North Carolina<br>Department of Administration Division of Purchase \& Contract

Mark Edwards
Acting Secretary

Odessa McGlown

February 22, 2021
Excel Wipers, Inc.
Attn.: Barbara Snavely
205 Woodbourne Rd
Greensboro, NC 27410
Re: IFB \#2202001166 Terry Cloths
Dear Mrs. Snarely,
The Division of Purchase \& Contract has completed its evaluation of the bids submitted in response to the above-reference Invitation for Bids. Pursuant to Executive Order No. 50 (Price-Matching Preference), Excel Wipers, Inc. has qualified for the price-matching preference and is eligible for the contract award, because its bid price of $\$ 87,378.80$ was within $[5 \%$ or $\$ 10,000$ ] of the lowest responsible out-of-state bidder's price of $\$ 84,392.00$. Pursuant to Paragraph 23 of the Instruction to Bidders, Excel Wipers, Inc. will have three (3) business days from the date above that is by the close of business on February 25, 2021, to express Excel Wipers, Inc's intent to accept the contract award at $\$ 84,392.00$, which matches the price of the lowest responsible out-of-state bidder.

To acknowledge Excel Wipers, Inc.'s acceptance of the intended contract award, please: (1) have the person that executed the bid or any officer, manager, supervisor or employee of the authorized to bind Excel Wipers, Inc. to a contract place his or her signature above the line under "ACCEPTED BY and (2) fax/email this letter back to the undersigned purchaser by the close of business on the date indicated above. Excel Wipers, Inc. may also decline the offer of the contract award by placing the signature of an authorized representative above the line under "DECLINED BY". If this letter is not returned with the requested countersignature by the deadline, then the lack of a response will be treated as if the Excel Wipers, Inc. declined the offer of the contract award.

IF THE SIGNED ACCEPTANCE IS NOT RECEIVED BY THE UNDERSIGNED PURCHASER BY THE CLOSE OF BUSINESS ON THE THIRD BUSINESS DAY, THEN THE INTENDED OFFER OF THE CONTRACT AWARD TO EXCEL WIPERS, INC. SHALL AUTOMATICALLY EXPIRE AND BE DEEMED AUTOMATICALLY WITHDRAWN WITHOUT ANY FURTHER COMMUNICATION TO EXCEL WIPERS, INC. THE REVOCATION OF THE OFFER BY FAILING TO SUBMIT THE ACCEPTANCE BY THE DEADLINE IS FINAL AND NOT SUBJECT TO ANY ADMINISTRATIVE REVIEW.

Your interest in doing business with the State of North Carolina is very much appreciated.
Should you have any questions, please do not hesitate to contact me at sandy.anderson@doa.nc.gov.
Sincerely,


Sandy Anderson
State Procurement Specialist III


DECLINED BY:
Print Name:
Print Title:
Print Date:
Print Date: $2 / 24 / 21$ $\qquad$

[^0]
# EXCEL 

 WIPERS205 Woodbourne Rd. Greensboro, NC 27410
336-292-5829 (FAX) 336-856 9097
email: excelwipers@excelwipers.com
HUB Approved
Duns\#861412948
Excel Wipers, inc 205 Woodbourne Rd Greensboro NC 27410 3362925829
Barbara Snavely Bid \# 2020001166

# EXCEL WIPERS 

205 Woodbourne Rd. Greensboro, NC 27410 336-292-5829 (FAX) 336-856 9097 email: excelwipers@excelwipers.com HUB Approved Duns\#861412948

## 1/27/2021

To whom it may concern:
I have read the IFP in its entirety
Barbara Snavely
President
Excel Wipers
A Supplier Diversity Company

| STATE OF NORTH CAROLINA <br> Division of Purchase and Contract |  |
| :--- | :--- |
| Refer ALL Inquiries regarding this IFB to: <br> Sandy Anderson | Invitation for Bids \# 2020001166 <br>  <br> Using Agency: Department of Transportation will be publicly opened: February 1, 2021 at 2:00pm <br> Requisition No.: PR11967930Commodity No. and Description: <br> 471315 - Cleaning rags and cloths and wipes |

## EXECUTION

in compliance with this Invitation for Bids (IFB), and subject to all the conditions herein, the undersigned Vendor offers and agrees to furnish and deliver any or all items upon which prices are bid, at the prices set opposite each item within the time specified herein

By executing this bid, the undersigned Vendor understands that False certification is a Class I felony and certifies that:

- this bid is submitted competitively and without collusion (G.S. 143-54),
- that none of its officers, directors, or owners of an unincorporated business entity has been convicted of any violations of Chapter 78A of the General Statutes, the Securities Act of 1933, or the Securities Exchange Act of 1934 (G.S. 143-59.2), and
- it is not an ineligible Vendor as set forth in G.S. 143-59.1.

Furthermore, by executing this bid, the undersigned certifies to the best of Vendor's knowledge and belief, that:

- it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from covered transactions by any Federal or State department or agency.
As required by G.S. 143-48.5, the undersigned Vendor certifies that it, and each of its sub-Contractors for any Contract awarded as a result of this IFB, complies with the requirements of Article 2 of Chapter 64 of the NC General Statutes, including the requirement for each employer with more than 25 employees in North Carolina to verify the work authorization of its employees through the federal E-Verify system.
G.S. 133-32 and Executive Order 24 (2009) prohibit the offer to, or acceptance by, any State Employee associated with the preparing plans, specifications, estimates for public Contract; or awarding or administering public Contracts; or inspecting or supervising delivery of the public Contract of any gift from anyone with a Contract with the State, or from any person seeking to do business with the State. By execution of this bid response to the IFB, the undersigned certifies, for Vendor's entire organization and its employees or agents, that Vendor are not aware that any such gift has been offered, accepted, or promised by any employees or agents of Vendor's organization.

By executing this bid, Vendor certifies that it has read and agreed to the INSTRUCTIONS TO VENDORS and the NORTH CAROLINA GENERAL TERMS AND CONDITIONS.
Failure to execute/sign bid prior to submittal may render bid invalid and it MAY BE REJECTED
Late bids cannot be accepted.


## VALIDITY PERIOD

Offer valid for at least 60 days from date of bid opening, unless otherwise stated here: $\qquad$ days. After this date, any withdrawal of offer shall be made in writing, effective upon receipt by the agency issuing this IFB.

## BID ACCEPTANCE

The contract is a separate document that represents the Vendor's and the State's entire agreement (herein "Contract"). If your bid is accepted and results, through negotiation or otherwise, in a contract award you will be expected to accept the NORTH CAROLINA GENERAL TERMS AND CONDITIONS as part of the Contract. Dependent upon the product or service being offered, other terms and conditions may apply.

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FOR STATE USE ONLY: Offer accepted and Contract awarded this___ day of March_, 2021, as indicated
(Authorized Representative of Purchase \& Contract)

RFP\# PR11967930
Vendor Name: Excel wipers, inc

In accordance with NC General Statute 143-59.4, the Vendor shall detail the location(s) at which performance will occur, as well as the manner in which it intends to utilize resources or workers outside of the United States in the performance of The Contract.

Vendor shall complete items a) and b) below.
a) Will any work under this Contract be performed outside the United States?YES NO
```

If "YES":

```

1, List the location(s) outside the United States where work under The Contract will be performed by the Vendor, any sub-Contractors, employees, or other persons performing work under the Contract:
2. Specify the manner in which the resources or workers will be utilized:
b) Where, within the U.S., will work be performed?
Lexingtorn, Ternesee

NOTES:
1. The State will evaluate the additional risks, costs, and other factors associated with the utilization of workers outside the United States prior to making an award.
2. Vendor shall provide notice, in writing to the State, of the relocation of the Vendor, employees of the Vendor, sub-Contractors of the Vendor, or other persons performing services under the Contract to a location outside of the United States.
3. All Vendor or sub-Contractor personnel providing call or contact center services to the State of North Carolina under the Contract shall disclose to inbound callers the location from which the call or contact center services are being provided.

Version Date: 1/2020

\section*{CERTIFICATION OF FINANCIAL CONDITION}

\section*{Attachment}
\(\qquad\)

Solicitation \#: 202001166
Vendor Name: Excel (ipers inc
The undersigned hereby certifies that: [check all applicable boxes]
\(\square\) The Vendor is in sound financial condition and, if applicable, has received an unqualified audit opinion for the latest audit of its financial statements.
Date of latest audit: \(n\) /a (If no audit within past 18 months, explain reason below.)
(7) The Vendor has no outstanding liabilities, including tax and judgment liens, to the Internal Revenue Service or any other government entity.


The Vendor is current in all amounts due for payments of federal and state taxes and required employmentrelated contributions and withholdings.

16 The Vendor is not the subject of any current litigation or findings of noncompliance under federal or state law.
D. The Vendor has not been the subject of any past or current litigation, findings in any past litigation, or findings of noncompliance under federal or state law that may impact in any way its ability to fulfill the requirements of this Contract.
1. He or she is authorized to make the foregoing statements on behalf of the Vendor.

Note: This shall constitute a continuing certification and Vendor shall notify the Contract Lead within 15 days of any material change to any of the representations made herein.

If any one or more of the foregoing boxes is NOT checked, Vendor shall explain the reasons) in the space below:


\section*{[This Certification must be signed by an individual authorized to speak for the Vendor]}

\footnotetext{
North Carolina Certification of Financial Condition
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}

\section*{VENDOR REQUEST FOR EO50 PRICE-MATCHING}

IF\# \(\qquad\)
202,00 i166
Vendor Name: \(\qquad\) \(1 D C\)

\section*{PART I-EO50: Resident Bidder Determination}

Vendor shall check the applicable boxes below. In order to be considered for the price-matching opportunity under Executive Order \#50 and G.S. 143-59(c)(1), Vendor must meet the definition of a "Resident Bidder".

By submitting this form with the proposal, the Vendor certifies that:

\(\square\)
it has paid unemployment taxes to the State of North Carolina for the most recent quarter or annually, and has specifically done so for the last such payment period.
[. it has paid income taxes to the State of North Carolina each calendar quarter, or otherwise annually, and has specifically done so for the last such payment period.

\section*{PART II -EO50}

I certify that the Vendor's principal place of business is located in North Carolina. Principal place of business is defined as the principal place from which the trade or business of the bidder is directed or managed.
A. Provide address of principal place of business:


Street Address (no P.O. Box number)


City, State, Zip Code

Is the above address the location of Vendor's overall headquarters?YESNO

If Vendor has a public website, provide the link/address:

\section*{B. ATTACH A COPY OF VENDOR'S MOST RECENT FILINGS WITH THE NORTH} CAROLINA SECRETARY OF STATE (such as Vendor's Certificate of Authority, Annual Report or such other filing that discloses a North Carolina business address for the Vendor).

\section*{OR (check the box below)}Vendor certifies that its business is not required to make filings with the North Carolina Secretary of State. If box is not checked, state reason why no filings are required:

Vendor Price Matching Opportunity
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pointed out in its bid. Vendor shall include with its bid sufficient documentary evidence to demonstrate the qualitative, functional, operational, organizational and conformational equivalence of the bid item to the identified item.

\subsection*{4.4 TRANSPORTATION AND IDENTIFICATION}

The Vendor shall deliver Free-On-Board (FOB) Destination to any requested location within the State of North Carolina with all transportation costs and fees included in the total bid price.

When an order is placed using a purchase order, the purchase order number shall be shown on all packages and shipping manifests to ensure proper identification and payment of invoices. If an order is placed without using a purchase order, such as via phone, the Buyer's name shall be show on all packages. A complete packing list shall accompany each shipment. Vendors shall not ship any products until they have received an order.

\subsection*{4.5 DELIVERY}

The Vendor shall deliver Free-On-Board (FOB) Destination to the following location(s):

\section*{NCDOT Central Inventory Warehouse}

5105 Beryl Road
Raleigh, NC 27606
Successful Vendor shall complete delivery within seven (7) consecutive calendar days after receipt of purchase order.
For completion by Vendor: Delivery will be made from Lexingtom. Tn.
consecutive calendar days after receipt of purchase order. Promptness of delivery may be used as a factor in the award criteria. 7 day 50

\subsection*{4.6 WARRANTY}

Manufacturer's standard warranty shall apply. Vendors shall include a copy of the manufacturer's standard warranty with the bid response.

\subsection*{4.7 SAMPLES}

Samples are not required prior to bid opening date; however, samples may be required at a later time. If so requested, Vendor agrees to furnish samples of items offered at no expense to the State within five (5) consecutive calendar days after request is made by the State. Failure to comply with this requirement shall be a sufficient basis for rejection of the bid without further consideration.

\subsection*{4.8 DEVIATIONS}

The nature of all deviations from the Specifications and Requirements listed herein shall be clearly described by the Vendor. Otherwise, it will be considered that items offered by the Vendor are in strict compliance with the Specifications and Requirements, and the successful Vendor shall be held responsible to supply conforming goods. Deviations shall be explained in detail below or on an attached sheet. However, no implication is made or intended by the State that any deviation will be acceptable. Do not list objections to the North Carolina General Contract Terms and Conditions in this section.

\subsection*{4.9 REFERENCES}

Vendors shall provide at least three (3) references, using ATTACHMENT G: CUSTOMER REFERENCE FORM, for which your company has supplied the exact model of equipment offered. The State may contact these users to determine quality level of the offered equipment; as well as, but not limited to user satisfaction with Vendor performance. Information obtained may be considered in the evaluation of the proposal.

\subsection*{4.10 VENDOR'S REPRESENTATIONS}

If the bid results in an award, the Vendor agrees that it will not enter any agreement with a third party that may abridge any rights of the State under the Contract. If any Services, deliverables, functions, or responsibilities not specifically described in this solicitation are required for Vendor's proper performance, provision and delivery of the service and deliverables under a resulting Contract, or are an inherent part of or necessary sub-task included within such service, they will be deemed to be implied by and included within the scope of the contract to the same extent and in the same manner as if specifically described in the contract. Unless otherwise

\section*{Solicitation \# 202001166}

Vendor Name: Excel Wipers, inc

Historically Underutilized Businesses (HUBs) consist of minority, women and disabled business firms that are at least fifty-one percent owned and operated by an individual(s) of the categories. Also included in this category are disabled business enterprises and non-profit work centers for the blind and severely disabled.

Pursuant to G.S. 143B-1361(a), 143-48 and 143-128.4, the State invites and encourages participation in this procurement process by businesses owned by minorities, women, disabled, disabled business enterprises and non-profit work centers for the blind and severely disabled. This includes utilizing individual(s) of the categories as subcontractors to perform the required functions in this solicitation documents.

The Vendor shall respond to questions below, as applicable.
1. Is Vendor a NC-certified HUB? Yes \(\square\) No

If yes, provide vendor \#: 561706022
If no, does vendor qualify for certification as HUB? Yes No

Vendors that check "yes" will be referred to the HUB Office for assistance in acquiring certification.
2. For Commodity procurements, are you using Tier 2 suppliers? \(\square\) Yes \(\square\) No If yes, then provide the following information:
\begin{tabular}{|l|l|l|l|l|l|l|l|}
\hline Company Name & \begin{tabular}{l} 
Company \\
Address
\end{tabular} & Website Address & Contact name & Contact email & Contact Phone & \begin{tabular}{l} 
NC HUB \\
certified?
\end{tabular} & \begin{tabular}{c} 
Percentage \\
of total bid \\
price
\end{tabular} \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline
\end{tabular}
3. For Services procurements, are you using Subcontractors to perform any of the services being procured under this solicitation?Yes \(\square\) No

If yes, then provide the following information:
\begin{tabular}{|l|l|l|l|l|l|l|l|}
\hline Company Name & \begin{tabular}{l} 
Company \\
Address
\end{tabular} & Website Address & Contact name & Contact email & Contact Phone & \begin{tabular}{l} 
NC HUB \\
certified?
\end{tabular} & \begin{tabular}{c} 
Percentage \\
of total \\
proposal \\
price
\end{tabular} \\
\hline & & & & & & & \\
\hline & & & & & & & \\
\hline
\end{tabular}

North Carolina HUB Supplemental Vendor Information
Version Date: 9/2020
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\title{
North Carolina Department of Administration Office for Historically Underutilized Businesses
}

September 4, 2018
Barbara Snavely
Excel Wipers, inc (Woman Owned)
205 Woodbourne Rd
Greensboro, NC 27410

Dear Barbara Snavely:
The Office for Historically Underutilized Businesses (HUB Office) is pleased to inform you that your company is now certified as a Historically Underutilized Business. Your firm is listed in the Statewide Uniform Certification (SWUC) Program database. This certification will remain in effect for four (4) years from the date of this letter.

You must notify the HUB Office in writing within 30 days of any changes affecting your compliance with SWUC Program eligibility requirements, including changes in ownership, day-to-day management and operational control. Failure to notify the HUB Office of these changes or reapply for certification in a timely manner may cause your HUB Certification to be revoked. In addition, please be advised your status may be changed if there is a 3rd party challenge granted against your firm. The link to the HUB Office 3rd party challenge form can be located at http://www.doa.nc.gov/hub/documents/ThirdpartyEligibilityChallengerev080811.pdf. All information submitted to the Office for Historically Underutilized Business is subject to audit and review.
The HUB Office collaborates with local Minority/Women/Small Business (M/W/SBE)Offices who offer assistance to certified HUB firms with identifying contract opportunities with state and local government. Many of these offices also offer assistance with business development. Please visit our website at http://www.doa.nc.gov/hub/programs.aspx?pid=swuc to locate the local office near you. Another great resource is the Small Business and Technology Development Center at www.sbtdc.org for free personalized business assistance and counseling.
It is important to note that although your status as a certified HUB firm greatly improves your access to state and local government contracts, this certification does not guarantee contract awards. Your ability to research opportunities and bid competitively will be important to your success in this program. We are committed to assisting you through the process with the completion of the Preliminary Business Development and Supportive Services Assessment Survey, located on the HUB Office website under the Certification Tab. The information will provide an overview of your company which will assist us in appropriately aligning contract opportunities that you are ready, willing and able to persue.

Thank you for your interest and participation in the SWUC Program as a Historically Underutilized Business firm with the State of North Carolina.

Sincerely,

\section*{Tammie Hall}

Tammie Hall
Director

\section*{CUSTOMER REFERENCE TEMPLATE}

Instructions: Please use this form to submit three (3) customer references.


Describe the quantity and type of products er services provided by your company to the customer.


Describe any service level agreements your company had in place with this customer, how your company performed against these service level agreements during the term of the contract, and describe any issues that came up during the contract period and how they were resolved.
\(\Rightarrow\) -

\section*{CUSTOMER REFERENCE TEMPLATE}

Instructions: Please use this form to submit three (3) customer references.
\begin{tabular}{|c|c|c|c|}
\hline \multirow[t]{2}{*}{Name of Customer organization} & \multirow[t]{2}{*}{city of
Griensbor} & Customer Reference Name & Sendrick carter \\
\hline & & Customer Reference Address & 401 Patton Ave Greensbors 27408 \\
\hline Contract Start Date &  & Customer Reference Phone Number & \(336-412-6316\) \\
\hline Contract'Enfo Date & na & Customer Reference Email & Kentok cki carter sreensboro. DC \\
\hline \multicolumn{4}{|l|}{Describe the quantity and type of products or services provided by your company to the customer.} \\
\hline \multicolumn{4}{|l|}{Bar Mops for Maintenance} \\
\hline
\end{tabular}

Describe any service level agreements your company had in place with this customer, how your company performed against these service level agreements during the term of the contract, and describe any issues that came up during the contract period and how they were resolved.

\section*{CUSTOMER REFERENCE TEMPLATE}

Instructions: Please use this form to submit three (3) customer references.
\begin{tabular}{|l|c|l|l|}
\hline \begin{tabular}{l} 
Name of Customer \\
organization
\end{tabular} & \(\cup N C\) & \begin{tabular}{l} 
Customer Reference \\
Name
\end{tabular} & Whitney Cheek \\
\hline \begin{tabular}{l} 
Customer Reference \\
Address
\end{tabular} & Chapel Hill. nC \\
\hline Contract Start Date & \(n / a\) & \begin{tabular}{l} 
Customer Reference \\
Phone Number
\end{tabular} & \(9 / 9843.8930\) \\
\hline Contract End Date & \(n / a\) & \begin{tabular}{l} 
Customer Reference \\
Email
\end{tabular} & wlcheele email. \\
\hline
\end{tabular}

Describe the quantity and type of products or services provided by your company to the customer.


Describe any service level agreements your company had in place with this customer, how your company performed against these service level agreements during the term of the contract, and describe any issues that came up during the contract period and how they were resolved. expressly provided herein, Vendor will furnish all of its own necessary management, supervision, labor, facilities, furniture, computer and telecommunications equipment, software, supplies and materials necessary for the Vendor to provide and deliver the Services and Deliverables.

Vendor expressly assumes full responsibility for prompt notification to the Purchasing Agency listed on the face of this IFB of any product recall in accordance with the applicable state or federal regulations. The Vendor shall support the State, as necessary, to promptly replace any such products, at no cost to the State.

\subsection*{4.11 FINANCIAL STABILITY}

Each Vendor shall certify it is financially stable by completing the ATTACHMENT F: CERTIFICATION OF FINANCIAL CONDITION. The State is requiring this certification to minimize potential performance issues from Contracting with a Vendor that is financially unstable. This Certification shall be deemed continuing, and from the date of the Certification to the expiration of the Contract, the Vendor shall notify the State within thirty (30) days of any occurrence or condition that materially alters the truth of any statement made in this Certification.

\subsection*{5.0 PRODUCT SPECIFICATIONS}

\subsection*{5.1 SPECIFICATIONS}

The specific items and any specifications that the Purchasing Agency is seeking are listed below. Items offered by the Vendor must meet or exceed the listed Specifications.
\begin{tabular}{|c|c|c|}
\hline \multicolumn{3}{|c|}{VENDOR RESPONSE} \\
\hline ITEM \# & SPECIFICATIONS & PRODUCT/SERVICE OFFERED MEETS SPECIFICATION \\
\hline 1 & \multicolumn{2}{|l|}{\begin{tabular}{l}
NCDOT Material No. 133004925 \\
Terry Towel Ends Waste, white and clean, as specified herein.
\end{tabular}} \\
\hline \multirow[t]{11}{*}{} & TOWELS SHALL BE OF 100\% COTTON TERRY CONSTRUCTION-NO SYNTHETICS & \(\square\) YES \(\square\) No \\
\hline & TOWELS SHALL BE WHITE AND CLEAN & \(\square\) Yes \(\square\) No \\
\hline & TOWELS SHALL BE NO SMALLER THAN \(12^{\prime \prime} \times 12^{\prime \prime}\) & Qres \(\square\) No \\
\hline & TOWELS WILL BE LAUNDERED & \(\square\) Yes \(\square\) No \\
\hline & TOWELS CLEANED BY DRY & \(\square\) PES \(\square\) No \\
\hline & CLEANING SOLVENTS WILL NOT BE ACCEPTED. & \(\square\) VES \(\square\) No \\
\hline & TOWELS SHALL HAVE PERIMETER SERGING TO PREVENT FREYING & \(\square\) YES \(\square\) No \\
\hline & TOWELS SHALL BE PACKED IN CASES OF 50 (FIFTY) POUNDS EACH & \(\square\) ves \(\square\) no \\
\hline & TOWELS SHALL BE PALLETIZED 16 CASES PER PALLET \& SHRINK WRAPPED & \(\square\) TES \(\square\) No \\
\hline & BOXES SHALL BE PALLETIZED ON A STATNDARD \(40^{\prime \prime} \times 48^{\prime \prime}\) PALLET, SHRINK-WRAPPED ALONG WITH AN ATTACHED PACKING SLIP THAT ACCOMPANIES THE PURCHASE ORDER NUMBER ON EACH PALLET. & \(\square\) ves \(\square\) No \\
\hline & PURCHASE ORDER MUST BE LISTED ON ALL PACKING SLIPS AND INVOICES ALONG WITH THE ASSOCIATED NCDOT MATERIAL NUMBER \& QUANTITY SHIPPED. & \(\square\) Yes \(\square\) No \\
\hline
\end{tabular}

\subsection*{6.0 CONTRACT ADMINISTRATION}

\subsection*{6.1 PROJECT MANAGER AND CUSTOMER SERVICE}

If selected for award, the Vendor shall designate and make available to the State a single point of contact for contract related issues and issues concerning performance, progress review, scheduling and any service required.

\section*{ATTACHMENT A: PRICING FORM}

\section*{FURNISH AND DELIVER:}

Vendor shall provide Terry Towel Ends Waste on an as needed basis with no guarantee of usage. Quantities represent estimates for the first year of contract.
\begin{tabular}{|c|c|c|c|c|c|}
\hline \[
\begin{aligned}
& \text { LINE } \\
& \text { ITEM }
\end{aligned}
\] & 1 YEAR ESTIMATED QUANTITY & UNIT & DESCRIPTION & UNIT PRICE PER CASE & EXTENDED
PRICE \\
\hline 1 & 1232 & Case & \begin{tabular}{l}
NCDOT Material No. 133004925 \\
501 lb Case - Terry Towel Ends Waste, white and clean, as specified herein. \\
Mfr. \(\qquad\) \\
Model No. VVN31986-50
\end{tabular} & \$70.90 & \(\$ 87348.80\) \\
\hline
\end{tabular}

TOTAL BID AMOUNT:
\$
\(87,348-80\)

\author{
Machelle Sanders \\ Secretary \\ North Carolina \\ Department of Administration \\ Odessa McGlown \\ Division of Purchase \& Contract \\ State Purchasing Officer
}

\section*{IMPORTANT ADDENDUM}

January 26, 2021
FAILURE TO RETURN THIS ADDENDUM IN ACCORDANCE WITH INSTRUCTIONS MAY SUBJECT YOUR BID TO
REJECTION ON THE AFFECTED ITEM(S):
BID Number: 202001166
ADDENDUM Number: 01 PURCHASER: Sandy Anderson

\section*{INSTRUCTIONS:}

Please make the following change(s) in the bid referenced above:
1. IFB Opening Date has been extended to February 4, 2021.
2. Atta chment \(A\) : Pricing Form shall be revised to clarify that the Department of Transportation is requesting priang for a 1 -year estimated quantity of 1,232 Cases. ( 50 lb . each case). A fully a mended Attachment A: Pricing Form, has been attached hereto a nd shallre place original pricing page provided in IFB.
3. The following Vendor questions have been answered in a ccordance with IFB Section " 2.5 BID QUESTIONS".
\begin{tabular}{|c|l|l|}
\hline Number & \multicolumn{1}{|c|}{ Clarification Question } & Clarification Response \\
\hline 1 & \begin{tabular}{l} 
Have you bought this in the past?If so, who did you buy it from, \\
vendors na me?
\end{tabular} & \begin{tabular}{l} 
Action Supply, Item \# NTTHMC-50 \\
\(\$ 71.59\) per 50 lb. box
\end{tabular} \\
\hline 2 & Do you know na me of manufacture of the product? & See line item \#1 \\
\hline 3 & How much did you pay per 50lb box? & See line item \#1 \\
\hline 4 & \begin{tabular}{l} 
Is this the first time for this item, if not what was the previous \\
pricing for this item either by pound or by the 50 \# box.
\end{tabular} & See line item \#1 \\
\hline 5 & \begin{tabular}{l} 
What is the smallest quantity of rags per order that would be \\
purchased? You are asking for a per pound price on page 10. A \\
minimum per order quantity is needed to give the best delivered \\
price.
\end{tabular} & \begin{tabular}{l} 
1-year estimated quantity is 61,600 LBS (1232 cases of 50 50 50 \\
increments of 3,000 lbs. have been purchased monthly. Note: \\
Quantities are not guaranteed.
\end{tabular} \\
\hline
\end{tabular}
4. Check ONLY one of the following categories and return one properly executed copy of this a ddendum prior to bid opening time and date.
\(\square\) Bid has already been submitted. Cha nges resulting from this addendum a re provided below:
\begin{tabular}{|c|c|c|c|c|c|}
\hline LINEITEM & 1 YEAR ESTIMATED QUANTITY & UNIT & DESCRIPTION & UNIT PRICE PER CASE & \begin{tabular}{l}
EXTENDED \\
PRICE
\end{tabular} \\
\hline 1 & 1232 & Case & \begin{tabular}{l}
NCDOT Material No. 133004925 \\
\(501 b\) Case -Terry Towel Ends Waste, white and dean, as specified herein. \\
Mfr. \(\qquad\) \\
Model No. \(\qquad\)
\end{tabular} & \$ & \\
\hline
\end{tabular}

Deid has NOT been submitted and ANY CHANGES resulting from this a ddendum are included in our bid.

\section*{Execute Addendum:}


\title{
IMPORTANT BID ADDENDUM January 29, 2021
}

FAILURE TO RETURN THIS BID ADDENDUM IN ACCORDANCE WITH INSTRUCTIONS MAY SUBJECT YOUR BID TO REJECTION ON THE AFFECTED ITEM (S):

BID Number: 202001166
ADDENDUM Number: 02
PURCHASER: Sandy Anderson

COMMODITY: Terry Cloth Towels USING AGENCY: DEPARTMENT - Transportation OPENING DATE/TIME: February 4, 2021 @ 2:00

\section*{INSTRUCTIONS:}
1. Please make the following changes) in the bid referenced above:
2. Check ONLY one of the following categories and return one properly executed copy of this addendum prior to bid opening time and date.Bid has already been submitted. Changes resulting from this addendum are as follows:
\(\square\) Bid has already been submitted. NO CHANGES resulted from this addendum.
IBid has NOT been submitted and ANY CHANGES resulting from this addendum are included in our bid.
Execute Addendum:


ADDRESS (CITY \& STATE): 205 woodbovine Fd (Treenskon DC 274)0 AUTHORIZED SIGNATURE

NAME and TITLE (Print)

\begin{tabular}{|l|l|}
\hline DELIVERED BY US POSTAL SERVICE & DELIVERED BY ANY OTHER MEANSISPECIAL \\
(REGULARISTANDARD MAIL ONLY) & DELIVERYIOVERNIGHT (BY ANY OTHER CARRIER) \\
\hline BID NO. & BID NO. \\
NC DEPARTMENT OF ADMINISTRATION & NC DEPARTMENT OF ADMINISTRATION \\
DNISION OF PURCHASE AND CONTRACT & DHISION OF PURCHASE AND CONTRACT \\
1305 MAIL SERVICE CENTER & 116 WEST JONES STREET Room 4062 4 \\
RALEIGH NC Floor \\
\hline
\end{tabular}

SPECIAL NOTE - PLEASE READ**
The US Postal Service DOES NOT deliver any mail (US Postal Express Mail, Certified, Priority, Overnight, etc.) to our physical address of 116 West Jones Street.```


[^0]:    State of North Carolina | Purchase \& Contract
    1305 Mail Service Center | 116 West Jones Street | Raleigh, NC 27699-1305 9198074500 T

