CUBA-RUSHFORD CENTRAL SCHOOL DISTRICT 5476 ROUTE 305 CUBA, NEW YORK 14727

585-968-2650 *****

BID FOR

KITCHEN EQUIPMENT REPAIRS

In accordance with the provisions of Section 103 of the General Municipal Law, an advertisement for bids was published in the Olean Times Herald and Wellsville Daily Reporter. As stated in such notice, bids will be publicly opened and read in the Board Room at the Middle High School, 5476 Route 305, Cuba, NY on Monday, August 17th, 2020, at 2 PM. All bids must be submitted in a sealed, opaque envelope and marked "KITCHEN EQUIPMENT REPAIRS."

The Board of Education reserves the right to accept or reject any bid.

Name of Bidder:	
Address of Bidder:	
Telephone Number:	
Fax Number:	
Email Address:	
Ask for:	

BID FORM – KITCHEN EQUIPMENT REPAIRS

The Cuba Rushford School District is requesting sealed bids for KITCHEN EQUIPMENT REPAIRS.

Questions may be directed to Dave Hardman at 716-753-6101 or DHardman@mycrcs.org.

According to the NYS Department of Labor, prevailing wages must be paid and certified payrolls must be submitted to the Central Business Office upon completion of work, prior to release of payment.

The winning bidder must provide a certificate of insurance naming the school district as an additional insured. A W-9 form must also be submitted.

The Non-Collusive Certification and Iran Divestment Act Certification must be attached to this bid.

Bid Specifications:	
Repair of Ovens, Stea	mers, Dishwashers, Boiler and miscellaneous kitchen equipment
Labor Rate	\$
Travel Charge	\$
Parts Discount	\$
Please enclose any inf	ormation that you think will help in our determination.
Bidder:	
Signed by:	
Title:	
Date:	

NON-COLLUSIVE BIDDING CERTIFICATION

By submission of this bid, each bidder and each person signing on behalf of any bidders, certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of knowledge and belief:

- 1) The prices in this bid have been arrived at independently without collusion, consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor:
- 2) Unless otherwise required by law, the prices that have been quoted in this bid have not knowingly been disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and
- 3) No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

NAME OF COMPANY:		
	Individual or Legal Name of Firm	or Corporation
	-	_
MAILING ADDRESS: _		
	7.	
CITY/STATE/ZIP CODE	5:	
		_
BY:		
	re of Representative of Firm or Corp	poration
_	-	
NAME:		
Please P	rint	Please Print
DATED.		
DATED:		

IRAN DIVESTMENT ACT CERTIFICATION

By submission of this bid, (Kitchen Equipment Repairs), or by assuming the responsibility of a Contract awarded hereunder, each bidder and each person signing on behalf of any bidders, certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief:

That each bidder/contractor/assignee is not on the "Entities Determined To Be Non-Responsive Bidders/Offerers Pursuant to The New York State Iran Divestment Act of 2012" list created pursuant to paragraph (b) subdivision 3 of section 165-a of the New York State Finance Law and posted on the OGS website at http://www.ogs.ny.gov/about/regs/docs/ListofEntities.pdf and further certifies that it will not utilize on such Contract any subcontractor that is identified on the Prohibited Entities List. Additionally, Bidder/Contractor is advised that should it seek to renew or extend a Contract awarded in response to the solicitation, it must provide the same certification at the time the Contract is renewed or extended. (See paragraph 31 in the specifications and conditions section of this document.)

NAME OF COMPANY:		
Individu	ual or Legal Name of Firm or Corporation	
MAILING ADDRESS:		
CITY/STATE/ZIP CODE·		
CITT/STATE/ZII CODE.		
DV.		
BY:Signature	e of Representative of Firm or Corporation	
	1	
NAME:	TITLE:	
Please Print	Please Print	
DATED:		
	SWORN to before me this	
	5 WORN to before the this	
	1 6	
	day of 20	
Notary	Publice	