

***Bid Package  
For  
LED Bulbs for Winterfest***



***City of Sevierville  
Department of Park & Recreation  
120 Gary Wade Boulevard  
P. O. Box 5500  
Sevierville, TN 37864-5500  
Phone: (865) 453-5441  
Fax: (865) 428-2560  
Contact: Bob Parker-Director Parks/Recreation  
Email: bparker@seviervilletn.org***

*February 2010*

## **INFORMATION FOR BIDDERS**

### RECEIPT AND OPENING OF BIDS

The City of Sevierville, Tennessee (herein called the "Owner") invites bids on the form(s) attached hereto for **LED BULBS FOR WINTERFEST**. The Owner will **RECEIVE BIDS UNTIL 2:00PM TUESDAY, February 23, 2010** at Sevierville City Hall, 120 Gary Wade Boulevard, Sevierville, Tennessee, 37862 (Mailing address: P. O. Box 5500, Sevierville, Tennessee, 37864-5500). Bids will then be publicly opened and read aloud at Sevierville City Hall, 120 Gary Wade Boulevard, Sevierville, Tennessee. The envelope containing the bid must be sealed; addressed to Lynn McClurg, City Recorder, and must bear the following information:

Name of Bidder  
Bidder's Address  
Date and Time of Bid Opening  
Bid Enclosed: **LED BULBS FOR WINTERFEST**

The Owner may consider informal any bid not prepared and submitted in accordance with the provisions hereof, and may waive any informality or reject any and all bids. Any bid received after the time and date specified shall not be considered.

### QUALIFICATIONS OF BIDDERS

The Owner may make such investigations as he/she deems necessary to determine the ability of the bidder to supply the necessary supplies, and the bidder shall furnish to the Owner all such information and data for the purpose as the Owner may request. The Owner reserves the right to reject any bid if the evidence submitted by, or investigation of, such bidder fails to satisfy the Owner that such bidder is properly qualified to carry out the obligation of the Contract by supplying the supplies contemplated therein. Conditional bids will not be accepted.

### METHOD OF AWARD - LOWEST QUALIFIED BIDDER

If at the time this contract is to be awarded the lowest base bid submitted by a responsible Bidder does not exceed the amount of funds then estimated by the Owner as available to finance the contract; the contract will be awarded on the bid. If such bid exceeds such amount, the Owner may reject all bids or may award the contract on the lowest bid with such deductible alternates to produce a net amount, which is within the available funds.

Multiple awards may be made from this contract.

The Owner reserves the right to determine the low Bidder by durability and maintenance costs over the life of the equipment. This may be done by means of past experience or research. Initial cost may not determine low bid.

In case of error or discrepancy in the mathematics of the bid price, the unit prices shall prevail.

### QUANTITIES AND LENGTH OF CONTRACT

This contract is for the sale and delivery of Lighting Displays to the City of Sevierville. WINTERFEST LED Bulbs shall be delivered to the City of Sevierville by:

**Bid A: June 1, 2010**

**Bid B: August 1, 2010**

Prices contained herein are to be firm for the term of the contract. The Owner reserves the right to re-bid anytime during the term of the contract. Owner reserves the right to

**OBLIGATION OF BIDDERS**

At the time of the opening of bids, each bidder will be presumed to have read and to be thoroughly familiar with the specifications. The failure or omission of any bidder to examine all the forms, instruments, and documents shall in no way relieve the bidder from any obligation in respect to his/her bid.

Each bidder is requested to fill out and return the attached Title VI Information sheet, vendor sheet, and W-9 form as a part of the bid package.

**VENDOR INFORMATION**

All supplies that are offered for bid shall meet or exceed the specifications attached to this bid package and shall be considered as minimums unless otherwise indicated. Any exceptions shall be explained in writing and submitted as a part of the bid package.

**SHIPPING/DELIVERY**

Delivery shall be FOB Sevierville, Tennessee; 200 Gary Wade Blvd. Sevierville, Tennessee 37862. Any and all shipping and/or handling charges to be included in the bid price, all bulbs

**Bid A: MUST BE DELIVERED BY CLOSE OF BUSINESS ON June 1, 2010**

**Bid B: MUST BE DELIVERED BY CLOSE OF BUSINESS ON August 1, 2010**

**SPECIFICATIONS FOR  
LED BULBS FOR WINTERFEST**

**Bid A:**

<b><u>Item</u></b>	<b><u>Quantity</u></b>	<b><u>Delivery Date: June 1, 2010</u></b>
<b>1. LED Bulbs</b>	<b>25,000</b>	
Specifications for LED Bulbs: C-7 Faceted/90,000 hourly rated bulb life/Intermediate Base/ 0.96 Watts/ Cool to touch/ Waterproof/Unbreakable		
Colors and Amount Per Color: (Green-25,000)		

Sample of (1) One Green LED Bulb will be required to be included with Bid Document at time of bid opening.

**Bid B:**

<b><u>Item</u></b>	<b><u>Quantity</u></b>	<b><u>Delivery Date: August 1, 2010</u></b>
<b>1. LED Bulbs</b>	<b>45,000</b>	
Specifications for LED Bulbs: C-7 Faceted/90,000 hourly rated bulb life/Intermediate Base/ 0.96 Watts/ Cool to touch/ Waterproof/Unbreakable		
Colors and Amount Per Color: (Cool White-43,000) (Yellow-1000) (Red-1000)		

Sample of (1) One LED Bulb of every color requested will be required to be included with Bid Document at time of bid opening.

## BID FORM FOR LED BULBS FOR WINTERFEST

Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Federal Tax Identification Number: \_\_\_\_\_

Business License # \_\_\_\_\_ City: \_\_\_\_\_

Schedule	Description	Total
Bid A:	25,000 LED bulbs as per specifications: FOB- Sevierville, TN.	_____
Bid B:	45,000 LED bulbs as per specifications: FOB- Sevierville, TN.	_____

It is further understood and agreed by the undersigned in submitting this proposal that the Owner reserves the following rights and privileges:

- a. To accept or reject any or all bids, and/or waive any of the informalities in the bidding.
- b. To reject any or all supplies which do not conform to or exceed these specifications, without altering bid price of this proposal.
- c. To re-bid any or all supplies during the term of the contract.

**Note:** Bidders shall not add any conditions or qualifying statements to this bid, except as provided herein, as otherwise the bid may be declared irregular as not being responsive to the Advertisement for Bids.

If you have questions regarding the specifications contained in this bid package, please contact:

**Bob Parker-Director**  
**Department of Parks/Recreation/Phone (865) 453-5441**  
**Email: [bparker@seviervilletn.org](mailto:bparker@seviervilletn.org)**

Bid Submitted by:

\_\_\_\_\_  
 Authorized Signature

\_\_\_\_\_  
 Name (Printed)

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Date

## TITLE VI INFORMATION

It is the policy of the City of Sevierville to ensure compliance with Title VI of the Civil Rights Act of 1964: 49 CFR, Part 21; related statues and regulations to that end that no person shall be excluded from participation in or be denied benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance or any other funding source on the grounds of race, color, sex, national origin, or ancestry. By virtue of submitting a response to this solicitation, bidders agree to comply with the same non-discrimination policy.

Bid Item/Project Name: \_\_\_\_\_

Bid Date: \_\_\_\_\_

\*For Title VI and IX compliance, we ask for voluntary disclosure of the following information for the majority owner of the business:

Gender:      \_\_\_ Male                              \_\_\_ Female  
Race:        \_\_\_ Caucasian                              \_\_\_ African American  
               \_\_\_ Other (please specify)

Company Name: \_\_\_\_\_

The City of Sevierville does not discriminate based on race, color, or national origin in federal or state sponsored programs, pursuant to Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d.).



# City of Sevierville

P.O. Box 5500  
Sevierville, TN 37864-5500  
865-453-5504

## VENDOR INFORMATION FORM

Name: \_\_\_\_\_

Federal Tax ID Number: \_\_\_\_\_

Business License Number: \_\_\_\_\_

County and State of License: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Shipping Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Corporation, Sole Proprietor, or Partnership: \_\_\_\_\_

(If the business is a sole proprietor the owners name): \_\_\_\_\_

**NEW VENDORS WILL BE ADDED AFTER RECEIPT OF THIS COMPLETED FORM AND VERIFICATION OF A CURRENT BUSINESS LICENSE. VENDORS WITHOUT A CURRENT BUSINESS LICENSE WILL NOT BE ACCEPTED.**

Revised 7-17-07

**Request for Taxpayer  
Identification Number and Certification**

Give form to the  
requester. Do not  
send to the IRS.

Print or type  
see specific instructions on page 2

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ..... <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
: : : :
OR
Employer identification number
: : : :

**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).

**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 on page 4.

**Sign Here**

Signature of  
U.S. person ▶

Date ▶

**General Instructions**

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

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such businesses. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,