

Request for Proposals:

Replace 2 Heat Pumps

**ORGANIZATIONAL
INFORMATION:**

Name: **Chesapeake Bay Foundation, Inc.**
Address: **6 Herndon Ave., Annapolis, MD 21403**
Contact: **Rich Moore**

ISSUE DATE:

September 22, 2021

SUMMARY OF NEED:

Replace 2 Bosch R410a geothermal heat pumps with new valves, actuators and vibration eliminator hoses to the existing electrical, plumbing and duct systems.

Responsibly dispose of all old equipment parts.

THE SCHEDULE:

We request that your proposal be delivered electronically to CBF staff member McKenzie Scott (mccott@cbf.org) no later than October 6, 2021 by 5pm, EST.

It is the intent of CBF to make a selection no later than October 13, 2021. We will notify you once a decision for award of bid is made.

**MINIMUM
REQUIREMENTS:**

At a minimum, you must be able to provide the following: (or have the following qualifications – list minimum requirements)

- Must be able to provide a Certificate of Insurance including General Liability, Auto and Workers Compensation.

**MINORITY
PARTICIPATION:**

CBF actively encourages proposals from Small, Women and Minority Owned (SWAM) Businesses. Please note if you are a Small, Women or Minority Owned Business and if you are certified by the State/Commonwealth/DC.

**FOR FURTHER
INFORMATION OR
QUESTIONS:**

Rich Moore (rmoore@cbf.org)

BID RESPONSE FORM

Please complete the following information for your response:

1. The name and full contact information of your company and, if applicable, any other entity comprising your team: [Attach resumes of individuals involved.]

2. List and describe three projects completed within the previous five years that are relevant to this project. If the relevance is not immediately obvious, please describe briefly the relationship as you see it: [Attach additional information as appropriate.]

3. List three client references and their contact information for whom you or your team members have completed work similar to that described in this RFP:

4. Include basic information and history about the business entity, financial information, technical capability, and any other information you feel is important for us to know.

5. Fee Proposal, detailed to the greatest extent possible – cost for service: hourly rates (if applicable), typical direct out-of-pocket costs such as travel reimbursement and any other anticipated expenses that you foresee:

6. Additional information, such as you/your team member's particular experiences, training, and/or background(s) that may make you uniquely qualified for this position (such as experience with ...): [Attach additional materials as appropriate.]

A successful applicant will need to provide proof of insurance based on the services or product provided.

The undersigned certifies that the information submitted above is true and accurate.

The undersigned certifies that the person, firm, association, co-partnership or corporation herein named, has not, either directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free competitive bidding in the preparation and submission of a proposal to the Chesapeake Bay Foundation for consideration in the award of a contract.

The undersigned further certifies that the firm, association, or corporation or any person in a controlling capacity associated therewith or any position involving the administration of federal funds; is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any federal agency; has not been suspended, debarred voluntarily excluded, or determined ineligible by any federal agency within the past three years; does not have a proposed debarment pending; and has not been indicted, convicted, or had a civil judgment rendered against said person, firm, association, or corporation by a court of competent jurisdiction on any manner involving fraud or official misconduct within the last three years.

I further acknowledge that by signing this page of the proposal, I am deemed to have agreed to the provisions of the affidavit.

(Name of Firm)

(Authorized Signature)

(Title)

(Please print Name)

(Date)