CUBA-RUSHFORD CENTRAL SCHOOL DISTRICT

SPECIFICATIONS AND BID FORM

FOR

CUSTOM HEIGHT ADJUSTABLE TABLES

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 the Wellsville Daily Reporter.

As stated in such notice, bids will be received and publicly opened and read in the Board Room at the Cuba Rushford Middle High School, 5476 Route 305, Cuba, NY 14727 on Thursday, June 6, 2019 at 2:00 PM.

All bids must be submitted in a sealed opaque envelope and marked "Custom Tables".

Name of Bidder:

Address of Bidder:

Telephone Number:

Ask for:

SPECIFICATIONS AND BID FORM FOR CUSTOM HEIGHT ADJUSTABLE TABLES

Product Description:

| Height adjustable tab | le consisting of: |
|---------------------------------------|--|
| Tubular 'T' Bases (2 H-1" increments. | per table), casters, adjustable spring clip (height adjust from 24 3/4 to 33 3/4 |
| 1- 1/8 X 60W X 24D | Rectangular work surface for use with straight front corners, full dimension |
| Finish: | |
| Bases-light brown | |
| Laminate- WA-1573- | -136-09 White Board Laminate |
| Edge-3mm PVC Desi | igner White |
| Price per specified tal | ble \$ |
| Shipping cost and del | livery estimate will be as detailed below: |
| | |
| | |
| | |
| Firm Name | |
| Name of Signer | · |
| Signature | |
| Title | |
| Address | |
| Phone Number | |
| Fax | |
| Date | |

The Non-Collusive Certification and Iran Divestment Act Certification must be attached to this bid. The winning bidder must provide a completed W-9 form.

NON-COLLUSIVE CERTIFICATION

By submission of this bid, each bidder and each person signing on behalf of any bidder 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 his 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 competitor;
- (2) Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly 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.

We, the undersigned, purpose to furnish all materials called for, in full accordance with the specifications and instructions in the attached bid proposal, and agree to all conditions therein.

| FIRM | |
|-----------|--|
| ADDRESS | |
| PHONE NO. | |
| SIGNED BY | |
| TITLE | |

IRAN DIVESTMENT ACT

CERTIFICATION

By submission of this bid, (Bid for Custom Tables), 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/Listof Entities.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.

| NAME OF COMPANY: | | | |
|-------------------------|----------------|-------------------------|---------------------|
| | Individ | lual or Legal Name of I | Firm or Corporation |
| MAILING ADDRESS: | | | |
| CITY/STATE/ZIP CODE: | | | |
| BY: | | | |
| Signa | iture of Repre | sentative of Firm or Co | orporation |
| NAME: | | TITLE: | |
| Please | e print | | Please print |
| DATED: | | | |
| SWORN to before me this | | | |
| | | | |