



INSTRUCTIONS TO BIDDERS

July 3, 2008

ITB-COT 08-24

Sealed proposals for the purchase of **COMMERCIAL TREADMILLS LESS TRADE-INS** will be received by the City of Troy at the office of the City Clerk, 500 W. Big Beaver Road, Troy, MI 48084 until **WEDNESDAY, JULY 16, 2008 at 10:00 AM, ET** after which time they will be publicly opened and read in the Troy City Offices. **Bid responses are not accepted via fax transmission.**

MARK ENVELOPES: **ITB-COT 08-24 TREADMILLS** ON THE LOWER LEFT-HAND CORNER.

The proposals will be for Commercial Treadmills. Specifications are listed in the bid proposal form on file in the office of the City Clerk.

All bids shall specify terms and show delivery dates. The City reserves the right to reject any or all bids, to waive any informality in the proposal received, and to accept any proposal or part thereof, which it shall deem to be most favorable to the interests of the City.

1. Any and all bids submitted must be on the City of Troy bid proposal forms. If more than one bid is submitted, a separate bid proposal form must be used for each. Forms are enclosed or obtainable at the City of Troy Purchasing Department or on the MITN (Michigan Intergovernmental Trade Network) website at www.mitn.info.
2. Municipalities are exempt from Michigan State Sales and Federal Excise taxes. Do not include such taxes in the proposal figure. The City will furnish the successful bidder with tax exemption certificates when requested.
3. All items are to be F.O.B. delivered freight paid, to the Troy Community Center, 3179 Livernois Rd., Troy, MI 48083, ATTN: John Hug.
4. If further information regarding this bid is required, please contact the Purchasing Department at (248) 680-7291.
5. VENDOR CHANGES OR ALTERATIONS TO BID DOCUMENTS INCLUDING SPECIFICATIONS MAY RESULT IN A BID BEING CONSIDERED NON-RESPONSIVE. The only authorized vendor changes to a bid document will be in the areas provided for a bidder's response, including the "Exceptions" section of the bid proposal. If a change or alteration to the documents is undetected and the bidder is awarded a contract, the original terms, conditions, and specifications in the Authorized Version of the bid document will be applicable during the term of the contract. The City of Troy shall accept **NO CHANGES** to the bid document made by the Vendor unless those changes are set out in the "Exceptions" provision of the Authorized Version of the bid document. It is the Vendor's responsibility to acquire knowledge of any changes, modifications or additions to the Authorized Version of the bid document. Any Vendor who submits a bid and later claims it had no knowledge of any changes, modifications or additions made by the City of Troy to the Authorized Version of the bid document, shall be bound by the bid, including any changes, modifications or additions to the Authorized Version. If a bid is awarded to a Vendor who claims that it had no knowledge of any changes, modifications or additions made by the City of Troy to the Authorized Version of the bid, and that Vendor fails to accept the bid award, the City of Troy may pursue costs and expenses to re-bid the item from that Vendor. The Authorized Version of the bid document shall

5. Continued
be that bid document appearing on the MITN System with any amendments and updates.
6. The City of Troy officially distributes bid documents from the Purchasing Department or through the Michigan Intergovernmental Trade Network (MITN). Copies of bid documents obtained from any other source are not considered official copies. Only those vendors who obtain bid documents from either the Purchasing Department or the MITN system are guaranteed access to receive addendum information, if such information is issued. If you obtained this document from a source other than the sources indicated, it is recommended that you register on the MITN website, www.mitn.info, and obtain an official copy.
7. A successful bidder furnishing labor on City/public premises does agree to have his workers covered by Worker's Compensation, and furnish a certificate of insurance showing coverage for bodily injury and property damage and worker's compensation to Mr. Stephen Cooperrider, Risk Manager within 5 days of a verbal request. The "Company Representative" does warrant that by signing the proposal document, the "additional insured endorsement" will be included in the Insurance Coverage supplied to the City as part of the specified requirements.
8. To the fullest extent permitted by law, the successful bidder agrees to defend, pay on behalf of, indemnify, and hold harmless the City of Troy, its elected and appointed officials, employees and volunteers and others working on behalf of the City of Troy against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed or recovered against or from the City of Troy, its elected and appointed officials, employees, volunteers or others working on behalf of the City of Troy, by reason of personal injury, including bodily injury or death and/ or property damage, including loss of use thereof, which arises out of or is in any way connected or associated with this contract.
9. To the extent permitted by law, the City of Troy and the successful bidder waive all rights against each other and any of their subcontractors, sub-subcontractors, agents and employees, and the architect, architect's consultants, separate contractors, if any, and any of their subcontracts, subcontractors, sub-subcontractors, agents and employees, for damages caused by fire or other perils to the extent covered by property insurance obtained pursuant to this agreement or other property insurance applicable to the work. The policies shall provide such waivers of subrogation by endorsement or otherwise. A waiver of subrogation shall be effective as to a person or entity even though that person or entity would otherwise have a duty of indemnification, contractual or otherwise, did not pay the insurance premium directly or indirectly, and whether or not the person or entity had an insurable interest in the property damaged for this contract.

SPECIAL INSTRUCTIONS

- All bidders are held to bid prices for 60 days or bid award, whichever comes first, except the successful bidder(s) whose prices shall remain firm through equipment delivery, trade-in pick-up, and final acceptance as operational in accordance with specifications.
- Final bid results will be posted on the MITN website after award. Please register to see results - www.mitn.info.
- If your bid is not to be broken up by item i.e. 1) treadmills and 2) trade-ins and based on an all or none award, please indicate this on your bid proposal under the "Exceptions" section, page 5 of 5.



**CITY OF TROY
 BID PROPOSAL**

ITB-COT 08-24
 Page 1 of 5

The undersigned proposes to furnish **THIRTEEN (13) COMMERCIAL TREADMILLS FOR THE TROY COMMUNITY CENTER, LESS TRADE-INS**, in accordance with the specifications, which are to be considered an integral part of this proposal, at the following prices:

COMPANY NAME: _____

PROPOSAL: FURNISH THIRTEEN (13) COMMERCIAL TREADMILLS FOR THE TROY COMMUNITY CENTER

The undersigned, as bidder, declares that he/she has examined the specifications, including related documents. Being familiar with the conditions in the City of Troy and the type of work required, the bidder hereby proposes to furnish all labor, materials, equipment and supplies, to provide the services specified in the bid proposal documents, at the prices stated below. These prices are to cover all expenses incurred in performing the work required:

DESCRIPTION	Unit Cost (Each)	Total Cost
Furnish and Install Commercial Grade Treadmills in the Troy Community Center Fitness Room in accordance with the attached specifications: Thirteen (13) Treadmills, Matrix T5x or approved alternate Quoting On: _____ Manufactured by: _____ Model Number: _____ Authorized Dealer (Y/N) _____ Number of Years _____ LESS: TRADE-INS Thirteen (13) Precor C956i Treadmills purchased in August 2005. Thirteen (13) Precor C956i Treadmills NET TOTAL:	\$ _____ / ea (\$ _____) \$ _____	\$ _____ (\$ _____) \$ _____

UNIT PRICES:

Unit prices prevail. The City of Troy Purchasing Department will correct all mathematical errors.

APPROVED ALTERNATES:

Fitness/Gym Coordinator John Hug or his designated representative will review items submitted for consideration as an approved alternate. The decision made as to acceptability will be deemed in the City of Troy's best interest and will be final. **When bidding an alternate - submit the product information sheet with your bid proposal and clearly mark the item number on the sheet. Unless otherwise noted, it will be assumed that each price will be for products specifically described.**

DESCRIPTIVE LITERATURE:

Please attach descriptive or pertinent literature relevant to your company's bid proposal at the time of bid submission. It is attached and marked _____ for identification.

ADDITIONAL INFORMATION:

For questions about the specifications, please contact Mr. **John Hug**, Fitness/Gym Coordinator, (248) 680-7236 between the hours of 8:00 AM and 4:30 PM, Monday through Friday.

DELIVERY:

All items are to be F.O.B. delivered, freight paid, to the Troy Community Center, 3179 Livernois Rd, Troy, MI 48083, ATTN: John Hug.

DELIVERY SCHEDULE:

All equipment must be delivered to the Troy Community Center by the **week of August 25, 2008**. It will be the successful bidder's responsibility to work with the department representative to establish an acceptable delivery / installation schedule. Installation shall be within 2 business days after receipt of the equipment at the City's location. The equipment should not be delivered to the City's site unless the equipment is to be installed and made ready for use within the above parameters. The City of Troy is the only party to this contract that may authorize amendment to this schedule.

- () Our Company can meet this delivery schedule
 - () Our company cannot meet this delivery schedule but offers:
-

DOWN-PAYMENTS OR PREPAYMENTS:

Any bid proposal submitted which requires a down-payment or prepayment prior to delivery and full acceptance of the item(s) as being in conformance with specifications will not be considered for award.

AWARD:

The evaluation and award of this bid shall be a combination of factors, including but not limited to: cost, professional competence, references, warranties, and the correlation of the proposal submitted to the needs of the City of Troy.

The City of Troy reserves the right to award this bid to the lowest responsible bidder meeting specifications for the treadmills and to the highest responsible bidder for the trade-ins or to combine the items in whatever manner is deemed to be in the City of Troy's best interest; to reject low bids which have major deviations from the specifications; to accept a higher bid which has only minor deviations.

PURCHASE ORDER:

After approval of the successful bidder by the Troy City Council, the purchase order issued from the City of Troy will create a bilateral contract between the parties and commit the successful bidder to perform the contract in accordance with specifications. The Purchase order will be released upon the City's acceptance of the specified insurance. A contract document/ agreement will not be issued.

SERVICE FACILITY:

Location: _____

Number of miles from City of Troy: _____

Response Time for Service Calls: Within _____ hours to be onsite after initial request for service by a factory trained technician. (number)

CONTACT INFORMATION:

Name(s): _____ 24 Hr. Phone No. _____

Hours of operation: _____

COMPANY NAME: _____

WARRANTY:

Please indicate the warranty items included in the bid price for the equipment being bid. Each item must be completed with a Yes or No response.

WARRANTY DESCRIPTION	WARRANTY DURATION	INCLUDED	
		YES	NO
No Cost of Ownership Warranty Includes:			
AC Motor Controller	3 Years		
Unlimited Mileage Deck and Belt	3 Years		
All parts and labor coverage	3 Years		
Free second day parts shipping	3 Years		
Free service call and technician travel at no additional cost to the City	3 Years		
AC Motor	7 Years		

If your company can supply the warranty as described at an additional cost, please indicate this on supporting documentation marked _____ for identification.

REFERENCES:

Please submit a list of *THREE CUSTOMERS* that are currently using the make and model of the treadmills being bid. Include the name of the company, the address, phone number, contact person and email. The references are as follows:

COMPANY: _____

ADDRESS: _____

CONTACT: _____ PHONE: _____

EMAIL: _____

COMPANY: _____

ADDRESS: _____

CONTACT: _____ PHONE: _____

EMAIL: _____

COMPANY: _____

ADDRESS: _____

CONTACT: _____ PHONE: _____

EMAIL: _____

COMPANY NAME: _____

INSURANCE:

Insurance requirements shall be in accordance with the attached **SAMPLE INSURANCE CERTIFICATE**. The required Insurance Certificate must be submitted to **Mr. Stephen Cooperrider**, within 5 days of the verbal/ electronic request after the bid award. The Insurance Certificate may be faxed to the City Offices at **(248) 526-5129**, and is the only bid document accepted in this format.

- () We can meet the specified insurance requirements.
- () We cannot meet the specified insurance requirements.
- () We do not carry the specified limits but can obtain the additional insurance coverage of \$ _____ at the cost of \$ _____.

NOTE: Please note the amendments on a sample insurance certificate and attach it to your bid proposal.

- () Our proposal is reduced by \$ _____ if we lower the requirement to \$ _____.

NOTE: Please note the amendments on a sample insurance certificate and attach it to your bid proposal.

IMPORTANT: A Certificate of Insurance on an ACORD Form showing present coverage or a letter from your insurance agent or carrier that the insurance to be supplied will meet specifications **SHOULD** be attached to the proposal document at the time of submission of the bid proposal to the Office of the City Clerk.

NOTE: Failure on the part of any bidder to contact his/her insurance carrier to verify that the insurance carried by the bidder meets City of Troy specifications may result in this bid proposal being completed incorrectly.

OTHER: Sole proprietors must execute a certificate of exemption from Worker's Compensation requirements or provide proof of Worker's Compensation Insurance. All coverage shall be with insurance carriers licensed and admitted to do business in Michigan and acceptable to the City of Troy.

INSURANCE VERIFICATION:

A bidder shall complete the above portion that details additional costs that may be incurred for specified coverage without purchasing the additional coverage prior to proposal submission.

Final Insurance Certificate Submission:

After approval by Troy City Council, the City of Troy will provide verbal / electronic notification to submit within 5 days an insurance certificate in accordance with specifications. If not so received, the company will be considered in default of contract and will be debarred from doing business with the City of Troy for a minimum of three (3) years for failing to meet insurance requirements.

_____ being duly authorized to execute contracts for _____

(Print Full Name)

(Company Name)

hereby acknowledges that once accepted by the Risk Manager, the specified insurance certificate for ITB-COT 08-24 shall remain in full force and effect during the life of the contract.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: _____

COMPANY NAME: _____

SIGNATURE PAGE

PRICES:

Prices shall remain firm for 60 days or bid award, whichever comes first, except the successful bidder(s) whose prices shall remain firm through equipment delivery, trade-in pick-up, and final acceptance as operational in accordance with specifications.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: _____

NOTE:

The undersigned has checked carefully the bid figures and understands that he/she shall be responsible for any error or omission in this bid offer and is in receipt of all addendum as issued.

TAX ID#: _____

COMPANY NAME: _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____ FAX NUMBER _____

REPRESENTATIVE'S NAME _____

(Print)

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE _____

TERMS: _____ WARRANTY: **AS SPECIFIED**

E-MAIL: _____ DELIVERY DATE: **AS SPECIFIED**

EXCEPTIONS:

Any exceptions, substitutions, deviations, etc., from the City specifications and this proposal must be stated below. The reason(s) for the exceptions, substitutions, and/or deviations are an integral part of this bid proposal offer:

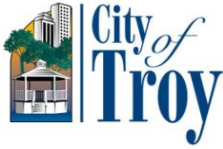
ACKNOWLEDGEMENT:

I, _____, certify that I have read the **Instructions to Bidders** (2 Pages) and that the bid proposal documents contained herein were obtained directly from the City's Purchasing Department or MITN website, www.mitn.info and is an official copy of the Authorized Version.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: _____

IMPORTANT: All City of Troy purchases require a MATERIAL SAFETY DATA SHEET, where applicable, in compliance with the MIOSHA "Right to Know" Law. Please include a copy of any relevant MSDS at the time of bid submission.

U.S. FUNDS: All prices quoted are to be in U.S. Currency.



BID SPECIFICATION COMMERCIAL TREADMILLS

GENERAL:

The Troy Community Center, located at 3179 Livernois Troy, Michigan 48083, is seeking (13) Commercial Grade Treadmills for the Fitness Room. Treadmills bid must meet all requirements as specified. An acceptable brand is the Matrix T5x Treadmill manufactured by Matrix Fitness Systems Corporation of Cottage Grove, Wisconsin, a subsidiary of Johnson Health Tech, LTD. John Hug, Fitness / Gym Coordinator, will be the contact for this project. All equipment is to be F.O.B. delivered freight paid to this location.

EQUIPMENT:

Drive System:

5 HP AC Motor

Deck System:

Hard-Wax Deck System (Hi heat tread belt wax system)

Warranty:

Three (3) year no cost of ownership warranty from date treadmills are placed in service, including the following:

- AC Motor Controller
- Unlimited Mileage Deck and Belt
- All parts and labor,
- Free second day parts shipping
- Free service calls and technician travel at no additional cost to the City

7 year warranty on the 5.0 HP AC motor

DETAILED REQUIREMENTS:

1. One vendor will be selected to provide all equipment listed including maintenance.
2. The successful bidder must provide a manufacturer approved 3-year warranty that stipulates if something breaks during "normal" use, the vendor will cover all labor and materials to ensure complete repair of the unit at no cost to the City of Troy.
3. The repair (vendor) facility must be within 100 miles of the City of Troy. The successful bidder must be able to respond to a service request by phone within 24 hours and be able to be on site for service calls within 48 hours after initial service request. Any non-stock defective parts will be replaced at no cost to the City within three (3) calendar days from date of service call.
4. The successful bidder must be an authorized dealer of the equipment that is being supplied.
5. All equipment must be new.
6. The successful bidder must install the equipment.
7. The successful bidder must train Parks and Recreation staff in the proper use and everyday maintenance of the equipment.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)

PRODUCER <p style="text-align: center;">Complete</p> <p style="text-align: center;"><u>Sample Certificate</u></p>	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURERS AFFORDING COVERAGE	
INSURED <p style="text-align: center;">Complete</p>	INSURER A: <u>XYZ Company</u> INSURER B: INSURER C: INSURER D: INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <u>Additional Insured wording - see below</u> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	0001	XX-XX-XX	XX-XX-XX	EACH OCCURRENCE \$ 500,000 FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 500,000 GENERAL AGGREGATE \$ 500,000 PRODUCTS - COMP/OP AGG. \$ 500,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	0002	XX-XX-XX	XX-XX-XX	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	0003	XX-XX-XX	XX-XX-XX	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

Additional Insured: City of Troy including Architects and Engineers, all elected and appointed Officials, all employees and volunteers, board, Commissioners and/or authorities and their board members, employees, and volunteers - additional insured on ISO Form B or broader.

CERTIFICATE HOLDER Y **ADDITIONAL INSURED; INSURER LETTER: A** CANCELLATION

City of Troy 500 W. Big Beaver Rd. Troy, MI 48084	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT.
AUTHORIZED REPRESENTATIVE	



**STATEMENT OF NO BID
CITY OF TROY**

BID NUMBER: ITB-COT 08-24
TITLE: Commercial Treadmills

Please Send or Fax To:
City of Troy Purchasing Department
500 W. Big Beaver Rd.
Troy, MI 48084

FAX NUMBER: (248) 619-7608

We, the undersigned, have declined to bid on the subject bid for the following reasons:

Check All That Apply	Reason
	Our company does not handle the type of product / service
	We cannot meet the specifications nor provide an approved alternate – please explain below
	Our company is not interested in bidding at this time
	Job is too small
	Job is too large
	Cannot be competitive
	Liability Issues such as insurance, bonding, indemnification, hold harmless
	Insufficient time to respond – please explain below
	Our company's schedule would not permit performance of the specifications
	Other – describe below

REMARKS: _____

COMPANY INFORMATION:

COMPANY NAME: _____
SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE: _____
TITLE: _____
COMPANY: _____
ADDRESS: _____
FAX NUMBER: _____ TELEPHONE NUMBER: _____

IMPORTANT NOTE: To qualify as a respondent to the bid, the vendor must submit a bid or return this completed form.

VENDOR REGISTRATION: The City of Troy uses the MITN website for vendor registration, bid and tabulation posting, award information and other processes. Final bid results will be posted on the MITN website after award. Please register to see results - - www.mitn.info.