REQUEST FOR PROPOSALS (RFP)

Proposal Title: Request for 3 Stryker 6507 POWER PRO 2, HIGH CONFIG

Proposal Closing Time: 3:00 p.m. Central Standard Time

Proposal Closing Date: April 11, 2023 3:00 p.m. Central Standard Time

Technical Proposal Opening: April 11, 2023 3:00 p.m. Central Standard Time

Council Action: April 20, 2023

Notice to Proceed: April 20, 2023

Submission of Proposal: City of Port Aransas
City Secretary’s Office
710 W. Avenue A
Port Aransas, TX 78373

Note: Proposals will not be accepted via facsimile or e-mail

Specification questions: Daniel Johnson
danieljohnson@cityofportaransas.org
361-815-3306
PROPOSAL SPECIFICS:

The City of Port Aransas, Texas is soliciting bids from qualified companies and individuals to quote and be able to supply 3ea.

*6507 POWER PRO 2, HIGH CONFIG.
*MTS POWER LOAD *INCLUDES FLOOR PLATE*.
*ASSEMBLY, POWER CORD, NORTH AM.
*ASSEMBLY, BATTERY CHARGER.
*Lithium-Ion Battery.
*ProCare Power-PRO 2 Prevent Service: Annual onsite preventive maintenance inspection and unlimited repairs including parts, labor and travel with SEM and battery coverage for 6507 POWER PRO 2, HIGH CONFIG
*ProCare Power-LOAD Prevent Service: Annual onsite preventive maintenance inspection and unlimited repairs including parts, labor and travel with battery coverage for MTS POWER LOAD *INCLUDES FLOOR PLATE*

SUBMISSION OF PROPOSALS:

The proposal must be submitted in a sealed envelope bearing the title “City of Port Aransas RFP Stryker Power load” along with the name and address of the proposer. The proposer shall submit one (1) copy of the completed Proposal Form and the other required information identified below to:

Francisca Nixon  
City Secretary  
City of Port Aransas  
710 W. Avenue A  
Port Aransas, TX 78373

Deadline for submission is 300 p.m. (CST), April 11, 2023. Proposals received after that time will not be considered and will be returned to the proposer unopened.

Other requirements are listed below:

A. One (1) copy of the proposal shall be submitted.

B. All information requested of the proposer by the RFP shall be provided. Failure to do so may disqualify the proposal.

C. All information shall be entered in ink or typewritten.

D. Proposal shall be signed by an authorized representative of the company.

E. Proposals may be submitted in a sealed envelope or box to the address shown above.
F. Proposals may be submitted in person, by U.S. Mail, Special Delivery or courier service. No facsimile or e-mail proposals will be accepted.

G. All exceptions to any point of the RFP must be clearly shown. It is suggested that exceptions be made as a separate section within the proposal for clarity.

PROPOSER’S RESPONSIBILITY:

Proposers should carefully examine the entire RFP and any addenda thereto, and any related materials and dates referenced in the RFP. Proposers shall become fully aware of the nature and location of the work. All proposers are responsible for the cost to produce their proposal. All proposers are responsible for their proposal’s content, timeliness of submission and withdrawal.
EXHIBIT A
CITY OF PORT ARANSAS
PROPOSAL FORM

CITY OF PORT ARANSAS RFP FOR 3 Stryker 6507 POWER PRO 2, HIGH CONFIG

Company Name: ________________________________________________________

Company Address: _______________________________________________________

Company Phone: _________________________________________________________

Official Submitting: _______________________________________________________

Title of Official: _________________________________________________________
Instructions

Please respond in the following sections.

A. Products/Pricing

_____________________________ Total Price
_____________________________ Brand of Equipment
_____________________________ Warranty Information

Please attach the proposed equipment spec sheet to this form.

B. ________ Number of days to complete delivery after award of contract. (Please fill in the number of days needed to complete project in the line provided)

SIGNATURE OF ENTIRE PROPOSAL AND SUBMITTALS

FIRM: ____________________________________________________________

BY: _______________________________________________________________

Signature       Title
Print or Type Name

ADDRESS: __________________________________________________________

Street Address and/or P.O. Box Number

City    State    Zip Code

PHONE: ______________________  FAX: ______________________________

RETURN ENTIRE RFP PACKAGE AND ALL DOCUMENTATION REQUIRED
BY THIS REQUEST FOR PROPOSAL
PROPOSAL AFFADAVIT

AUTHORIZED OFFICER: All pages in proposal containing statements, letters, etc., shall be signed by a duly authorized officer of the company, whose signature is binding on this proposal.

The undersigned offers and agrees to furnish all of the services stated in the accompanying proposal. The period of acceptance of this proposal will be ninety (90) calendar days from the date of the proposal closing, unless otherwise indicated by proposer.

STATE OF __________________________  COUNTY OF ________________

BEFORE ME, the undersigned authority, a Notary Public in and for the State of __________________________, on this day personally appeared __________________________, who after being by me duly sworn, did depose and say:

“I, __________________________________ am a duly authorized officer or/agent for __________________________

__________________________________ and have been duly authorized to execute the

(name)

(name of firm)

foregoing proposal on behalf of the said: __________________________

I hereby certify that the foregoing proposal has not been prepared in collusion with any other proposer or other person or persons engaged in the same line of business prior to the official receipt of this proposal. Further, I certify that the proposer is not now, nor has been for the past six (6) months, directly or indirectly concerning in any pool or agreement or combination, to control the price of services/items offered, or to influence any person or persons to offer or not to offer thereon.

Name and address of Proposer: ______________________________________________

___________________________, _______________________, ____________________

BY:  (print name)                                   (Signature)                            (Title)

SUBSCRIBED AND SWORN to before me by the above named __________________

_____________________________ on ___________________

            Date

_____________________________________
Notary Public in and for the State of ________________

RETURN THIS AFFIDAVIT AS PART OF PROPOSAL