

**BID2016-32 CHLORINE EQUIPMENT PREVENTIVE MAINTENANCE FOR THE DEPARTMENT OF PUBLIC WORKS, WATER
UTILITY
OPENING DATE: APRIL 14, 2016 AT 11:00AM**

2016-32 CHLORINE EQUIPMENT PREVENTIVE MAINTENANCE FOR THE DEPARTMENT OF PUBLIC WORKS	
NUMBER OF RESPONDENTS:	1
NAME OF BIDDER	ALLIED CONTROL SERVICES, INC
ADDRESS	611 GARFIELD AVE, P.O. BOX 234
CITY, STATE, ZIP	WEST POINT, PA 19486
CONTACT NAME	PAUL C. MAMZIC
TELEPHONE	215-699-2855
FAX	215-699-9030
E-MAIL	JDAPPE@ALLIEDCONTROL.COM
STOCKHOLDER DISCLOSURE STATEMENT	INCLUDED
REQUIRED EVIDENCE EEO/AFFIRMATIVE ACTION REGULATIONS QUESTIONNAIRE	INCLUDED
ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA	INCLUDED
NJ BUSINESS REGISTRATION CERTIFICATE	INCLUDED
NON-COLLUSION AFFIDAVIT	INCLUDED
AMERICANS WITH DISABILITIES ACT OF 1990 LANGUAGE	INCLUDED
DISCLOSURE OF INVESTED ACTIVITIES IN IRAN	INCLUDED
ETHIC COMPLAINT DISCLOSURE	INCLUDED
EIC	CERT #18539 EXP. 3/15/2023
ETHICS COMPLAINT DISCLOSURE	INCLUDED
REFERENCES	INCLUDED
60-DAY EXTENSION COMPLIANCE	YES
CERTIFICATE OF INSURANCE	INCLUDED
COMPLIANCE WITH EMERGENCY SERVICES	YES
TOTAL AMOUNT	\$52,160.00-SEE ATTACHED BREAKDOWN OF PRICING
FATAL FLAW	NONE
EXCEPTIONS (IF ANY)	NONE

PROPOSAL

I (we) hereby certify that I (we) have read the contract together with the specifications attached hereto, and have also examined the site(s) of the work, and fully understand the meaning of them, and if awarded the contract hereby agree that I (we) shall comply with all of the terms, covenants, and agreements set forth herein.

I (we), agree to receive as full compensation for furnishing the services called for under these specifications, complete and finished in every detail, and in full accordance with the specifications which are hereby made part and parcel of the proposal the following sums:

ITEM	UNIT PRICE	QUANTITY	TOTAL PRICE
Quarterly Inspection & Maintenance	\$ 3,800.00	4 Quarters	\$ 15,200.00
Semi-annual Inspection & Maintenance	\$ 5,700.00	2 per Year (1 every 6 mo.)	\$ 11,400.00
Annual Inspection & Maintenance	\$ 18,200.00	1	\$ 18,200.00
Emergency Service	\$ 115.00	64 hours	\$ 7,360.00
Fixed Parts Allowance			\$ 7,000.00
GRAND TOTAL	\$		\$ 52,160.00

Respectfully Submitted:

Signature: _____

Company: _____

Person to contact: _____

Telephone number: _____

Prices shall be firm for the length of the contract.

Attached are the following:

- Contractor Affidavit regarding personnel
- OSHA Log
- Documentation of experience
- Documentation of training program compliance