



Department of Purchasing & Contract Compliance

Felicia Strong-Whitaker, Interim Director

REQUEST FOR E-QUOTE NUMBER: 13VR89745A

PROJECT TITLE: Pool Services

DUE DATE: Monday, September 23, 2013

WILL BE RECEIVED UNTIL: 2:00 P.M.

LAST DAY FOR QUESTIONS: Thursday, September 19, 2013

BIDDERS MAY SUBMIT REQUESTS FOR CLARIFICATION OR QUESTIONS REGARDING THIS E-QUOTE TO THE PURCHASING CONTACT PERON LISTED BELOW. ANY REQUEST SHALL ONLY BE SUBMITTED IN WRITING (FAX OR EMAIL). ALL RESPONSES TO WRITTEN REQUEST(S) WILL BE DISTRIBUTED AS ADDENDA TO THIS E-QUOTE AND POSTED ON THE FULTON COUNTY WEBSITE AT www.fultoncountyga.gov.

THE COUNTY WILL NOT RESPOND TO REQUESTS RECEIVED AFTER *Monday, September, 23, 2013* AT 2:00 P.M.

E-QUOTE RESPONSES MUST BE SUBMITTED ONLINE AT www.fultonvendoreselfservice.co.fulton.ga.us BY THE DATE AND TIME INDICATED. You must be a registered vendor in order to respond to E-QUOTES.

ANY QUESTIONS REGARDING PURCHASING PROCEDURES OR THE SPECIFICATIONS SHOULD BE ADDRESSED ONLY TO THE PURCHASING CONTACT PERSON LISTED BELOW VIA EMAIL ONLY. NO PHONE CALLS WILL BE ACCEPTED. BIDDERS MAY NOT HAVE CONTACT WITH COUNTY OFFICERS, ELECTED OFFICIALS OR COUNTY EMPLOYEES REGARDING THIS BID PRIOR TO AWARD OF PURCHASE ORDER. VIOLATION OF THIS INSTRUCTION WILL RESULT IN YOUR BID BEING FOUND NON-RESPONSIVE.

CONTACT NAME:
Vearnetta Rivers

E-MAIL ADDRESS:
vearnetta.rivers@fultoncountyga.gov

FAX NUMBER:
(404) 893-6588

All information requested on this sheet must be completed. Unless specifications indicate "NO SUBSTITUTE", items determined by Fulton County to be "EQUAL OR BETTER" will be given full consideration. All prices QUOTED must be "FOB DELIVERED" unless otherwise requested, and must be submitted in the format requested. The County reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the County.

REQUEST FOR E-QUOTE SPECIFICATIONS

Pool Services & Maintenance Housing & Human Services Department

1. DESCRIPTION

Fulton County Department of Purchasing & Contract Compliance is soliciting e-quotes from qualified vendors to provide Pool Services and Maintenance for the Housing and Human Services Department.

2. CONTACT PERSON

Please contact Vearnetta Rivers, by e-mail vearnetta.rivers@fultoncountyga.gov or Fax (404) 893-6588 only, with any procedural or technical questions. All questions should be submitted in writing to the Purchasing contact person via email only. No phone calls will be accepted. Any responses made by the County will be provided in writing to all Bidders by addendum. No verbal responses shall be authoritative.

3. TERM OF AGREEMENT

Date of issuance through December 31, 2013

4. PRODUCT/SERVICE SPECIFICATIONS

Inspect pools and test the water twice weekly, furnishing any and all necessary chemicals, i.e. bromine, Co₂, soda ash, sodium bicarbonate, chlorine and/or dry chlorine, algaecides, clarifiers, shock treatments and any other chemicals necessary to keep water balance, clarity, ph and overall water quality to the Fulton County Health Department standards and requirements. (Article XII)

Provide onsite service and maintenance at least twice a week to the chemical treatment systems, pumps, Strantrol or other automatic feeding system, strainers, filters, heaters and other mechanical systems to ensure proper pool operations.

Calibrate the vantage, Strantrol and/or other automatic chemical feed systems as necessary to ensure proper operation and chemical feed.

Service/backwash filters system at each inspection, if necessary.

Visit and service pool as often as necessary to correct any water problems, and to maintain proper water quality at no additional cost.

Provide on-site and telephone consultation regarding the general operation of pool, safety concerns and maintenance issues.

Successful respondent(s) must prepare and maintain log or inspection reports for each visit signed by technician and Fulton county Human Services pool staff.

Successful respondent(s) must have 24 hour, 7 day emergency telephone or pager number and must be able to provide 24/7 emergency service as necessary. This number is to be provided to Human Services staff upon issuance of purchase order.

Successful respondent(s) to furnish only chemicals, pool additives and parts that are approved by the Fulton county health department, and by respective equipment manufacturers for use with their equipment.

Respondent must provide pool maintenance service to the following addresses:

<u>Facility:</u>	<u>Phone Number:</u>
Dorothy Benson Multipurpose Center 6500 Vernon Woods Drive Sandy Springs, GA 30328	404-705-4900
Harriett G. Darnell Multipurpose Center 677 Fairburn Road Atlanta, GA 30331	404-699-8580
H.J.C. Bowden Multipurpose Center 2885 Church Street East point, GA 30344	404-762-4821
Helene S. Mills Multipurpose Center 515 John Wesley Dobbs Ave S.W. Atlanta, GA 30312	404-523-4158

5. PRICING SHEETS

<i>Item No.</i>	<i>Item Description</i>	<i>Estimated Quantity</i>	<i>Unit of Issue</i>	<i>Unit price (\$)</i>
1	<i>Monthly Fees - Benson</i>	2	<i>Bi-Weekly</i>	
2	<i>Monthly Fees - Darnell</i>	2	<i>Bi-Weekly</i>	
3	<i>Monthly Fees - Bowden</i>	2	<i>Bi-Weekly</i>	
4	<i>Monthly Fees - Mils</i>	2	<i>Bi-Weekly</i>	
5	<i>Man Hours</i>	12	<i>Monthly</i>	

6. SPECIAL CONDITIONS/INSTRUCTIONS

N/A

7. INSURANCE & RISK MANAGEMENT PROVISIONS

Swimming Pool Maintenance and Service Operations

It is Fulton County Government’s practice to obtain Certificates of Insurance from our Contractors and Vendors. Insurance must be written by a licensed agent in a company licensed to write insurance in the State of Georgia, with an A.M. Best rating of at least A- VI, subject to final approval by Fulton County. Respondents shall submit with the bid/proposal evidence of insurability satisfactory to Fulton County Government as to form and content. Either of the following forms of evidence is acceptable:

- A letter from an insurance carrier stating that upon your firm/company being the successful Bidder/Respondent that a Certificate of Insurance shall be issued in compliance with the Insurance and Risk Management Provisions outlined below.
- A Certificate of Insurance complying with the Insurance and Risk Management Provisions outlined below (Request for Bid/Proposal number and Project Name, Number and Description must appear on the Certificate of Insurance).
- A combination of a specific policy written with an umbrella policy covering liabilities in excess of the required limits is acceptable to achieve the applicable insurance coverage levels.

Upon award, the Contractor/Vendor must maintain at their expense, insurance with policy limits equal to or greater than the limits described below. Proof of insurance must be provided to Fulton County Government prior to the start of any activities/construction as described in the bid document(s). Any and all Insurance Coverage(s) and Bonds required under the terms and conditions of the contract shall be maintained during the entire length of the contract, including any extensions or renewals thereto, and until all work has been completed to the satisfaction of Fulton County Government.

Accordingly the Respondent shall provide a certificate evidencing the following:

1. WORKERS COMPENSATION/EMPLOYER’S LIABILITY INSURANCE – STATUTORY (In compliance with the Georgia Workers Compensation Acts, including but not limited to U.S. Longshoremen and Harbor Workers Act and any other State or Federal Acts or Provisions in which jurisdiction may be granted)

Employer’s Liability Insurance	BY ACCIDENT	EACH ACCIDENT	\$500,000
Employer’s Liability Insurance	BY DISEASE	POLICY LIMIT	\$500,000
Employer’s Liability Insurance	BY DISEASE	EACH EMPLOYEE	\$500,000

To include U.S. Longshoremen and Harbor Workers Act

2. COMMERCIAL GENERAL LIABILITY INSURANCE (Including contractual Liability Insurance)

Bodily Injury and Property Damage Liability (Other than Products/Completed Operations) General Aggregate \$2,000,000	Each Occurrence	\$1,000,000
Products\Completed Operation Personal and Advertising Injury Fire Damage \$100,000	Aggregate Limit Limits Limits	\$2,000,000 \$1,000,000
**Limited Pollution Endorsement \$100,000		Limits

3. BUSINESS AUTOMOBILE LIABILITY INSURANCE

Combined Single Limits \$1,000,000 (Including operation of non-owned, owned, and hired automobiles). **Broadened Pollution Endorsement CA9948 and MCS 90**	Each	Occurrence
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4. UMBRELLA LIABILITY

(In excess of above noted coverages) \$1,000,000	Each Occurrence
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Certificates of Insurance

Certificates shall state that the policy or policies shall not expire, be cancelled or altered without at least thirty (30) days prior written notice to Fulton County Government. Policies and Certificates of Insurance are to list Fulton County Government as an Additional Insured (except for Workers' Compensation) and shall conform to all terms and conditions (including coverage of the indemnification and hold harmless agreement) contained in the Insurance and Risk Management Provisions. The General Liability Additional Insured language should apply to on-going and completed-operations, using ISO form CG 2010 (11/85 version) or equivalent.

If Fulton County Government shall so request, the Respondent, Contractor or Vendor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies.

The Contractor agrees to name the Owner and all other parties required of the Contractor/Vendor shall be included as additional insureds on the CGL, using ISO Additional Insured Endorsement forms CG 2010 11/85 or its equivalent coverage to the additional insureds. This insurance for the additional insureds shall be as broad as the coverage provided for the named insured Contractor. It shall apply as Primary Insurance before any other insurance or self-insurance, including any deductible, non-contributory, and Waiver of Subrogation provided to the Additional Insureds.

Additional Insured under the General Liability, Auto Liability, with no Cross Suits exclusion.

Important:

It is understood that **Insurance in no way Limits the Liability of the Contractor/Vendor.**

USE OF PREMISES

Contractor/Vendor shall confine its apparatus, the storage of materials and the operations of its workers to limits/requirements indicated by law, ordinance, permits and any restrictions of Fulton County Government and shall not unreasonably encumber the premises with its materials.

PROTECTION OF PROPERTY

Contractor/Vendor will adequately protect its own work from damage, will protect Fulton County Government's property from damage or loss and will take all necessary precautions during the progress of the work to protect all persons and the property of others from damage or loss.

Contractor/Vendor shall take all necessary precautions for the safety of employees of the work and shall comply with all applicable provisions of the Federal, State and local safety laws and building codes to prevent accidents or injury to persons on, about, or adjacent to the premises where work is being performed.

Contractor/Vendor shall erect and properly maintain at all times as required by the conditions and progress of the work, all necessary safeguards for the protection of its employees, Fulton County Government employees and the public and shall post all applicable signage and other warning devices to protect against potential hazards for the work being performed.

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

To the fullest extent of the Law, Contractor/Vendor hereby agrees to release, indemnify, defend and hold harmless Fulton County, its Commissioners, officers, employees, subcontractors, successors, assigns and agents, from and against any and all losses (including death), claims, damages, liabilities, costs and expenses (including but not limited to all actions, proceedings, or investigations in respect thereof and any costs of judgments, settlements, court costs, attorney's fees or expenses, regardless of the outcome of any such action, proceeding, or investigation), caused by, relating to, based upon or arising out of any act or omission by Contractor/Vendor, its directors, officers, employees, subcontractors, successors, assigns or agents, or otherwise in connection (directly or indirectly) with its acceptance, or the performance, or nonperformance, of its obligations under these agreements. Such obligations shall not be construed to negate, abridge or otherwise reduce any other rights or obligations of indemnity which would otherwise exist as to any party or person as set forth in this paragraph.

Contractor/Vendor further agrees to protect, defend, indemnify and hold harmless Fulton County, its Commissioners, officers, employees, subcontractors, successors, assigns and agents from and against any and all claims or liability for compensation under the Worker's Compensation Act, Disability Benefits Act, or any other employee benefits act arising out of injuries sustained by any employees of Contractor/Vendor. These indemnities shall not be limited by reason of the listing of any insurance coverage.

CONTRACTOR/VENDOR ACKNOWLEDGES HAVING READ, UNDERSTANDING, AND AGREEING TO COMPLY WITH THIS INDEMNIFICATION AND HOLD HARMLESS AGREEMENT, AND THE REPRESENTATIVE OF THE CONTRACTOR/VENDOR IDENTIFIED BELOW IS AUTHORIZED TO SIGN CONTRACTS ON BEHALF OF THE RESPONDING CONTRACTOR/VENDOR.

COMPANY: _____ SIGNATURE: _____

NAME: _____ TITLE: _____

DATE: _____