)
- Minority/Women Owned Business Certification (Preferred but not required)

**NOTE: IN ADDITION TO THE ABOVE, THE FOLLOWING ITEMS MUST ALSO BE INCLUDED OR ADDRESSED IN YOUR SUBMITTAL:**

- Organization Information (**Required**)
- Personnel List (i.e. names of persons to be used in this engagement) (**Required**)
- References (**Required**)
- All Inclusive Cost (**Required**)

***You do not have to submit the Offeror's Checklist. This list is included for your convenience. However, all required information must be provided.***

***Failure to submit the required items may deem your submittal to be non-responsive.***

**SUBMITTAL FORM**  
**Offeror to complete all blanks)**

DATE: \_\_\_\_\_, 2016

**ORGANIZATIONAL INFORMATION**

NAME OF OFFEROR: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

\_\_\_\_\_

BY SUBMITTING HIS PROPOSAL, THE UNDERSIGNED OFFEROR REPRESENTS:

1. that he has carefully examined specifications for the Services;
2. that he is familiar with all the conditions surrounding the performance of the Services;
3. that, if awarded the Contract, he will provide all labor, material, supplies and equipment necessary to execute the Services in accordance with the Contract Documents;
4. that he understands that the Town reserves the right to reject any or all responses which does not meet the proposal requirements, or all proposals in the event that the Project is canceled, postponed, or if it is in the best interest of Town of Kiawah Island;
5. that, if awarded the Contract, he will enter and execute a contract as required in the Invitation to Bid;
6. that the Offeror is legally able to enter into and perform a contract, if awarded;
7. that the Offeror is current on all taxes and fees owed to the Town.
8. that the Offeror has provided proof of insurance as required by the Town.

**I. PERSONNEL:**

Provide a list of personnel that will be committed to this engagement and their job function.

**II. EXPERIENCE:**

**At least three (3) references for similar work performed are required; however, you may provide as many as five (5) references.**

1. COMPANY NAME: \_\_\_\_\_  
Contract Period: From: \_\_\_\_\_ To: \_\_\_\_\_  
Scope of Work: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

2. COMPANY NAME: \_\_\_\_\_  
Contract Period: From: \_\_\_\_\_ To: \_\_\_\_\_  
Scope of Work: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

II. EXPERIENCE (Continued):

3. COMPANY NAME: \_\_\_\_\_  
Contract Period: From: \_\_\_\_\_ To: \_\_\_\_\_  
Scope of Work: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

4. COMPANY NAME: \_\_\_\_\_  
Contract Period: From: \_\_\_\_\_ To: \_\_\_\_\_  
Scope of Work: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

5. COMPANY NAME: \_\_\_\_\_  
Contract Period: From: \_\_\_\_\_ To: \_\_\_\_\_  
Scope of Work: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_



**BUSINESS LICENSE:**

The Offeror is not required to have valid business licenses to submit a Proposal. However, Offeror's must possess a valid Business License for business undertaken within the corporate limits of the Town of Kiawah Island.

Does your business have a valid **Town of Kiawah Island Business License**?

Yes  No If yes, list the number \_\_\_\_\_. Contact (843) 768-9166 with any questions. If no, a business license must be obtained upon award of the contract.

**INSURANCE:**

Contractor shall carry and maintain Worker's Compensation Insurance in statutory amounts for its employees, unless exempt by State statute. Contractor shall provide Town with certification of this coverage, or if exempt, written confirmation of this.

Contractor shall carry a Comprehensive Liability Policy of at least One Hundred Thousand (\$100,000) Dollars per occurrence (combined single limit of liability) to cover operations equipment and contractual liability. Contractor shall provide Town with a copy of the policy which shall name the Town as an additional insured.

Contractor shall defend, indemnify, and hold harmless the Town, its elected officials and employees from and against any and all actions, costs, claims, losses, expenses and/or damages arising out of performance of the working contractor.

**MINORITY/WOMEN-OWNED ENTERPRISE:**

Are you a Minority or Woman-Owned business?  Yes  No

If so, are you certified?  Yes  No

If you are certified, you must furnish a copy of your certificate with your submittal.

# NON-COLLUSION OATH

COUNTY OF: \_\_\_\_\_

STATE OF: \_\_\_\_\_

Before me, the Undersigned, a Notary Public, for and in the County and State aforesaid, personally appeared \_\_\_\_\_ and made oath that the Offeror herein, his agents, servants, and/or employees, to the best of his knowledge and belief, have not in any way colluded with anyone for and on behalf of the Offeror, or themselves, to obtain information that would give the Offeror an unfair advantage over others, nor have they colluded with anyone for and on behalf of the Offeror, or themselves, to gain any favoritism in the award of the contract herein.

SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2016

\_\_\_\_\_  
Authorized Signature for Offeror

Please print Offeror's name and address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC FOR THE STATE OF \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Print Name: \_\_\_\_\_