



UNIVERSITY
of ARKANSAS
AT PINE BLUFF

1873

TECHNICAL PROPOSAL PACKET

Bid # UAPB P180

WORK ORDER SYSTEM

BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION				
Company:				
Address:				
City:		State:		Zip Code:
Business Designation:	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Public Service Corp	
	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Nonprofit	
Minority and Women-Owned Designation*:	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian American	<input type="checkbox"/> Service-Disabled Veteran
	<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic American	<input type="checkbox"/> Pacific Islander American	<input type="checkbox"/> Women-Owned
AR Certification #: _____		* See <i>Minority and Women-Owned Business Policy</i>		

PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for bid solicitation related matters.</i>			
Contact Person:		Title:	
Phone:		Alternate Phone:	
Email:			

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.
<p><i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i></p>

ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.
<input type="checkbox"/> Prospective Contractor does not and will not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.
 The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be rejected:

Authorized Signature: _____ **Title:** _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

UAPB SPECIFICATIONS RFP # UAPB P180

Please duplicate the enclosed label and affix to the outside of your sealed submittal envelope/package or cut along the outer border and affix this label to the outside of the submittal envelope/package to identify it as a "Sealed Bid/Proposal". Be sure to include the name of the company submitting the response where requested.

SEALED BID/PROPOSAL * DO NOT OPEN

TITLE: Request for Proposal for Work Order System

Bid Number: RFP# UAPB P180

Bid Open: Monday, January 8, 2024 @ 11:00 A.M.

Submitted By

Company Name: _____

Contact Name: _____

Telephone: _____

Contact and Delivery Information Contact

colep@uapb.edu

870.575.8736

Purchasing Department Room 102

1200 N. University Drive

Pine Bluff, AR 71601

AUTHORIZED SIGNATURE REPRESENTING BIDDING COMPANY

Signature _____

Name _____

Title _____

Company _____

Address _____

City/State

Zip Code

Telephone (_____) _____

Fax (_____) _____

E-mail _____

Date _____

ADDENDA:

I/We do hereby acknowledge receipt of the following **addendum or addenda (if any):**

No. _____

Dated _____

No. _____

Dated _____

No. _____

Dated _____

No. _____

Dated _____

No. _____

Dated _____

SECTION 5 –COSTING SECTION

In consideration of the requirements set forth in this bid, what will be your total cost in dollars for year one (1) (Ref: Part II-Mandatory Requirements, IV Technical Requirements).

\$ _____ (Cloud base Work Order System Software)

\$ _____ (Set Up/Installation Services)

\$ _____ (Training Fees (fully Explain)

\$ _____ (Maintenance/Subscription Cost)

\$ _____ (License Fees 10-15 users)

\$ _____ (Other Costs (fully Explain)

\$ _____ (Total all costs above)

All costs for which the University will be billed must be included in the figure above.

SUBSEQUENT YEAR'S COST

List below the percentage (%) of increase for subsequent year's (**Percentage**) only, no dollars in the section below.

Cost for year 2 = _____ % of increase over year 1

Cost for year 3 = _____ % of increase over year 2

Cost for year 4 = _____ % of increase over year 3

Cost for year 5 = _____ % of increase over year 4

Cost for year 6 = _____ % of increase over year 5

Cost for year 7 = _____ % of increase over year 6

Total percentage of increase = _____ %

Due to budgetary constraints and to assure all costs are in line with the existing budget, UAPB may opt to negotiate costs with the bidder with the highest score on the evaluation prior to this point.

The lowest cost offer will be determined by the total lowest cost for year one (firm dollars) plus the total percentage (%) of increase for subsequent years and will be assigned points accordingly.

What is the name of the brand you are bidding? _____

Whether bidding as specified or an alternate, you must complete the check list below.

Failure to respond to each item below will cause for bid rejection. If your specifications are less than, you must explain the specifications in the comment section.

The brand name is listed as a specification, not a statement of preference. Alternate brands meeting these specifications shall be considered as an equal if accompanied by a brochure indicating specification and performance requirements.

MANDATORY CHECK LIST

Specifications:	Equal to	Less Than	Exceeds	Comments
Asset Management, Work order management, preventive maintenance, parts and labor and all support functions/features. Real time reporting and KPI dashboards along with unlimited service requesters users, and access to online training				
10-15 named license(s) with mobile access				
Browser-based mobile application. Ability to complete work orders and PM tasks from the field. Utilize start/stop time for log wrench time. Upload images instantly. View complete PM procedures, update meter readings, and create work orders on the fly				
An open/unrestricted API that will allow for integration with any 3 rd party solution such as ERP/SCADA/PLC's etc.				
Ability to support Single Sign On (SSO)				
Cross location inventory tracking; user defined configuration, access groups				
The system should allow for cloud-based storage and retrieval of evidence of learning outcomes (Word documents, Excel spreadsheets, PowerPoint presentations, computer code in text files, images, audio files, and videos).				
Ability to create barcodes/QR codes that techs can scan on their mobile device to pull up assets. The service requestor page should be accessed using a barcode/QR code				
The system should be available at all times with the exception of routine maintenance.				
System should have sufficient timely backup so that data and artifacts are never lost.				
Visibility of Technician's workloads via a calendar that can be updated in real time to shift around work orders if needed, view hours allotted to techs. Any changes made on this calendar can be set up for techs to be notified				

Vendor should provide 3 days of on-site training for the Facilities Manager after award of the contract.				
Vendor should be able to provide telephone and on-line support				
Vendor should be able to provide video tutorials for the Facilities Dept.				
Spare parts tracking, automatic re-order points of inventory, parts check in/out				
Asset history records				
360+ included reports, codeless configuration, interactive data, schedules and notifications, SQL based – complete visibility				
Modules needed: Assets & Asset classification; Preventive Maintenance; Work orders and project; Labor resources, crafts, and training; Procedures and tasks; Inventory, stock rooms, tools and purchasing				
Supporting modules needed: requestors, members and access groups, bulletins and documents, companies and contacts and categories				
365 days of professional technical service provided from the day of application				

RESTRICTION OF BOYCOTT OF ISRAEL CERTIFICATION

Pursuant to Arkansas Code Annotated § 25-1-503, a public entity shall not enter into a contract valued at \$1,000 or greater with a company unless the contract includes a written certification that the person or company is not currently engaged in and agrees for the duration of the contract not to engage in, a boycott of Israel.

By signing below, the Contractor agrees and certifies that they do not currently boycott Israel and will not boycott Israel during any time in which they are entering into, or while in contract, with any public entity as defined in § 25-1-503* If at any time after signing this certification the contractor decides to engage in a boycott of Israel, the contractor must notify the contracting public entity in writing.

If a company does boycott Israel, see Arkansas Code Annotated § 25-1-503.

Name of public entity	The University of Arkansas at Pine Bluff Arkansas
AASIS Vendor Number	Not Applicable
Contractor/Vendor name	

Contractor Signature: _____ Date: _____

Signature must be handwritten, in ink.

“Public Entity” means the State of Arkansas, or a political subdivision of the state, including all boards, commissions, agencies, institutions, authorities, and bodies politic and corporate of the state, created by or in accordance with state law or regulations, and does include colleges, universities, a statewide public employee retirement system, and institutions in Arkansas as well as units of local and municipal government.

**Request for Taxpayer
Identification Number and Certification**

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate		
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.		
	<input type="checkbox"/> Other (see instructions) ▶ _____		
	5 Address (number, street, and apt. or suite no.) See instructions.		Requester's name and address (optional)
6 City, state, and ZIP code			
7 List account number(s) here (optional)			

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number

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OR

Employer identification number

--	--	--	--	--	--	--	--	--	--

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

ILLEGAL IMMIGRANT CERTIFICATION REQUIRED PRIOR TO AWARD

PROHIBITION AGAINST CONTRACTING WITH ILLEGAL IMMIGRANTS – Acts 157 of 2007.

Regarding those contracts over \$25,000.00 – No state agency may enter into or renew a public contract with a contractor who knows that the contractor or a subcontractor employs or contracts with an illegal immigrant to perform work under the contract. Certification Required by Contractor prior to award of contract.

It is the requirement of the Office of State Procurement that prior to an award the contractor must certify on the Office of State Procurement's web site which is

https://www.ark.org/dfa/immigrant/index.php?c=user&m=welcome&_ga=2.57404522.1945312742.1596498092-287535036.1594827231 that his company does not employ nor will employ illegal immigrants for this project or service. (MUST BE DONE WITHIN FIVE (5) DAYS OF INTENT TO AWARD NOTICE)

Instructions:

Click the Search/Submit Disclosure Forms. Complete the questions to become certified. Once done you must print a copy of the certificate to send to the UAPB Procurement Official. Certificate must be submitted prior to Purchase Order issue or Contract Award.

The screenshot shows a web browser window with the URL [ark.org/dfa/immigrant/index.php?c=user&m=welcome&_ga=2.57404522.1945312742.1596498092-287535036.1594827231](https://www.ark.org/dfa/immigrant/index.php?c=user&m=welcome&_ga=2.57404522.1945312742.1596498092-287535036.1594827231). The page features the Arkansas Department of Transportation logo on the left and the title "Illegal Immigrant Disclosure Certification" in the center. Below the title, there are navigation links for "Home" and "Welcome Agency - Login". A "Vendor Submit Disclosure Form" box is prominently displayed, containing the text: "Are you a vendor and need to submit a disclosure form?", "Disclosure forms are valid for one year.", and a blue button labeled "Search/Submit Disclosure Forms". In the top right corner, there are links for "Contact Us" and "Live Technical Support".