DALI	ALLAS COUNTY BID TABULATION			VENDOR #1		VENDOR #2		VENDOR #3	
	ID NO. 2012-085-6112 NNUAL CONTRACT FOR Anionic Asphalt Emulsion			APAC-Texas, INC. P.O. Box 224048		Performance Grade Asphalt P.O. Box 6		Professional Coating 1001 Mt. Lebonon Road	
	UYER: SAM COOPER			Dallas, Texas 75222-4048		Hitchcock, TX 77563		Cedar Hill, T	
	PENING DATE: August 13, 2012 ONTRACT PERIOD:			Stephen Ko Tel: 214-21- Fax: 214-7-	4-741-3531	Clarke Dubose Tel: 409-986-7740 Fax: 409-986-7950		Jon Winkelman Tel: 972-291-7474 Fax: 972-291-6224	
CER	TIFIED MWBE/EE01 COMPLETED? PAYER STATUS			Yes Yes				Yes Yes	
	DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT PRICE	EXTENSION	PRICE	ENSION	UNIT PRICE	EXTENSION
1	ANIONIC ASPHALT EMULSION, TRACKLESS TACK Mfr. Blacklidge Emulsions or equal Product No. NTSS-HM Specify Brand and Product No. Being Proposed:	20,000	GA.	\$3.75 Blacklidge I		\$0.00 \$	N 60.00	\$3.87 \$4.00 \$4.37 PCT MOS 5	\$77,400.00 \$80,000.00 \$87,400.00
	LOADED ON COUNTY TRUCKS AT VENDOR PLANT SPECIFY: PLANT LOCATION: STREET ADDRESS:			NTSS-1HM 4525 Leston Avenue Dallas, TX 75247 214-631-7682 8:00 A.M 5:00 P.M.					ebanon Road
	CITY/STATE/ZIP CODE: TELEPHONE NO: HOURS OF OPERATION:							Cedar Hill, TX 75704 972-291-7474 8:00 A.M4:00 P.M.	
	TOTAL				\$75,000.00		\$0.00		\$77,400.00
	Other charges/fees (if any) not listed but required in the performance of this contract:							** Delivered	ns minimum d price in 275
	Name of Charge/Fee: Rate/Price: \$ Other charges/fees (if any) not listed but required in the								
	performance of this contract: Name of Charge/Fee: Rate/Price: \$								
	Specify any additional comments etc. included with your bid proposal, if applicable Specify Prompt/Early Payment Discount Terms (if any):							See addition container pr	nal delivery ricing options
	% Days. Payment terms with no discount are Net 30 days, upon receipt of proper invoice and verification that the services and products have been completed in accordance with specification requirements in the Dallas County Auditor's Office. The award of this bid will not be based on prompt/early payment discounts.								
	Did your Company check Dallas County website for any addendums? Yes No			Yes				Yes	
	Is the customer reference information included with your bid proposal? Yes No			Yes				Yes	
	Would your firm/compny be willing to accept a secondary award to provide the products described herein in the absence of the primary Supplier? Price would remain the same as those provided on the bid documents for the duration of the contract agreement (including extensions). Yes			Yes				Yes	
	Specify the name, telephone number, and e-mail address of the account representative who will be handling this account: Contact Name:			Luke Warn	er			Jon Winkelr	man
	Telephone No.			214-926-90	72			972-291-74	74 X101
	E-Mail Address:			wlwarner@	apac.com			<u>ion-</u>	
	Specify the Alternative (Back-Up) Contact Person: Contact Name:			Chris Micha	iel			Denise Win	kelman
	Telephone No.			972-951-84				972-291-74	
	E-Mail Address: Should your firm be awarded this contract, describe what (if any)			cmichael@	apac.com			denise.wink	elman@pctw
	portion of the bid requirements will be subcontracted out: Cooperative Purchasing: Should other Governmental Entities			None				None	
	decide to participate in this contract, would you, the awarded Contractor agrees that all terms, conditions, specifications, and pricing would apply to that entity?			L.					
	Yes NO Note: All purchases by Governmental Entities other than Dallas County will be billed directly to that Governmental Entity and paid by that Governmental Entity. Dallas County will not be responsible for other Governmental Entity's debt.			Yes				Yes	
	Does your firm/company have the required insurance coverage stated under SECTION 3 - INSURANCE REQUIREMENTS and agree to comply with these requirements during the duration of this contract? YesNO			Yes				Yes	
	If No, will your firm be able to acquire the required coverage within ten (10) days upon notification of contract award? Yes NO								
	NOTE: Any vendor that conducts business with Dallas County, whether it is for goods and/or services, must maintain lawful worker's compensation/self insured employee coverage requirements								
	and adequate liability limitations. SEE Page 3, Paragraph 3								
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ALLAS COUNTY BID TABULATION			VEN	DOR#1		OOR #2		DOR #3
ID NO. 2012-085-6112 NNUAL CONTRACT FOR Anionic Asphalt Emulsion			APAC-Texas, INC. P.O. Box 224048		Performance Grade Asphalt P.O. Box 6		Professional Coating 1001 Mt. Lebonon Road	
UYER: SAM COOPER PENING DATE: August 13, 2012 ONTRACT PERIOD:		Dallas, Texas 75222-4048 Stephen Koonce Tel: 214-214-741-3531 Fax: 214-742-3540		Hitchcock, Taclarke Dubos Tel: 409-986- Fax: 409-986	e 7740	Cedar Hill, TX 75104 Jon Winkelman Tel: 972-291-7474 Fax: 972-291-6224		
ERTIFIED MWBE/EE01 COMPLETED?			Yes				Yes	
AXPAYER STATUS			Yes				Yes	
DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT PRICE	EXTENSION	UNIT PRICE	EXTENSION	UNIT PRICE	EXTENSION
Information on Provision of Health Insurance Coverage for Employees Dallas County may consider the provision of health insurance coverage for employees in the bid evaluation process (see page 5, paragraph 4) and attachment A. Please complete the information below to assist in this evaluation. Does your company provide health insurance coverage to its employees? Yes No If your company does provide health insurance coverage to its employees, does the company share in the cost a minimum of: 90% for employee only coverage? Yes No 65% for family coverage? Yes No If your company provides health insurance coverage to its			Yes Yes				No	
in your company povetes near in insurance coverage or its employees, is the coverage comparable to the services provided by Dallas County as described in the attached summary plan description? (See Attachment A) Yes No If your company plans to utilize subcontractors in the fulfillment of this bid, does each of the subcontractors provide health insurance coverage to their employees that compares to Dallas County's health insurance coverage and share in the cost?			Yes					
Yes No In the event Dallas County elects to give a preference to a bidder who provides comparable health insurance, that bidder and any subcontractors will be required to provide additional documentation of the declared health insurance coverage. For statistical purposes:			N/A					
Please indicate to Dallas County whether the principal company owner is a: (Please check one)								
[] Dallas County Tax Payer				х				x
Other County Tax Payer								
Please indicate whether your company is certified through an agency "other than" North Central Texas Regional Certification Agency (NCTRCA)/ (Example: Statewide Historically Undertuilized Business (HUB) Program, MBE, WBE, DBE, SBA, SBA, Veteran, 8(a)								
Yes No			No				No	
If yes, please provide the agency name and the applicable certification number below:								
Certifying Agency Name: Registration or Certification Number: Expiration Date:								
Please indicate the manner in which you were notified of this solicitation:								
[] Daily Commercial Record								
[] Dallas County Website				х				X
[] Letter from Dallas County Purchasing Department								
Other: specify:								
Thank you.								