

**BID SPECIFICATION SHEET FOR FB19-063**

CARPET INSTALLATION SPRATT HALL ROOM 211

**Scope**

Provide and install J&J Invision carpet in Leah Spratt Hall room 211.

* Remove existing carpet and vinyl base. Use care as to not damage walls when removing base. Any damage repair will be responsibility of the contractor.
* Clean floor of all dirt and debris to provide a clean dry surface for new carpet.
* Install J&J Coalesce modular (style 7612) – (color 1456 meet) with Nexus backing.
* Carpet install using adhesive (no tabs) per manufacturer’s recommendations. Carpet installed over an existing elevated metal floor. Apply adhesive in the centers of the metal panels (like existing) as to not get glue on the screws heads.
* Install in a quarter turn pattern.
* Install 4” vinyl base on all walls (color choice of owner).
* Install snap track transition strips in 4 doorways as needed.
* Clean up and haul away all debris.
* Project to be inspected by MWSU Physical Plant upon completion

To set up a site visit contact:

Brian Harrah

[harrah@missouriwestern.edu](mailto:harrah@missouriwestern.edu)

816-244-0343

**This will NOT be a prevailing wage project.**

* + **Bidders must submit a notarized Affidavit of Work Authorization and completed MOU signature pages, per attached memorandum dated January 2014, with their bids.**
  + **A Certificate of Liability Insurance will also be required with MWSU listed as an additional insured will be required after bid has been awarded.**
  + **Missouri Revised Statute Chapter 292.675 went into effect on August 28, 2008, all on-site employees are required to complete the ten-hour safety training program.**

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CARPET INSTALLATION SPRATT HALL ROOM 211

**BID INFORMATION**

**Sealed bids must be submitted to the Purchasing Office by 2:00 p.m. Central Time on November 5, 2018 in Popplewell Hall, Room 221, 4525 Downs Drive, St. Joseph, MO 64507. Electronic or faxed bids will not be accepted.** All questions should be directed to Purchasing Manager, Kelly Sloan, (816) 271-4465, [purchase@missouriwestern.edu](mailto:purchase@missouriwestern.edu)

Missouri Western reserves the right to accept or reject any or all items of this bid.

Include with your bid:

* Current signed W-9
* Pricing sheet on page 2
* Include any addendum(s) with your initials
* Completed page 4
* Completed MOU signature pages (the last three pages of E-Verify)

Bid Amount $

Date:

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

Authorized Vendor Signature:

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

**PREVAILING WAGE PROJECT INFORMATION**

TO: ALL BIDDERS

FROM: MISSOURI WESTERN STATE UNIVERSITY

DATE: January 2014

RE: ADDITIONAL BID SUBMISSION REQUIREMENTS

Please review Missouri statute, 285.530 RSMo, regarding employment of unauthorized aliens. Pursuant to RSMo 285.530 (1), No business entity or employer shall knowingly employ, hire for employment, or continue to employ an unauthorized alien to perform work within the State of Missouri, and (2), the bidder must affirm its enrollment and participation in a federal work authorization program with respect to the employees proposed to work in connection with the services requested herein by:

Submitting a completed, notarized copy of AFFIDAVIT OF WORK AUTHORIZATION (attached) and,

Providing documentation affirming the bidder’s enrollment and participation in a federal work authorization program (see below) with respect to the employees proposed to work in connection with the services requested herein.

A copy of RSMo 285.530 can be viewed in its entirety at:

<http://www.moga.mo.gov/statutes/C200-299/2850000530.HTM>

E-Verify is an example of a federal work authorization program. Acceptable enrollment and participation documentation consists of completed copy of the E-Verify Memorandum of Understanding (MOU). For vendors that are not already enrolled and participating in a federal work authorization program, E-Verify is available at:

<http://www.dhs.gov/files/programs/gc_1185221678150.shtm>

*The successful bidder will be required to submit a notarized Affidavit of Work Authorization and the completed MOU signature pages (the last three pages) with their bid. A bid that does not include these items may be deemed non-responsive.*

**WORK AUTHORIZATION AFFIDAVIT**

**PURSUANT TO R.S.Mo. §285.530**

**(For all bids in excess of $5,000.00)**

**Effective 1/1/09**

State of Missouri )

)ss

County of Buchanan )

Comes now \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of Business Entity Authorized Representative) as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Position/Title) first being duly sworn on my oath, affirm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Business Entity Name)does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

***In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)***

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|  |  |  |
| Authorized Representative’s Signature |  | Printed Name |
|  |  |  |
|  |  |  |
| Title |  | Date |
| E-Mail Address |  | E-Verify Company ID Number |

Subscribed and sworn to before me this \_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am

(DAY) (MONTH, YEAR)

commissioned as a notary public within the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of

(NAME OF COUNTY)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and my commission expires on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(NAME OF STATE) (DATE)

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature of Notary |  | Date |