SAP

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **State of South Carolina**  **EMERGENCY**  **Request for Proposal** | | Solicitation:  Date Issued:  Procurement Officer:  Phone:  E-Mail Address: | | SCDHEC-TKC-9/22/20  9 / 4 / 2020  Tripp Clark  803-898-3485  clarkhc@dhec.sc.gov | |
| DESCRIPTION:  **Saliva-based COVID Testing Services** | | | | | | |
| USING GOVERNMENTAL UNIT:  **SC Dept of Health & Environmental Control** | | | | | | |
| *The Term "Offer" Means Your "Bid" or "Proposal". Your offer must be submitted by email to:*  [**clarkhc@dhec.sc.gov**](mailto:NICHOLRJ@dhec.sc.gov)  **(See Page 3 for Instructions)**  **THERE WILL BE NO FORMAL BID OPENING** | | | | | | |
| SUBMIT OFFER BY (Opening Date/Time): **9 / 22 / 2020 - 2:30 PM ET** (See "Deadline For Submission Of Offer" provision) | | | | | | |
| QUESTIONS MUST BE RECEIVED BY:  **9 / 14 / 2020 – 5:00 PM ET**  (See "Questions From Offerors" provision) | | | | | | |
| NUMBER OF COPIES TO BE SUBMITTED: **One** | | | | | | |
| CONFERENCE TYPE: **Not Applicable**  DATE & TIME:  (As appropriate, see "Conferences - Pre-Bid/Proposal" & "Site Visit" provisions) | | | | LOCATION: **Not Applicable** | | |
| AWARD & AMENDMENTS | Award will be posted on **September 24**, **2020.** The award, this solicitation, any amendments, and any related notices will be posted at the following web address:  <https://www.scdhec.gov/about-dhec/dhec-procurement-services> | | | | | |
| You must submit a signed copy of this form with Your Offer. By signing, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of thirty (30) calendar days after the Opening Date. (See "Signing Your Offer" provision.) | | | | | | |
| NAME OF OFFEROR      (full legal name of business submitting the offer) | | Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc. | | | | |
| AUTHORIZED SIGNATURE    (Person must be authorized to submit binding offer to contract on behalf of Offeror.) | | DATE SIGNED | | | | |
| TITLE    (business title of person signing above) | | STATE VENDOR NO.    (Register to Obtain S.C. Vendor No. at www.procurement.sc.gov) | | | | |
| PRINTED NAME    (printed name of person signing above) | | STATE OF INCORPORATION    (If you are a corporation, identify the state of incorporation.) | | | | |
| OFFEROR'S TYPE OF ENTITY: (Check one) (See "Signing Your Offer" provision.)    \_\_\_ Sole Proprietorship \_\_\_ Partnership \_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_ Corporate entity (not tax-exempt) \_\_\_ Corporation (tax-exempt) \_\_\_ Government entity (federal, state, or local) | | | | | | |

COVER PAGE - PAPER ONLY (MAR. 2015)

SAP

SAP

**PAGE TWO**

**(Return Page Two with Your Offer)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business) | | | | | | | | NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)          \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Area Code - Number - Extension Facsimile    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  E-mail Address | | | | | | | | | |
| PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)          \_\_\_\_Payment Address same as Home Office Address  \_\_\_\_Payment Address same as Notice Address **(check only one)** | | | | | | | | ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)          \_\_\_\_Order Address same as Home Office Address  \_\_\_\_Order Address same as Notice Address **(check only one)** | | | | | | | | | |
| ACKNOWLEDGMENT OF AMENDMENTS  Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision) | | | | | | | | | | | | | | | | | |
| Amendment No. | Amendment Issue Date | | Amendment No. | | | Amendment Issue Date | | Amendment No. | | Amendment Issue Date | | | Amendment No. | | Amendment Issue Date | | |
|  |  | |  | | |  | |  | |  | | |  | |  | | |
|  |  | |  | | |  | |  | |  | | |  | |  | | |
| DISCOUNT FOR PROMPT PAYMENT  (See "Discount for Prompt Payment" clause) | | 10 Calendar Days (%) | | | | | 20 Calendar Days (%) | | 30 Calendar Days (%) | | | | | \_\_\_\_\_Calendar Days (%) | | | |
| PREFERENCES - A NOTICE TO VENDORS (SEP. 2009): On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at [www.procurement.sc.gov/preferences](http://www.procurement.sc.gov/preferences) .  ***ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT.* VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU'VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES.**  [11-35-1524(E)(4)&(6)] | | | | | | | | | | | | | | | | | |
| PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE: Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C)(1)(i)&(ii)) or the Resident Contractor Preference (11-35-1524(C)(1)(iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)).  **Preferences do not apply per**  **South Carolina Consolidated Procurement Code Section 11-35-1524, Part (E)(3).**    \_\_\_\_In-State Office Address same as Home Office Address \_\_\_\_In-State Office Address same as Notice Address **(check only one)** | | | | | | | | | | | | | | | | | |
| PAGE TWO (SEP 2009) | | | | |  | End of PAGE TWO | | | | | |  |  | | | |  |