

SYNOPSIS					
<b>BID NO. 2014-022-6404</b> <b>CONTRACT FOR THE REMOVAL, REPLACEMENT, AND INSTALLATION OF HOUSE WATER PUMPS FOR FRANK CROWLEY COURTS BUILDING, NORTH TOWER JAIL AND WEST TOWER JAIL</b> <b>BUYER: SAM COOPER</b> <b>OPENING DATE: February 24, 2014</b> <b>CONTRACT PERIOD: N/A</b>			<b>C&amp;P Pump Services, Inc.</b> <b>P.O. Box 530644</b>  <b>Grand Prairie, TX 75053</b> <b>Tel: 972-263-6906</b> <b>Fax: 972-263-5836</b>		
	DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT PRICE	EXTENSION
1	Purchase and Installation of a house water pump for Frank Crowley a) Equipment Cost b) Labor and Installation Cost c) All other cost associated with this bid including overhead Total Cost (a+b+c) - Frank Crowley  Specify the Manufacturer and Model Number of the proposed Pumping System  Specify the estimated Delivery Time from date of order to delivery of equipment to Dallas County site location:  Specify the Estimated Installation Start Date after receipt of equipment:  Specify the estimated Completion Date  Specify the Warranty Coverage Period for: 1) Equipment 2) Installation	1	each	\$30,564.00 \$6,000.00 \$1,157.00	\$30,564.00 \$6,000.00 \$1,157.00 37,721.00  TigerFlow Model No. TVMV-10GL-R1-S6-VFD UL/C-UL  8 weeks  1 week  2 days  1 year 1 year
2	Purchase and Installation of a house water pump for North Tower Jail a) Equipment Cost b) Labor and Installation Cost c) All other cost associated with this bid including overhead Total Cost (a+b+c) - North Tower  Specify the Manufacturer and Model Number of the proposed Pumping System  Specify the estimated Delivery Time from date of order to delivery of equipment to Dallas County site location:  Specify the estimated Installation Start Date after receipt of equipment  Specify the estimated Completion Date  Specify the Warranty Coverage Period for: 1) Equipment 2) Installation			\$37,212.00 \$8,000.00 \$1,356.00	\$37,212.00 \$8,000.00 \$1,356.00 \$46,568.00  TigerFlow Model No. TVMV-20GL-R1-S8-VFD UL/C-UL  8 weeks  1 week  2 days  1 year 1 year
3	Purchase and Installation of a house water pump for West Tower Jail a) Equipment Cost b) Labor and Installation Cost c) All other cost associated with this bid including overhead Total Cost (a+b+c) - West Tower  Specify the Manufacturer and Model Number of the proposed Pumping System  Specify the estimated Delivery Time from date of order to delivery of equipment to Dallas County site location:  Specify the estimated Installation Start Date after receipt of equipment  Specify the estimated Completion Date  Specify the Warranty Coverage Period for: 1) Equipment 2) Installation			\$37,212.00 \$8,000.00 \$1,356.00	\$37,212.00 \$8,000.00 \$1,356.00 \$46,568.00  TigerFlow Model No. TVMV-20GL-R1-S8-VFD UL/C-UL  8 weeks  1 week  2 days  1 year 1 year
	Performance Bond Specify Cost for Performance Bond (if any) _____% of Total Bid Cost				3%

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	DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT PRICE	EXTENSION
	Specify the name, address and telephone number of the manufacturer's authorized local factory representative and service center who will perform the on-site warranty service coverage under this contract: Company Name: _____ Address: _____ City/State/Zip: _____ Telephone Number: _____  Specify the name, address and telephone number of three (3) authorized local factory distributors (if applicable) for replacement parts for the proposed pumping system: Company Name: _____ Address: _____ City/State/Zip: _____ Telephone Number: _____  Specify the name, address and telephone number of three (3) authorized local factory distributors (if applicable) for replacement parts for the proposed pumping system: Company Name: _____ Address: _____ City/State/Zip: _____ Telephone Number: _____  Specify the name, address and telephone number of three (3) authorized local factory distributors (if applicable) for replacement parts for the proposed pumping system: Company Name: _____ Address: _____ City/State/Zip: _____ Telephone Number: _____  Specify any additional comments/cost/etc. included with your bid proposal, if applicable:  Specify Prompt Payment Discount Terms: _____% _____days. Payment terms with no discount are Net 30 days upon receipt of proper invoice in the Dallas County Auditor's office.  <b>Please answer the questions listed below:</b>  Did your company check Dallas County website for any addendum(s), updates and/or changes to the bid solicitation: Yes _____ No _____  Is the customer reference information (see Section 4.33) included with your bid proposal?  Specify the name, telephone number and e-mail address (if any) of the designated account representative who will be managing this account:  Contact Person Name: _____  Telephone Number: _____  E-Mail Address: _____  Specify the Alternative (Back-up) Contact Person: Contact Person Name: _____ Telephone Number: _____ E-Mail Address: _____  Should your firm be awarded this contract, describe what (if any) portion of the bid requirements will be subcontracted out:			C&P Pump Services 514 Bonham Street Grand Prairie, TX 75050  N/A  N/A  2% 10 days  Yes  Paul Upchurch  972-263-6906  <a href="mailto:cppumpservicesinc@yahoo.com">cppumpservicesinc@yahoo.com</a>  Jake Upchurch 972-263-6906 <a href="mailto:cppumpservicesinc@yahoo.com">cppumpservicesinc@yahoo.com</a>	
					None

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DESCRIPTION	ESTIMATED QUANTITY	U/I	UNIT PRICE	EXTENSION	
<p>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? Yes _____ No _____</p> <p>If No, will your firm be able to acquire the required coverage within ten (10) days upon notification of contract award? Yes _____ No _____</p> <p>Cooperative Purchasing: Should other Government Entities decide to participate in this contract, would you, the awarded Contractor agree that all terms, conditions, specifications, and pricing would apply to that entity? Yes _____ No _____  <b>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.</b></p> <p><b>Information on Provision of Health Insurance Coverage for Employees</b></p> <p>a) Does your company provide health insurance coverage to its employees?            Yes _____ No _____</p> <p>b) 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____</p> <p>c) If your company provides health insurance coverage to 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 _____</p> <p>d) If your company plans to utilize subcontractors in the fulfillment of this bid, does each of the subcontractors provide health insurance coverage and share in the cost?            Yes _____ No _____</p> <p><b>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.</b></p> <p><b>For statistical purposes:</b></p> <p>As a critical component of our program to assist disadvantaged, minority and woman-owned business enterprises in our procurement activities, please indicate whether your company is certified through the North Central Texas Regional Certification Agency (NCTRCA). Yes _____ No _____            If yes, please indicate your certification number and expiration date:            Certification/Registration Number: _____            Expiration Date: _____</p> <p>Please indicate to Dallas County whether the principal company owner is a : (Please Check One)</p> <p><input type="checkbox"/> Dallas County Taxpayer</p> <p><input type="checkbox"/> Other County Tax Payer (Specify): _____</p> <p><b>Please indicate the manner in which you were notified of this solicitation:</b></p> <p><input type="checkbox"/> Daily Commercial Record</p> <p><input type="checkbox"/> Dallas County Website</p> <p><input type="checkbox"/> Letter from Dallas County Purchasing Department</p> <p><input type="checkbox"/> Other: specify: _____</p> <p>Thank you.</p>			Yes		
			Yes		
			N/A		
			No		
			X		
			X		

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