

## One Technology Court, Montgomery, AL 36116 Telephone: 334-280-4400

**Ed Castile** Karen McGraw Director

**CFO** 

## **Invitation to Bid #995**

## AIDT- MONTGOMERY CENTER JANITORIAL SERVICES

Mandatory Walk-through: **YES** 

Walk-through Scheduled for: Date: September 16, 2024 Time: 10:00 AM CST

Bid must be received Before: Date: October 2, 2024 Time: 04:00 PM CST

**Bid Opening:** Date: October 3, 2024 Time: 10:00 AM CST

**Submit Bid Proposal to: AIDT Bid Number 995** 

> **Attention: Ashlev Price One Technology Court** Montgomery, AL 36116

Table of Contents		
NOTES TO BIDDERS	2	
CHECKLIST FOR BID SUBMISSION	3	
INSTRUCTIONS TO BIDDERS	4-7	
NONRESIDENT BIDDER INFORMATION	8	
SALES TAX CERTIFICATION – ALABAMA DEPARTMENT OF REVENUE	8	
QUALIFICATION STATEMENT	11	
BID FORMS	12-16	
BID PROPOSAL/SCOPE OF WORK	17	

## NOTES TO BIDDERS

- 1. Read the entire document from beginning to end and comply with all instructions, specifications, terms and conditions of the bid. Failure to follow all instructions, terms and conditions will result in the rejection of a submitted bid.
- 2. Bids for goods are requested using specific manufacturer, make and model information in order to establish a standard for that good based upon the need of AIDT. Vendors may bid alternative products considered to be of "equivalent" or greater quality. At the end of the item description where spaces are marked "MFR" and "Model #," vendors must indicate the brand and all mfr/model numbers necessary to complete good/unit as specified. This information must be completed ONLY if bidding an alternate item.
- 3. Vendors bidding an alternate item must submit manufacturer's specifications with bid response.
- 4. Bidders must comply with all Bid Instructions (see pages 4 8, including Item 7 Freight Charge FOB Destination on page 4.
- 5. Special programs offered for educational training should be submitted on a separate form.
- 6. Contact the AIDT Business Office Manager with questions concerning this bid and/or specifications: **Ashley Price** @ **334-280-4434** or <a href="mailto:aprice@aidt.edu">aprice@aidt.edu</a>
- 7. AIDT is seeking to award this bid for one year, with the option to roll over for up to four additional years.

#### CHECKLIST FOR BID SUBMISSION

(Vendor does not have to return this form with bid response)

SUBMIT WITH BID PROPOSAL:	<b>√</b>	
Bid Contact Sheet (p. 9)		
Vendor Agreement Sheet (p.10)		
Qualification Statement (p. 11)		
Current W-9 (March 2024, issued by IRS):		
Vendor Disclosure:		
E-Verify Alabama Immigration Compliance Form		
Bid Proposal – RESPONSE		
SUBMIT WITH BID PROPOSAL, as applicable		
Copy of current state, county or city business license, general contractor's license or applicable license as required by law		
Copy of General Liability (umbrella) insurance - <b>The coverage must be in effect for the contract period</b> . The copy must show amount limits for automobile, workmen's compensation, etc. (applicable for the delivery of materials, supplies, etc.). Vendor is responsible for all losses/damages caused by its employees.		
Descriptive/technical literature with bid proposal when bidding alternate items. The brands and model numbers referenced in bid provides a level of quality, and unless otherwise specified, are not restrictive. Reference to a website or literature with a previous bid will not satisfy this requirement. (If Applicable)		
Descriptive/technical literature package must include a full description of the items to including a minimum of manufacturer's name, model number and full descriptive literature. Please note company name, FEIN, complete mailing address, bid number and opening date in the upper left corner of substitute specifications. (If Applicable)		
Failure to include descriptive literature with the bid proposal could result in bid rejection. Physinspection and operational evaluation of equipment may also be required without cost or obligation AIDT before award is made.		

## **Bonds Required for Various Bid Solicitations**:

- 1) Requirement for bonds, other than those projects covered by Title 39 of the *Code of Alabama*, 1975, as amended, will be specifically stated in the bid solicitation.
- 2) Bid bonds, when required, must be submitted with the bid proposal.
- 3) Performance bonds, when required, must be submitted within five (5) working days after notification of a bid award. Bond amount will be specifically stated in the bid solicitation.

## **INSTRUCTIONS TO BIDDERS**

- 1. "All bids shall be sealed when received" (The Code of Alabama 1975, Section 41-16-54) Bids delivered by the vendor, United States Postal Service, Federal Express, UPS, Email BID@AIDT.EDU or other delivery service must be identified on front of the envelope in the lower left corner with the bid number, opening date and time indicated. It is the responsibility of the vendor to have the bid proposal delivered to the correct addressee and location.
- 2. Bids must be <u>received</u> no later than date and time indicated on the bid solicitation. Late bids or improperly submitted bids will not be considered.
- 3. All information shall be entered in ink, typewritten or computer generated in the appropriate space on the forms. An authorized company representative must sign the bid in ink.
- 4. This proposal is to be made without connection with any other person, company, or parties making a bid or proposal and is to be in all respects fair and in good faith, without collusion or fraud.
- 5. Bid prices are not to include tax. AIDT, a state government institution, is exempt by law from paying Alabama Sales Tax. This exemption is found in Section 40-23-4 (a) (11), Code of Alabama, and it further explained in the Sales & Use Tax Rule 810-6-3-.69.02. An exemption letter will be furnished upon request.
- 6. Bid is F.O.B. delivered to sites listed in specifications and additional training sites added during the contract period. Additional charges are not allowed (i.e. small order charges, fuel surcharges) and will not be paid. The successful bidder must assume all liability/responsibility for damage in transit.
- 7. The responsibility of determining the acceptability of any products offered rests solely with AIDT.
- 8. Bidder shall, at its sole expense, procure and keep in effect all necessary permits and licenses required for its performance of the requested work or service.
- 9. It is the responsibility of the bidder to inspect the facilities (grounds, road access, and buildings) for delivery method, installation and/or set-up of materials, supplies and/or equipment. Failure to inspect the facilities will not relieve the bidder of responsibility to provide for delivery F.O.B. or additional costs associated with delivery, installation and set up as requested in the bid.
- 10.AIDT terms and conditions and the laws of the State of Alabama shall govern any contract resulting from this bid.

- 11.Bidders desiring further information or interpretation of plans or specifications must make requests in writing to AIDT, Attn: **Ashley Price**, **One Technology Court, Montgomery, Alabama 36116**, or email **aprice@aidt.edu** at least five (5) days prior to bid opening. Answers to such requests will be given to all recorded bidders, in addendum form, which will be included as part of the contract documents.
- 12.References in the specifications to name brands, catalog numbers, etc., are for identification purposes only and in no way are intended to eliminate or discourage the offering of substitute items which exceed or equal the specifications.
- 13. When the bidder does not state a brand name or catalog number it is understood the offer is exactly as specified.
- 14. **VENDOR RESPONSIBILITY**: It is the responsibility of all bidding vendors to read this document in its entirety and to comply with all instructions, specifications and terms and conditions of the bid.

#### 15.BID RESPONSES:

**BID INFORMATION**: All information shall be entered in ink or type written in the appropriate space on the form. Bids must be signed in ink by an authorized individual on the Qualification Statement and returned to AIDT. Mistakes may be crossed out and corrections inserted before submission of the bid. **The person signing the bid must initial corrections, in ink**.

**BID SUBMITTED**: Bids must be submitted on the forms provided to ensure complete uniformity of wording of all proposals. Bids may be rejected if they show any omissions, alterations in wording, conditional clauses, or irregularities of any kind.

**IDENTIFICATION:** Reference Page 4, Item 1: The U.S. Postal Service may apply bar code labels on envelopes which may be conceal bid identification if shown other than the lower left corner. As a result, bids can be rejected if not properly identified.

**CLARIFICATION OF RESPONSE**: All responses will be reviewed for compliance with the mandatory requirements stated within the bid. AIDT Purchasing Agent may contact the vendor for clarification of any response.

- 18.**REQUESTED INFORMATION**: Any additional information requested from a vendor must be furnished within (3) working days from receipt of request or as specified in the bid. Failure to furnish information within time frame above will result in bid rejection. See Checklist, page 3 regarding items that must be submitted with bid proposal.
- 19.**ASSIGNMENT OF CONTRACT**: To assign, sublet or transfer any contract resulting from this proposal, the vendor's must receive written approval by AIDT Business

- Manager.
- 20.**CHANGES/MODIFICATIONS**: Changes/modifications are allowed only by written change order approved by AIDT Purchasing Agent.
- 21.**DELIVERY DATE**: Delivery date(s) may be a factor in determining the award.
- 22.**DELIVERY/FREIGHT**: All items must be delivered to the "Ship To" address shown on the P.O. No deliveries are accepted on weekends or AIDT Holidays. The bid price must include delivery/freight as well as disposal of shipping/packaging materials.
- 23.**NEW EQUIPMENT**: All equipment must be new and unused and acceptable by the original equipment manufacturer for their maintenance.
- 24.**MANUFACTURER/MODEL**: At the end of the item where marked "MFR" and "model", vendors must indicate the manufacturer & all stock/model numbers necessary to complete the unit as specified. This information must be completed unless bidding the recommended MFR/Model.
- 25. WARRANTY INFORMATION: Equipment shall be warranted. Vendor must specify warranty terms and conditions. The warranty shall commence on the date the equipment is delivered. Vendor will use whatever means required to facilitate this warranty, and will insure total satisfactory performance to AIDT.
- 26.**SERVICE**: Upon request for services vendor must provide parts and labor within 12 hours of notification (Monday-Friday, 7:00 am-4:00 pm).
- 27.**FIRM PRICING**: All prices quoted must be firm for the duration of the contract.
- 28.**AWARD METHOD**: Award will be made in writing to the single, lowest bidder meeting all specifications of bid. AIDT reserves the right multi-awarded any bid, if it is in the best interest of AIDT to do so. AIDT is seeking to award this bid for one year, with the option to roll over for up to four additional years.

#### 29. CANCELLATION OF AWARD:

- ➤ AIDT reserves the right, for its convenience and without cause and without a penalty, to terminate the contract upon a thirty-(30) day written notice.
- ➤ The Contractor may terminate services upon delivery of a written thirty-(30) day notice to AIDT, Attention: Ashley Price, One Technology Court, Montgomery, AL 36116.
- 30.**ORDERING PROCESS**: Purchases from this contract will be made by purchase orders showing specific shipping information.

## 31.QUALITY OF MATERIALS AND LABOR:

- Materials used that are not otherwise specified shall be the kind and quality consistent with the trade practice for such work and shall comply with all local codes.
- ➤ All labor shall be well experienced in this type work and it shall be completed in a professional manner.
- 32.**INVOICES**: Invoice(s) are to be billed in arrears in the name of AIDT to the 'BILL TO' address on the Purchase Order. Invoices may also be submitted to AIDT Finance: invoices@aidt.edu.
- 33.**PAYMENT METHOD**: Payment will be made to the successful bidder when the equipment is completely built, delivered and operational or the service has been rendered.
- 34.**NOTE TO VENDOR**: Failure to submit required documentation with bid proposal may result in bid rejection.

# SALES TAX CERTIFICATION BY ALABAMA DEPARTMENT OF REVENUE

## **Certification Pursuant to Act Number 2021-296**

Alabama Law (Section 41-4-116, Code of Alabama 1975) provides that every bid submitted and contract executed shall contain a certification that the vendor, contractor, and all of its affiliates that make sales for delivery into Alabama or leases for use in Alabama are registered, collecting, and remitting Alabama State and Local sales, use, and/or lease tax on all taxable sales and leases into Alabama. **By submitting this bid, the bidder is hereby certifying that they are in full compliance with Act Number 2021-296,** they are not barred from bidding or entering into a contract pursuant to 41-4-116, and acknowledges that the awarding authority may declare the contract void if the certification in false.

## **BID CONTACTS**

### **ALL BIDDERS MUST:**

• Provide the names and numbers for the contact person within your organization who will be responsible for handling customer's telephone calls, faxes, e-mails, and purchase orders. Print or type the information in the spaces below if you have only one location. If you have more than one business within the State of Alabama you must furnish a list of the current locations of each of your business in the format below.

Printed Name:			
Job Title:			
Toll Free Number			
Email			
address, phone number, co	ntract person and their contact nu	tomer service. List the name, ambers.	-
Phone			
Email			
Address	City	State	
Zip			
Contact			
Job Title			

## **VENDOR AGREEMENT**

Offer to AIDT, Montgomery, Alabama; I certify that I have read all the General Conditions and Instructions to Bidders of this bid and this offer is made without prior understanding, or connection with any entity or person submitting a bid for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I am authorized to sign this bid for the bidder. I agree to abide by all conditions of this bid request.

Company Name:			
FEIN			
Address:	City:	State:	
Zip:			
Signature:			
Date:			
Printed Name:		-	
Toll Free Number:		-	
Phone:	Fax:		
Email:			

ITB 995

## **QUALIFICATION STATEMENT**

I certify that I have read all the General Conditions and Instructions to Bidders of this bid and this offer is made without prior understanding, or connection with any entity or person submitting a bid for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I am authorized to sign this bid for the bidder. I agree to abide by all conditions of this bid request.

Name of Compa	any (please type or print in ink)	Authorized Signature (sign in ink)
Complete Addre	ess for Mailing Purchase Order	Typed/Printed Name of Signature Above
City	State Zip Code	Title (please type)
Telephone Num	iber	Fax Number
	NOTAR	RIZATION
Sworn a	and subscribed before me this the	e,,,
Notary Public	c Signature	
My commission	on expires (date)	

## **MINORITY INFORMATION**

If this business is minority owned please qualify status below:

State of County of	)	)		
CERTIFICATE OF (2011-535, as amen			MMON ALA	BAMA TAXPAYER AND CITIZEN PROTECTION ACT (ACT
DATE:				
RE Contract/Grant/l	ncentive (describe	by number or subjec	t):	
				by and between
				_(Contractor/Grantee) and _(State Agency, Department or Public Entity
<ol> <li>The under to provide provisions Alabama L</li> <li>Using the formal contractor</li> <li>a</li> <li>a</li> <li>b</li> <li>b</li> <li>c</li> <li>in</li> <li>e</li> </ol>	signed holds the porepresentations se of THE BEASON-legislature, as ame following definitions //Grantee's busines USINESS ENTITY ny activity, enterprior profit.  Self-employanterships, limited ompanies authorized Secretary of State Any busine milar form of authousiness license, an MPLOYER. Any poreman, or other periodical services of the perioding any persor	t out in this Certificated AMMON ALABAMA nded by ACT 2012-4 form Section 3 of the structure.  Any person or grouse, profession, or occuped individuals, busin liability companies, for the transact busines te.  I se entity that possessing the second issued by the dany business entity erson, firm, corporations on or entity employing a shall not include the	e as the offici TAXPAYER 91) which is e Act, select p of persons cupation for g ess entities f oreign corpor is in this state ses a busines e state, any be that is opera on, partnershor custody of any person fo	with the Contractor/Grantee named above, and is authorized all and binding act of that entity, and has knowledge of the AND CITIZEN PROTECTION ACT (ACT 2011-535 of the described herein as "the Act." and initial either (a) or (b), below, to describe the employing one or more persons performing or engaging in gain, benefit, advantage, or livelihood, whether for profit or not filling articles of incorporation, partnerships, limited rations, foreign limited partnerships, and foreign limited liability e, business trusts, and any business entity that registers with as license, permit, certificate, approval, registration, charter, or business entity that is exempt by law from obtaining such a fating unlawfully without a business license. hip, joint stock association, agent, manager, representative, any employment, place of employment, or of any employee, or hire within the State of Alabama, including a public a household contracting with another person to perform casual
(a) The Contra	ctor/Grantee is a b	usiness entity or empl	oyer as those	terms are defined in Section 3 of the Act.
(b) The Contra	ctor/Grantee is not	a business entity or	employer as	those terms are defined in Section 3 of the Act.
Alabama a the State of 4. The Contra	and hereafter it will of Alabama;	not knowingly employ	, hire for em	not knowingly employ an unauthorized alien within the State of ployment, or continue to employ an unauthorized alien within ligible to enroll because of the rules of that program or other
Certified this	day of	20		
				Name of Contractor/Grantee/Recipient
			By:	
			1.0	Title
The above Certifica Thisc			erson whose	e name appears above, on
			F00.	
		VVIIN	E99:	Signature
				Olghatalo

ITB 991 12



## Request for Taxpayer Identification Number and Certification

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

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

Before	9 ye	bu begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.					
11	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the orentity's name on line 2.)	wner's na	me on line	1, and enter t	he business	/disregarded
	2	Business name/disregarded entity name, if different from above.					
Print or type. Specific Instructions on page 3.	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.  Individual/sole proprietor					ns (codes ap titles, not in ctions on pa se code (if ar	dividuals; age 3): ny)
Print or type.		classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead checox for the tax classification of its owner.  Other (see instructions)	k the app	ropriate	Compliance code (if any)	Act (FATCA	Account Tax ) reporting
3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions							
See	5	Address (number, street, and apt. or suite no.). See instructions.	Requeste	er's name a	and address (	optional)	
	6	City, state, and ZIP code					
	7	List account number(s) here (optional)					
Pari	: I	Taxpayer Identification Number (TIN)					
			_:_	Social sec	curity numbe	r	
		r TIN in the appropriate box. The TIN provided must match the name given on line 1 to av rithholding. For individuals, this is generally your social security number (SSN). However, f			7		
		lien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	, L		╛╸┖┸		
TIN, la	-		ra C	or			
			. L	Employer	identification	n number	
		ne account is in more than one name, see the instructions for line 1. See also What Name To Give the Requester for guidelines on whose number to enter.	ano	-	-		
Part	II	Certification					
Under	ре	nalties of perjury, I certify that:					
2. I am Sen	no /ice	mber shown on this form is my correct taxpayer identification number (or I am waiting for of subject to backup withholding because (a) I am exempt from backup withholding, or (b) of (IRS) that I am subject to backup withholding as a result of a failure to report all interest of ger subject to backup withholding; and	I have no	ot been no	otified by the	internal F	
3. I am	а	U.S. citizen or other U.S. person (defined below); and					
4. The	FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportin	g is corre	ect.			
becaus acquis	e y	ion instructions. You must cross out item 2 above if you have been notified by the IRS that you have failed to report all interest and dividends on your tax return. For real estate transaction or abandonment of secured property, cancellation of debt, contributions to an individual return interest and dividends, you are not required to sign the certification, but you must provide you	ns, item irement a	2 does no rrangeme	nt apply. For nt (IRA), and	mortgage i , generally,	nterest paid, payments
Sign Here		Signature of U.S. person	ate				

#### **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.

#### What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

### **Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

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-NEC (nonemployee compensation).
- 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), and 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.

Caution: If you don't return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

#### By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued):
  - 2. Certify that you are not subject to backup withholding; or
- Claim exemption from backup withholding if you are a U.S. exempt payee; and
- 4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
- 5. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See What Is FATCA Reporting, later, for further information.

Note: If you are a U.S. person and 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).

Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding. Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441–1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(I)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a saving clause. Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
  - 2. The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- 4. The type and amount of income that qualifies for the exemption from tax.
- 5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if their stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first Protocol) and is relying on this exception to claim an exemption from tax on their scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

#### **Backup Withholding**

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include, but are not limited to, interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third-party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

#### Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester;
- You do not certify your TIN when required (see the instructions for Part II for details);
  - 3. The IRS tells the requester that you furnished an incorrect TIN;
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only); or
- 5. You do not certify to the requester that you are not subject to backup withholding, as described in item 4 under "By signing the filled-out form" above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See Exempt payee code, later, and the separate Instructions for the Requester of Form W-9 for more information.

See also Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding, earlier.

#### What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code, later, and the Instructions for the Requester of Form W-9 for more information.

### **Updating Your Information**

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you are no longer tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

#### **Penalties**

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

### **Specific Instructions**

#### Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

Individual. Generally, enter the name shown on your tax return. If you
have changed your last name without informing the Social Security
Administration (SSA) of the name change, enter your first name, the last
name as shown on your social security card, and your new last name.

Note for ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040 you filed with your application.

- Sole proprietor. Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or "doing business as" (DBA) name on line 2.
- Partnership, C corporation, S corporation, or LLC, other than a disregarded entity. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. Enter any business, trade, or DBA name on line 2.
- Disregarded entity. In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner's name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For

example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

#### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, enter it on line 2.

#### Line 3a

Check the appropriate box on line 3a for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3a.

IF the entity/individual on line 1 is a(n)	THEN check the box for
Corporation	Corporation.
Individual or	Individual/sole proprietor.
Sole proprietorship	
LLC classified as a partnership for U.S. federal tax purposes or	Limited liability company and enter the appropriate tax
LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	classification: P = Partnership, C = C corporation, or S = S corporation.
Partnership	Partnership.
Trust/estate	Trust/estate.

#### Line 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

**Note:** A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

#### **Line 4 Exemptions**

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third-party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space on line 4.

1-An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).

- 2-The United States or any of its agencies or instrumentalities.
- 3—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- 4-A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- 5-A corporation.
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or territory.
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission.
- 8-A real estate investment trust.
- 9-An entity registered at all times during the tax year under the Investment Company Act of 1940.
- 10-A common trust fund operated by a bank under section 584(a).
- 11-A financial institution as defined under section 581.
- 12—A middleman known in the investment community as a nominee or custodian.
- 13—A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13,

IF the payment is for	THEN the payment is exempt for	
Interest and dividend payments	All exempt payees except for 7.	
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.	
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4.	
<ul> <li>Payments over \$600 required to be reported and direct sales over \$5,000<sup>†</sup></li> </ul>	Generally, exempt payees 1 through 5.2	
Payments made in settlement of payment card or third-party network transactions	Exempt payees 1 through 4.	

<sup>&</sup>lt;sup>1</sup> See Form 1099-MISC, Miscellaneous Information, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) entered on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37).
  - B-The United States or any of its agencies or instrumentalities.
- C-A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i).
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i).

- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state.
  - G-A real estate investment trust.
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.
  - I-A common trust fund as defined in section 584(a).
  - J-A bank as defined in section 581.
  - K-A broker.
- $L\!-\!A$  trust exempt from tax under section 664 or described in section 4947(a)(1).
- M-A tax-exempt trust under a section 403(b) plan or section 457(g) plan.

**Note:** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

#### Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, enter "NEW" at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

#### Line 6

Enter your city, state, and ZIP code.

### Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have, and are not eligible to get, an SSN, your TIN is your IRS ITIN. Enter it in the entry space for the Social security number. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note:** See What Name and Number To Give the Requester, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/EIN. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, you will generally have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon. See also *Establishing U.S.* status for purposes of chapter 3 and chapter 4 withholding, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

#### Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

- Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.
   You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- Real estate transactions. You must sign the certification, You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third-party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

#### What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
Two or more U.S. persons     (joint account maintained by an FFI)	Each holder of the account
<ol> <li>Custodial account of a minor (Uniform Gift to Minors Act)</li> </ol>	The minor <sup>2</sup>
<ol><li>a. The usual revocable savings trust (grantor is also trustee)</li></ol>	The grantor-trustee <sup>1</sup>
<ul> <li>b. So-called trust account that is not a legal or valid trust under state law</li> </ul>	The actual owner <sup>1</sup>
Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
7. Grantor trust filing under Optional Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))**	The grantor*

For this type of account:	Give name and EIN of:
Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
<ol> <li>Association, club, religious, charitable, educational, or other tax-exempt organization</li> </ol>	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (see Regulations section 1.671-4(b)(2)(ii/B))**	The trust

<sup>1</sup>List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup>Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name on line 1, and enter your business or DBA name, if any, on line 2. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup>List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

\*Note: The grantor must also provide a Form W-9 to the trustee of the trust.

\*\*For more information on optional filling methods for grantor trusts, see the Instructions for Form 1041.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

#### Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information, such as your name, SSN, or other identifying information, without your permission to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN.
- · Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax return preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen ourse or wallet, questionable credit card activity, or a questionable credit report, contact the IRS Identity Theft Hotline at 800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 877-777-4778 or TTY/TDD 800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.ldentityTheft.gov and Pub. 5027.

Go to www.irs.gov/identityTheft to learn more about identity theft and how to reduce your risk.

#### **Privacy Act Notice**

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their laws. The information may also be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.

#### VENDOR DISCLOSURE STATEMENT INFORMATION AND INSTRUCTIONS

Section 41-16-82, *Code of Alabama* 1975 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000. The disclosure statement is not required for contracts for gas, water, and electric services where no competition exists, or where rates are fixed by law or ordinance. In circumstances where a contract is awarded by competitive bid, the disclosure statement shall be required only from the person receiving the contract and shall be submitted within ten (10) days of the award.

A copy of the disclosure statement shall be filed with the awarding entity and the Department of Examiners of Public Accounts, and if it pertains to a state contract, a copy shall be submitted to the Contract Review Permanent Legislative Oversight Committee. The address for the Department of Examiners of Public Accounts is as follows: 50N. Ripley Street, Room 3201, Montgomery, Alabama 36130 - 2101. If the disclosure statement is filed with a contract, the awarding entity should include a copy with the contract when it is presented to the Contract Review Permanent Legislative Oversight Committee.

Pursuant to Section 41-16-84 (b), *Code of Alabama* 1975 the State of Alabama shall not enter into any contract or appropriate any public funds with any person who refuses to provide information as required.

Pursuant to Section 41-16-86, *Code of Alabama* 1975, any person who knowingly provides misleading or incorrect information on the disclosure statement shall be subject to a civil penalty of ten percent (10%) of the amount of the transaction, not to exceed \$10,000.00. Also, the contract or grant shall be voidable by the awarding entity.

Definitions as Provided in Section 41-16-81, *Code of Alabama* 1975 1. Family Member of a Public Employee – The spouse or a dependent of the public employee.

- **2. Family Member of a Public Official** The spouse, a dependent, an adult child and his or her spouse, a parent, a spouse's parents, or a sibling and his or her spouse, of the public official.
- **3. Family Relationship** A person has a family relationship with a public official or public employee if the person is a family member of the public official or public employee.
- **4. Person** An individual, firm, partnership, association, joint venture, cooperative, or corporation, or any other group or combination acting in concert.
- **5. Public Official and Public Employee** These terms shall have the same meanings ascribed to them in Sections 36-25-1(23) and 36-25-1(24), *Code of Alabama* 1975, (see below) except for the purposes of the disclosure requirements of this article, the terms shall only include persons in a position to influence the awarding of a grant or contract who are affiliated with the awarding entity. Notwithstanding the foregoing, these terms shall also include the Governor, Lieutenant Governor, members of the cabinet of the Governor, and members of the Legislature. (Note: The definitions for public official and public employee are now denoted as Sections 36-25-1 (25) and 36-25-1 (26), *Code of Alabama* 1975. However, Section 41-16-86 (5), *Code of Alabama* 1975 has not been codified to reflect such updates.)

Section 36-25-1(25), Code of Alabama 1975, defines a **public employee** as any person employed at the state, county or municipal level of government or their instrumentalities, including governmental corporations and authorities, but excluding employees of hospitals or other health care corporations including contract employees of those hospitals or other health care corporations, who is paid in whole or in part from state, county, or municipal funds. For purposes of this chapter, a public employee does not include a person employed on a part-time basis whose employment is limited to providing professional services other than lobbying, the compensation for which constitutes less than 50 percent of the part-time employee's income.

Section 36-25-1(26), *Code of Alabama* 1975, defines a **public official** as any person elected to public office, whether or not that person has taken office, by the vote of the people at state, county, or municipal level of government or their instrumentalities, including governmental corporations, and any person appointed to a position at the state, county, or municipal level of government or their instrumentalities, including governmental corporations. For purposes of this chapter, a public official includes the chairs and vice-chairs or the equivalent offices of each state political party as defined in Section 17-13-40, *Code of Alabama* 1975.

#### Instructions

Complete all lines as indicated. If an item does not apply, denote N/A (not applicable). If you cannot include required information in the space provided, attach additional sheets as necessary.

THE DISCLOSURE STATEMENT MUST BE SIGNED, DATED, AND NOTARIZED PRIOR TO SUBMISSION.



## State of Alabama

# Disclosure Statement Required by Article 3B of Title 41, Code of Alabama 1975

ENTITY COMPLETING FORM	
ADDRESS	
CITY, STATE, ZIP	TELEPHONE NUMBER
STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS R	RESPONSIBLE FOR GRANT AWARD
ADDRESS One Technology Court	
CITY, STATE, ZIP	TELEPHONE NUMBER
Montgomery, AL 36116 This form is provided with:	334-242-0299
Contract Proposal Request for Pr	roposal Invitation to Bid Grant Proposal
Have you or any of your partners, divisions, or any relate Agency/Department in the current or last fiscal year?	ed business units previously performed work or provided goods to any State
Yes No	
	received the goods or services, the type(s) of goods or services previously progoods or services.
STATE AGENCY/DEPARTMENT TY	/PE OF GOODS/SERVICES AMOUNT RECEIVED
Agency/Department in the current or last fiscal year?  Yes No	ed business units previously applied and received any grants from any State
	DATE GRANT AWARDED AMOUNT OF GRANT
any of your employees have a family relationship and v	icials/public employees with whom you, members of your immediate family, o who may directly personally benefit financially from the proposed transaction olic officials/public employees work. (Attach additional sheets if necessary.)
NAME OF PUBLIC OFFICIAL/EMPLOYEE	ADDRESS STATE DEPARTMENT/AGENCY

Page 1 of 2

NAME OF		NAME OF PUBLIC	C OFFICIAL/	STATE DEPARTMENT/
FAMILY MEMBER	ADDRESS	PUBLIC EMP	PLOYEE	AGENCY WHERE EMPLOY
	n items one and/or two above, descr and/or their family members as the re- tional sheets if necessary.)			
	indirect financial benefits to be gain			
oublic official or public emplo additional sheets if necessar	eyee as the result of the contract, pro (y.)	oposal, request for proposa	l, invitation to bi	d, or grant proposal. (Atta
	address(es) of all paid consultants a	nd/or lobbyists utilized to ol	btain the contrac	ct, proposal, request for p
posal, invitation to bid, or gra	ant proposal:	nd/or lobbyists utilized to ol	btain the contrac	ct, proposal, request for p
posal, invitation to bid, or gra	ant proposal:		otain the contrac	ct, proposal, request for p
posal, invitation to bid, or gra	ant proposal:		btain the contrac	ct, proposal, request for p
nosal, invitation to bid, or grand to be best of my knowledge to the best of my knowledge.	ant proposal:	that all statements on or	attached to this 0%) of the amo	s form are true and corr
Paysigning below, I certify to the best of my knowledge exceed \$10,000.00, is ap	ant proposal:  DEBYIST  under oath and penalty of perjury ge. I further understand that a civil	that all statements on or	attached to this 0%) of the amo	s form are true and corr
NAME OF PAID CONSULTANT/LO  By signing below, I certify to the best of my knowledge or exceed \$10,000.00, is ap	ant proposal:  DEBYIST  under oath and penalty of perjury ge. I further understand that a civil	that all statements on or I penalty of ten percent (1 percent or misleading information)	attached to this 0%) of the amo	s form are true and corr
By signing below, I certify to the best of my knowledge to exceed \$10,000.00, is ap	ant proposal:  DEBYIST  under oath and penalty of perjury ge. I further understand that a civil	that all statements on or I penalty of ten percent (1 percent or misleading information of the percent of the p	attached to this 0%) of the amo mation.	s form are true and corrount of the transaction,  Date Notary Expires

### **SPECIFICATIONS**

#### BID 995- AIDT MONTGOMERY CENTER JANITORIAL SERVICE

#### SCOPE OF SERVICE

- I. The appearance and cleanliness of the AIDT facilities are of the utmost importance to AIDT management. Performance of the custodial/janitorial services will be monitored and evaluated accordingly.
- 2. THE CONTRACTOR SHOULD NOT TURN OFF ANY EQUIPMENT LEFT ON BY AIDT EMPLOYEES.
- 3. Provide custodial/janitorial services for facilities located at One Technology Court, Fifteen Technology Court, five (5) days a week on Monday through Friday. The contractor will not work on Saturdays, Sundays, or state holidays without written permission by AlDT. Semi- annual carpet cleaning will take place on Saturdays only.
- 4. The contracted service includes the bidder providing all equipment and supplies necessary for the cleaning/janitorial services except the ones listed in the bid.
- 5. Contractor shall furnish any and all labor, materials. and supervision needed to perform the work as outlined in this bid to maintain the facilities in a clean and sanitary condition and in accordance with the bid specifications.
- 6. AIDT will not provide equipment and/or supplies necessary to perform the services (vacuum cleaners, dust cloths, furniture polish, etc.).
- 7. All supplies listed are at the expense of the contractor and shall be commercial strength and meet all safety requirements.
- 8. AIDT will not reimburse the contractor for the cost of the janitorial supplies.
- 9. AIDT will provide, toilet paper, hand towels, hand soap, air fresheners and trash can liners. No other supplies will be furnished by AIDT.
- 10. The contractor is required to keep all dispensers filled with appropriate supplies provided by AIDT.
- 11. The contractor is responsible for payroll of employees in the service of this contract. In the event the federal government increases the minimum wage during the contract period, the vendor shall increase the wages to match the new rate as soon as possible after the effective date.

- 12. The contractor is responsible for all payroll taxes for employees in service of this contract plus all related payroll taxes and expenses.
- 13. The Contractor will assume all liability for any injuries suffered by any person in connection with the Contractor's equipment or vehicles.
- 14. The Contractor will assume all liability for employees while working on AIDT site. All employees will be required to wear identification badges to identify themselves while on AIDT property.
- 15. The Contractor shall adequately secure the keys and code they are provided by AIDT for access to the buildings. The Contractor must immediately report in writing any such item, which becomes lost, missing or stolen, to Mrs. Linda Sherrill at <a href="lisherrill@aidt.edu">lsherrill@aidt.edu</a>. Should the Contractor lose or have stolen any keys issued to them by AIDT, the cost of changing locks or keys to the building (s) or areas accessible by the lost or stolen keys will be deducted from the Contractor's invoice to AIDT for the work performed under the contract.
- 16. The Contractor will be responsible for supervision of their personnel while on AIDT premises.
- 17. The Contractor will provide AIDT representative with a business telephone number and personal contact to handle additional requests and services.
- 18. The Contractor will invoice AIDT monthly in arrears for custodial/janitorial services. AIDT will make payment net 30 days following the period of services. Submit all invoices either by mail to: AIDT, Attention: Finance Accounts Payable, One Technology Court, Montgomery, AL 36116 or email to: <a href="mailto:invoices@aidt.edu">invoices@aidt.edu</a> and lsherrill@aidt.edu
- 19. The Contractor must provide AIDT with a signed and dated monthly summary report on the 1<sup>st</sup> Monday of each month that includes a full listing of services performed weekly, monthly, quarterly, and semi-annually. This list must include the type of services performed and date of services. Documentation must be either mailed to AIDT, Attention: Linda Sherrill, One Technology Court, Montgomery, AL 36116 or emailed to lsherrill@aidt.edu.
- 20. Monthly meetings may be conducted between AIDT contact and company contact to discuss ongoing service requirements or any related issues. Meetings may be conducted onsite at AIDT facilities or via conference call if required.
- 21. The bid quote must include the following:
  - a. A copy of certificate of insurance
  - b. Contractor's Proposal Form
  - c. Vendor Agreement
  - d. Qualification Statement
  - e. Disclosure Statement

### ACCESS HOURS/WORK SCHEDULE

I. Schedule: Monday through Friday Services:

Monday through Thursday services to be performed between the hours of 4:30 pm and 8:30 pm
Friday services to be performed after 1:30 pm
Saturday services-Carpet Cleaning only

- 2. Consult with the contract representative, Mrs. Linda Sherrill at (334) 280-4404 or email lsherrill@aidt.edu to establish a schedule for quarterly and semi-annually services.
- 3. Successful bidder will be provided a list of holidays that will be observed.
- 4. Cleaning services will not be performed on AIDT, nor the successful bidder observed holidays.
- 5. Specific services and service schedule follow on separate pages. Linda Sherrill will coordinate all cleaning procedures. Any special circumstances requiring additional access to AIDT facilities must be coordinated with Linda Sherrill.
- 6. AIDT reserves the right, without a penalty to make modifications to the service schedule. If modifications are made, AIDT will provide the vendor with a revised schedule.
- 7. In case a modification is necessary, AIDT and the vendor will recalculate the monthly cost based on services requested and bid pricing.
- 8. Services requested will be listed as daily, weekly, monthly, quarterly and semi-annually as needed billed in arrears.
- 9. AIDT will work with vendor to establish a schedule that is compatible with vendor and the work schedule for AIDT employees. The suggested schedule is subject to change to achieve the most efficient work schedule.

#### **FACILITY INFORMATION**

- 1. Two (2), one-story structures and one (1), two-story structure; Administration Offices, Training Center, Print Shop, Warehouse and Fleet Management Building.
- 2. Three (3) Restrooms in Administration Building, Two (2) Restrooms in Training Center and One (1) Restroom in Warehouse area, which includes a shower.

- 3. Kitchen area, Lobby/Receptionist area, Conference Room, Manager's Office, Two (2) Restrooms in the Fleet Management building.
- 4. One (I) Receptionist Area in Administration Building.
- 5. Two (2) Lobby Areas-one each in Administration and Training Center.
- 6. Approximately 14,932 square feet of carpeted areas.

## \*\*\*\*\*IMPORTANT NOTICE\*\*\*\*

#### **BUILDING INSPECTION REQUIREMENTS**

- I. A mandatory building inspection shall be required before submitting a bid.
- 2. All prospective bidders are required to perform an inspection of the property prior to submitting a bid.
- 3. A sign-in sheet will be provided for all attendees.
- 4. Only bidders attending the inspection and sign the sign-in sheet may submit a bid proposal. For more information on the facility inspection or directions to the site, call Ms. Linda Sherrill at (334) 280-4404 or email her at <a href="mailto:lsherrill@aidt.edu">lsherrill@aidt.edu</a>.
- 5. Buildings Inspection: Monday, September 16, 2024- 10:00am -inspection of the facilities (One Technology Court, Fifteen Technology Court) will be done for all prospective bidders. Only vendors that attend the inspection and sign the attendance form will be considered as qualified bidders. All interested vendors must attend this site visit at the appointed date and time. Please be on time, late arrivals may not be accommodated.
- 6. Prior visits for estimate purposes are not acceptable for this bid.
- 7. Any bid submitted by a non-compliant bidder or after bid close date shall be rejected.
- 8. Any previous site visits or price estimates will not be considered for this bid's bidding purposes.

## SCHEDULE OF SERVICES

J. Canaral Areas Private Offices Labby Classrooms	1	Maglebe	Monthli	Onome	Semi-
I. General Areas-Private Offices, Lobby, Classrooms;	Daily	Weekly	Monthly	Quarterly	Semi- Annual
Executive Conference Room, Joe D. Self Auditorium and Safety Offices					Allilual
Empty Wastebaskets/Trash cans; wash if needed. reline and					
dispose of trash in designated areas	X				
	71				
Dust all furniture including but not limited to desks. chairs.	X				
tables and file/storage/bookcabinets	Λ				
Clean and sanitize telephones	X				
Clean and sanitize drinking fountains	X				
Clean interior/exterior glass doors in all areas (non-ammonia)	X				
Dust mop resilient and hard floors	X				
Vacuum all carpeted areas & rugs in all areas including entry mats	X				
Spot clean spills and stains on carpet, resilient floors and floor					
mats as needed	X				
Spot clean spills and stains on furniture in lobby area as needed	X				
Polish furniture in lobby, Executive Conference Room and Joe D. Self Auditorium		X			
Polish furniture in the Director and Executive Assistant's office.					
Coordinate service schedule with AIDT contract representative		X			
Polish furniture in private offices		X			
Remove dust & cobwebs from ceiling, baseboards, corners & wall areas		X			
Dust all surfaces including sills, ledges. moldings. shelves, picture frames, ducts, blinds. etc.		X			
Vacuum fabric furniture		X			
Clean Carpet-According to attached Spec Sheet-Main Building, Training Center, Safety Offices-Warehouse					X
Front Glass Doors and window cleaning at the Administration Building and Howard Training Center. Chemicals used should be Safe for tinted windows and vinyl logos. Services to be completed during normal business hours.					х

2. WASHROOM/RESTROOMS-MAIN BUILDING, TRAINING CENTER, WAREHOUSE and FLEET MANAGEMENT	Daily	Weekly	Monthly	Quarterly	Semi- Annual
Clean, sanitize, and polish all fixtures, including toilet bowls, interior/exterior areas to the floor, urinals, and hand basins and lavatories	X				
Clean all glass and mirrors	X				
Empty all containers and disposals, insert liners, clean and sanitize all containers	X				
Empty and sanitize interior of sanitary containers	X				
Clean and refill all dispensers to normal limits - napkins, soap, tissue, towels, liners, deodorizing units, and sanitary supplies	X				
Sweep, damp mop, and sanitize hard floor	X				
Dust all surfaces including sills, moldings, ledges, shelves, frames, ducts, heating outlets		X			
Clean all walls, doors, and partitions		X			
Clean and sanitize all fixtures in Warehouse shower, including shower wall/curtain, and interior/exterior areas to the shower		X			
3. EATING, BREAK ROOM, VENDING AND KITCHEN AREA					
Damp clean and sanitize tabletops, seats, and back of chairs	X				
Empty all containers and disposals	X				
Empty trash cans and replace liners. All trash to be taken to outside trash dumpster	X				
Clean and sanitize sinks and drinking fountains	X				
Clean doors, frames, light switches, handles, and walls	X				
Clean interior and exterior of microwave oven	X				
Clean interior and exterior of refrigerators		X			

3. EATING, BREAK ROOM, VENDING AND KITCH EN AREA (cont.)	Daily	Weekly	Monthly	Quarterly	Semi- Annually
Add detergent and set the dishwasher to run a complete wash cycle. Unload dishes. cups, plates, etc. and place in cabinets	X				
Empty paper shredder in designated area and replace liners as needed		X			
Damp clean furnishings pedestals or legs		Х			
4. FLOORS-RESILIENT AND HARD, HALLWAY & BREAKROOM					
Dust and damp mop	Х				
Scrub to remove scuff and heel marks: refinish to maintain protective coating and gloss			X		
Strip clean, refinish and machine polish-Fridays only after 1:30 p				X	
5. SHOP/WAREHOUSE-DOWNSTAIRS & UPSTAIRS					
Empty, wastebaskets/trash cans; wash if needed, reline and dispose of trash in designated areas	X				
Dust all furniture including but not limited to desks, chairs, tables, and file/storage/book cabinets	X				
Clean and sanitize telephones	X				
Clean and sanitize drinking fountains	X				
Spot clean spills and stains on carpet, resilient floors and floor mats when needed	X				
Dust all surfaces including sills. ledges. moldings. shelves. picture frames. ducts. blinds, etc.	X				
Spot clean furniture	X				
Vacuum fabric furniture		X			
	l .				

5. SHOP/WAREHOUSE-DOWNSTAIRS & UPSTAIRS (cont.)	Daily	Weekly	Monthly	Quarterly	Semi- Annually
Wash and sanitize trash cans-Office areas only		X			
Oust and damp mop floors-Office areas only		X			
Strip clean, refinish, and machine polish floors-Fridays only after 1:30 pm in office areas only					X
6. PRINT SHOP					
Empty wastebaskets/trash cans and recycle bins; wash if needed reline and dispose of trash in designated areas	X				
Sweep floor	X				
Dust Shelving Units as needed			X		
7. FLEET MANAGEMENT BUILDING					
a. GENERAL AREAS					
Empty wastebaskets/trash cans. All trash to be taken to outside trash dumpster	X				
Dust mop floors	X				
Sanitize light switches and doorknobs	X				
Dust and remove cobwebs			X		
b. ALL WASHROOMS/RESTROOMS					
Clean, sanitize, and polish all fixtures	X				
Clean all glass and mirrors	X				
Empty all containers, disposals, insert liners, clean & sanitize	X				
Sweep, damp mop and sanitize hard floors	X				
Clean, sanitize, and polish all fixtures in shower			X		

7. FLEET MANAGEMENT BUILDING (cont.)	Daily	Weekly	Monthly	Quarterly	Semi- Annually
c. FLOORS					
Dust and damp mop	X				
Remove scuff marks/marks on hard floors			X		
d. BREAKROOM, EATING, VENDING & KITCHEN AREAS					
Damp clean and sanitize table tops and seats	X				
Empty all trash cans and replace liners. All trash to be taken to outside trash dumpster	Х				
Clean doors. frames, light switches, handles and walls	X				
Clean exterior/interior of microwave oven	X				
Clean exterior/interior of refrigerator		X			
8. Monthly mopping of exercise Mobile Training Unit (MTU)			X		
9. GENERAL					
Notify building contact of any irregularities (i.e. defective plumbing, unlocked doors, lights left on, restroom supplies)	X				
Turn off all lights except those to be left on, lock all doors and set alarm. If AIDT employee is present, coordinate security of building with employee.	X				

## CONTRACTOR'S PROPOSAL

# **Bid 957 - AIDT Montgomery Center Janitorial Services Proposal:**

Monthly service fee to perform daily, weekly and monthly services described in:

Section 1	General Areas-Private Offices, Lobby, Classrooms, Executive C and Joe D. Self Auditorium	onference Room,
Section2-	Washroom/Restrooms Main Building, Training Center, Ware Management	house and Fleet
	Eating, Break Room, Vending and Kitchen Area	
Section 4		
	Shop/Warehouse	
	Print Shop Fleet Management Building	
Section 7 Section 8		
Mo	onthly total for above services as described	\$
Ar	nnual total for above services as described	\$
Quarterly	Services:	
Section 4 -	Strip and Wax Floors; Hallway and Break Room	\$
An	nual total for Quarterly Services as described	\$
Semi-Ann	nual Services:	
Section 1-	Clean Carpets-Main Building, Training Center,	
	Safety Office-Warehouse	
	Clean Front Glass and Windows	\$ <u></u>
	Clean Front Glass and Windows at Admin Building and	ф
	Howard Training Center	\$
Section 5	Strip and Wax Floors, Shop/Warehouse	\$
An	nual total for Semi-Annual Services as described	\$
Section 7	Strip & Wax Floors, Fleet Management Bldg	\$
An	nual total for Semi-Annual Services as described	\$
BID ТОТ	AL	\$