ADDENDUM NO: ONE

TO ALL OFFERORS:

REFERENCE: IFB No: 2021-06302-02
Commodity: COVID-19 Supplies
IFB Due On: Tuesday, June 30, 2020 – Bid Date Changed Below

Please note the clarifications and/or changes made to this solicitation:

Notice: BID OPENING DATE CHANGED

1. Bid Due Date has changed from Tuesday, June 30, 2020 at 2:00pm to Wednesday, July 1, 2020 at 2:00pm. Please refer to original IFB for additional information.

2. Please see attached Questions and Answers.

3. REPLACE previously issued Attachment A: Pricing Schedule, with the attached, Revised Attachment A: Pricing Schedule. This form supersedes all other and its entirety.

4. The quantities in the IFB are estimates and are not guaranteed orders. Upon award of contract, the majority of the estimated annual quantity are anticipated to be placed for Bid Items 1, 2, 3, 4, 5, 6, 14B and 14C. Albemarle County expects to order remaining Bid Items in incremental quantities throughout the year.

5. Note the attached changes in bid receipt and bid opening procedures, effective with this solicitation.

6. For the immediate COVID 19 emergency, notary requirements are waived. However, all documents should be properly completed and signed.

7. All other terms and conditions of the solicitation remain unchanged. Sealed proposals must be received in accordance with the solicitation requirements by 2:00pm on Wednesday, July 1, 2020. Late proposals will not be considered.

8. A signed acknowledgement of this addendum must be received by this office attached to your proposal. Signature on this addendum does not constitute your signature on the original proposal document. The original proposal document must be signed also.

Sincerely,

Sharon Cash
Sharon Cash, VCO, VCCO
Buyer II
Phone: (434) 296-5854

Attachments
ADDENDUM NO: ONE:

Name of Firm

Signature/Title

Date

Printed Name
1. Questions and Answers:

Q1  When and how should substitutes be sent to Department? Should they be sent with the Bid?

A1  One sample of each item being bid shall be submitted with Attachment A: Pricing Schedule, by the Bid Due Date. Please refer to Solicitation, Page 3, Section V. B and C.

Q2  Are you making one award for all of these items, or will you be making multiple awards by product?

A2  Items 14A, 14B and 14C will be awarded as a combined total, Items 1–13 will be awarded by line item.

Q3  Are you willing to accept substitutes?

A3  Equivalent substitutes will be considered with appropriate documentation and sample. Please refer to Solicitation, Page 3, Section V. B.

Q4  What is the minimum and maximum lead time you will accept for delivery of the products?

A4  Delivery shall be made within fifteen (15) workdays of placement of order. Please refer to Solicitation, Page 3, Section V. A.

Q5  How will bids be accepted?

A5  No telephone, faxed or emailed bids will be considered. Please refer to Solicitation, Page 4, Bid Submission Instructions.

Q6  Do items need to meet specifications exactly?

A6  Product specifications are noted in Solicitation, Attachment A: Pricing Schedule. Please refer to Solicitation, Page 3, Section V. B, for information regarding documentation for substitute products.

Q7  For the sanitizer dispenser, stand, and refill, they are all different manufacturers which I would assume would not be compatible with each other. Did you verify those different products would be compatible with each other? Our goal is to put together a complete offering for all three products from the same manufacturer, but will you accept a combination of products from different manufacturers as long as they are compatible and meet your requirements?
A7  The sanitizer dispenser, stand and refill specified in the solicitation are compatible. Per the revised Attachment A, Items 14A, 14B and 14C will be awarded based on TOTAL DISPENSER SYSTEM COST.

Q8  For the 1 Gallon Pump Hand Sanitizer, are you wanting 4,000 total gallons of hand sanitizer, or 4,000 cases? I see below where it mentions 4/pk. If you could clarify your total amount of this -For the 1 Gallon Pump Hand Sanitizer, are you wanting 4,000 total gallons of hand sanitizer, or 4,000 cases? I see below where it mentions 4/pk. If you could clarify your total amount of this product needed that would be great.

A8  The quantity of cases and there are (4) 1-gallon containers per case. The quantity of cases has been updated to reflect a change in usage expectations. Refer to Attachment A for updated quantities. This item is expected to be ordered incrementally throughout the year.

Q9  How are Samples submitted - prior to the bid awarded or after the bid is awarded?

A9  Required samples shall be submitted with Attachment A: Pricing Schedule, by the Bid Due Date. Please refer to Solicitation, Page 3, Section V. B and C.

Q10 Due to the unpredictable availability of these items when does Albemarle County expect to place orders?

A10 Please refer to A7 for expectation for frequency of orders. Albemarle County expects to place orders for immediate needs as soon as vendor selection is finalized.

Q11 Do I have to bid on every category to be in the running? Can we bid on only parts 1 & 2? (reusable cloth face masks & non-surgical disposable face masks)

A11 Items 14A, 14B and 14C will be awarded as a combined total, Items 1 – 13 will be awarded by line item.

Q12 Do you have any more details on sizing? We offer both kid's and adult sizing depending on the age of students we can provide right type of mask for you to review.

A12 Refer to Revised Attachment A.

Q13 Do pages 20-23 need to be filled out and notarized?

A13 Attachments A, B, C, D, and E shall be completed and returned with the bid documents. Due to the COVID-19 emergency, notary requirements are waived for this solicitation and are not required for Attachment D.
Q14  Page # 30, Section 13 - Business License Requirement. Could you please advise that we are an out of state company, Do we need to be registered with the Albemarle County Department of Finance? Or any other Licensing is required to do business with the County.

A14  Additional information regarding business license requirements for Albemarle County, can be found at: http://www.albemarle.org/department.asp?department=finance&relpage=3273 or by calling the Finance Department at 434-296-5851, option 3.

Q15  Do we have to sign in front of a Notary the certification of No Collusion or is it only after a potential award

A15  Due to the COVID-19 emergency, notary requirements are waived for this solicitation and are not required for Attachment D.

Q16  Can you send us the previous bid tabulation for a previous bid on these items

A16  These items have not been formally bid previously. No bid tabulation is available.

Q17  Page 5, Section VII, Item D: The Contract. Refers to Attachment G, should it be Attachment H?

A17  Attachment H is the correct reference for the sample contract.

Q18  For Bid Item #9 (Dry wipes), is the quantity 350 cases or 350 cases of 8 boxes of 100? These are packaged by the 100 with 8 boxes to a case?

A18  The amount is 350 cases of 8 boxes. Each box contains 100 wipes.
<table>
<thead>
<tr>
<th>ITEM</th>
<th>Description</th>
<th>Est. Annual Qty</th>
<th>UOM</th>
<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Reusable Cloth Face Masks - Adult Size</td>
<td>16,000</td>
<td>Each</td>
<td>$_________</td>
<td>$________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Reusable cloth face mask; Sizing: approximately 15 x 21 cm

**STANDARD:** Masks must meet the following requirements: Minimum of 3 layers of material, Ear loops, Latex-free, 100% Cotton, Washable, Metal piece at nose to improve fit; Anti-fog

**PACK:** Each

**PACK IF DIFFERENT:** ___________________________

**BRAND:** _____________________________________

**MFG'S PRODUCT CODE:** __________________________

**BIDDER PRODUCT CODE:** __________________________

Delivery time __________ calendar days after receipt of order.

**SAMPLE REQUIRED** - Refer to Section V of IFB.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>Description</th>
<th>Est. Annual Qty</th>
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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Reusable Cloth Face Masks - Child Size Medium</td>
<td>1,200</td>
<td>Each</td>
<td>$_________</td>
<td>$________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Reusable cloth face mask - Child Sizing: approximately 13 x 18 cm

**STANDARD:** Masks must meet the following requirements: Minimum of 3 layers of material, Ear loops, Latex-free, 100% Cotton, Washable, Metal piece at nose to improve fit; Anti-fog

**PACK:** Each

**PACK IF DIFFERENT:** ___________________________

**BRAND:** _____________________________________

**MFG'S PRODUCT CODE:** __________________________

**BIDDER PRODUCT CODE:** __________________________

Delivery time __________ calendar days after receipt of order.

**SAMPLE REQUIRED** - Refer to Section V of IFB.

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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Reusable Cloth Face Masks - Child Size Small</td>
<td>2,400</td>
<td>Each</td>
<td>$_________</td>
<td>$________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Reusable cloth face mask - Child Sizing: Approximately 12 x 17 cm

**STANDARD:** Masks must meet the following requirements: Minimum of 3 layers of material, Ear loops, Latex-free, 100% Cotton, Washable, Metal piece at nose to improve fit; Anti-fog

**PACK:** Each

**PACK IF DIFFERENT:** ___________________________

**BRAND:** _____________________________________

**MFG'S PRODUCT CODE:** __________________________

**BIDDER PRODUCT CODE:** __________________________

Delivery time __________ calendar days after receipt of order.

**SAMPLE REQUIRED** - Refer to Section V of IFB.
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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Non-Surgical Disposable Face Masks</td>
<td>160</td>
<td>Pack</td>
<td>$ ________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Mask must have 3 layers of high-quality non-woven fabric; elastic earloop, extra-soft ear loops

**STANDARD:** HoMedics Single Use Ear-Loop Face Mask or approved equivalent

**PACK:** 50 per pack

**PACK IF DIFFERENT:** ________________________________

**BRAND:** ________________________________

**MFG’S PRODUCT CODE:** ________________________________

**BIDDER PRODUCT CODE:** ________________________________

Delivery time ____________ calendar days after receipt of order.

**SAMPLE REQUIRED** if bidding an equivalent product - Refer to Section V of IFB.

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<tr>
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<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Molded Medical Grade Face Masks</td>
<td>125</td>
<td>Pack</td>
<td>$ ________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Molded/cone medical grade face mask

**STANDARD:** Dynarex surgical face mask cone or approved equivalent

**PACK:** 50 per pack

**PACK IF DIFFERENT:** ________________________________

**BRAND:** ________________________________

**MFG’S PRODUCT CODE:** ________________________________

**BIDDER PRODUCT CODE:** ________________________________

Delivery time ____________ calendar days after receipt of order.

**SAMPLE REQUIRED** if bidding an equivalent product - Refer to Section V of IFB.

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<th>ITEM</th>
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</thead>
<tbody>
<tr>
<td>6</td>
<td>Reusable Face Shields</td>
<td>6</td>
<td>Pack</td>
<td>$ ________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Reusable Face Shields; lightweight, medical grade, anti-fog shield, hypo-allergenic comfort forehead band; 8" H x 8.75" W

**STANDARD:** Virginia Industries for the Blind Reusable Face Shield or approved equivalent

**PACK:** 50 per pack

**PACK IF DIFFERENT:** ________________________________

**BRAND:** ________________________________

**MFG’S PRODUCT CODE:** ________________________________

**BIDDER PRODUCT CODE:** ________________________________

Delivery time ____________ calendar days after receipt of order.

**SAMPLE REQUIRED** if bidding an equivalent product - Refer to Section V of IFB.
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</thead>
<tbody>
<tr>
<td>7</td>
<td>Hand Sanitizer (1-gallon container with pump)</td>
<td>2,000</td>
<td>Case</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td></td>
<td>DESCRIPTION: Gel Hand Sanitizer; Greater than 60% ethyl alcohol; 1 oz. per pump</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>STANDARD: Purell Advanced Hand Sanitizer Gel, Germ-X Original Hand Sanitizer, Island Escape Alcohol Gel Hand Sanitizer, or approved equivalent</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>PACK: (4) 1-gallon containers/case</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>PACK IF DIFFERENT:</td>
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<td></td>
<td>BRAND:</td>
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<td></td>
<td>MFG'S PRODUCT CODE:</td>
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<td>BIDDER PRODUCT CODE:</td>
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<td>Delivery time __________ calendar days after receipt of order.</td>
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<td>SAMPLE REQUIRED if bidding an equivalent product - Refer to Section V of IFB.</td>
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<tr>
<td>8</td>
<td>Hand Sanitizer (55-gallon drum)</td>
<td>10</td>
<td>Drum</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td></td>
<td>DESCRIPTION: Gel Hand Sanitizer; Greater than 60% ethyl alcohol</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>STANDARD: Purell Advanced Hand Sanitizer Gel, Germ-X Original Hand Sanitizer, Island Escape Alcohol Gel Hand Sanitizer, or approved equivalent</td>
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<tr>
<td></td>
<td>PACK: 55-gallon Drum with Pump</td>
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<td></td>
<td>PACK IF DIFFERENT:</td>
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<td>BRAND:</td>
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<tr>
<td>9</td>
<td>Disinfectant Wipes (75-Count Canister)</td>
<td>670</td>
<td>Case</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td></td>
<td>DESCRIPTION: Disinfecting wipes for surfaces</td>
<td></td>
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<tr>
<td></td>
<td>STANDARD: Clorox Disinfecting Wipes, or approved equivalent</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>PACK: 6 canisters/case</td>
<td></td>
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<tr>
<td></td>
<td>PACK IF DIFFERENT:</td>
<td></td>
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<td></td>
<td>BRAND:</td>
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<tr>
<td>ITEM</td>
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<td>Est. Annual Qty</td>
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<td>Extension</td>
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<td>-----------</td>
</tr>
<tr>
<td>10</td>
<td>Dry Wipes (100/Box)</td>
<td>350</td>
<td>Case</td>
<td>$________</td>
<td>$______________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Disposable task wipes

**STANDARD:** Task Wipe WypAll® L30 Light Duty White NonSterile Double Re-Creped 9-4/5 X 16-2/5 Inch Disposable or approved equivalent

**PACK:** 100/Box; 8/Case

**PACK IF DIFFERENT:**

**BRAND:**

**MFG'S PRODUCT CODE:**

**BIDDER PRODUCT CODE:**

Delivery time______________ calendar days after receipt of order.

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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Disposable Gloves (100-glove box)</td>
<td>250</td>
<td>Case</td>
<td>$________</td>
<td>$______________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Nitrile ambidextrous gloves, 3.5 mL thickness, powder-free, latex-free; 100 cases Large, 100 cases XL, 25 cases Medium, 25 cases XXL

**STANDARD:** XTreme Nitrile Industrial Gloves or approved equivalent

**PACK:** 10 boxes/case

**PACK IF DIFFERENT:**

**BRAND:**

**MFG'S PRODUCT CODE:**

**BIDDER PRODUCT CODE:**

Delivery time______________ calendar days after receipt of order.

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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Disposable Wiping System</td>
<td>85</td>
<td>Case</td>
<td>$________</td>
<td>$______________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Disposable wiping system with reusable bucket. User adds cleaner or disinfectant to bucket to create wet wipes.

**STANDARD:** Diversey SealedAir EasyWipe Disposable Wiping System or approved equivalent

**PACK:** 6 buckets/case; 120 wipes/bucket

**PACK IF DIFFERENT:**

**BRAND:**

**MFG'S PRODUCT CODE:**

**BIDDER PRODUCT CODE:**

Delivery time______________ calendar days after receipt of order.

**SAMPLE REQUIRED** if bidding an equivalent product - Refer to Section V of IFB.
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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>Disposable Wiping System Refills</td>
<td>300</td>
<td>Case</td>
<td>$________</td>
<td>$________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Refills for disposable wiping system. User adds cleaner or disinfectant to bucket to create wet wipes.

**STANDARD:** Diversey SealedAir EasyWipe Disposable Wiping System or approved equivalent

**PACK:** 6 refills/case; 120 wipes/bucket

**PACK IF DIFFERENT:**

**BRAND:**

**MFG'S PRODUCT CODE:**

**BIDDER PRODUCT CODE:**

Delivery time __________ calendar days after receipt of order.

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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>14A</td>
<td>Hand Sanitizer (1000 mL Dispenser Bag)</td>
<td>500</td>
<td>Case</td>
<td>$__________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Hand sanitizer gel (greater than 60% ethyl alcohol) for touch-free dispenser stand (must be compatible with Item 6)

**STANDARD:** Dermasept Gel Hand Sanitizer 11050GEL or approved equivalent

**PACK:** 4 (1,000 mL bags)/case

**PACK IF DIFFERENT:** ______________________________________________________

**BRAND:** _________________________________________________________________

**MFG’S PRODUCT CODE:** ___________________________________________________

**BIDDER PRODUCT CODE:** _________________________________________________

Delivery time__________ calendar days after receipt of order.

**SAMPLE REQUIRED** if bidding an equivalent product - Refer to Section V of IFB.

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<thead>
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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>14B</td>
<td>Hand Sanitizer Touch-Free Dispensers</td>
<td>60</td>
<td>Each</td>
<td>$__________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** 1 L Automatic Dispenser

**STANDARD:** eViva Touchless Dispenser 70410 Touchless or approved equivalent

**PACK:** Each

**PACK IF DIFFERENT:** ______________________________________________________

**BRAND:** _________________________________________________________________

**MFG’S PRODUCT CODE:** ___________________________________________________

**BIDDER PRODUCT CODE:** _________________________________________________

Delivery time__________ calendar days after receipt of order.

**SAMPLE REQUIRED** if bidding an equivalent product - Refer to Section V of IFB.

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<tr>
<th>ITEM</th>
<th>Description</th>
<th>Est. Annual Qty</th>
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<th>Unit Price</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>14C</td>
<td>Hand Sanitizer Dispenser Stands</td>
<td>60</td>
<td>Each</td>
<td>$__________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**DESCRIPTION:** Touchfree Dispenser Stand Silver

**STANDARD:** SC Johnson Professional Touch-Free Dispenser Stand for Hand Sanitizer -TFDISPST or approved equivalent

**PACK:** Each

**PACK IF DIFFERENT:** ______________________________________________________

**BRAND:** _________________________________________________________________

**MFG’S PRODUCT CODE:** ___________________________________________________

**BIDDER PRODUCT CODE:** _________________________________________________

Delivery time__________ calendar days after receipt of order.

**SAMPLE REQUIRED** if bidding an equivalent product - Refer to Section V of IFB.

**TOTAL DISPENSER SYSTEM COST (ADD Extended Costs for Items 14A + 14B + 14C)** $__________
Bid Receipt and Bid Opening Procedures
June 25, 2020
IFB#: 2021-06302-02 - COVID-19 Supplies

In light of the State of Emergency declared by the Commonwealth and the County of Albemarle, and in accordance with the Governor’s Executive Order Number Fifty-One, the following modifications to Albemarle County Purchasing Procedures shall be in effect for the duration of the emergency conditions:

1. Paper bids and proposals shall be prepared as usual and shall be delivered to the County Office Building at 401 McIntire Road, Charlottesville, VA 22902. Bids and proposals will be received in a secure manner and will be stored in such manner as to keep them in a secure status.

2. A secure lock box will be available, at the exterior of the County Office Building, at the front Visitors Entrance, and will be labeled Vendor/Contractor Bids or Proposals Only. Bids shall be placed in this box, prior to the established due date and time for each solicitation.

3. Bids will be received in the lockbox until **2:00pm on Wednesday, July 1, 2020.** Any further bids received will be ruled as late bids and will be retained un-opened. Late bids will not be considered. If you have any difficulty utilizing the lockbox please call the Purchasing Office, at 434-296-5854.

4. Bid openings will be held within two (2) working days after the bid receipt deadline. At the appointed time as noted below, the bids will be virtually opened and read aloud by Purchasing personnel. Public attendance at the Bid Opening will be by virtual attendance through Go-To Meeting.

5. The bids shall be examined for conformance of all requirements of the solicitation including a signature, acknowledgement of addenda, and presence of a bid bond, when required. At the conclusion of the reading of the bids, Purchasing staff will complete the due diligence to examine bids for determination of complete responsiveness and vendor responsibility and additional information, including the bid tabulation, will be provided as it becomes available.

6. On Thursday, July 2, 2020 at 2:00pm, the Virtual Bid Opening may be attended through the following Go-to Meeting link:

   IFB: 2021-06302-02 COVID-19 Supplies
   Thu, Jul 2, 2020 2:00 PM - 4:00 PM (EDT)
   Please join my meeting from your computer, tablet or smartphone. (Chrome Browser preferred)
   https://global.gotomeeting.com/join/570995125

   You can also dial in using your phone.
   (For supported devices, tap a one-touch number below to join instantly.)
   United States: +1 (786) 535-3211
   - One-touch: tel:+17865353211,,570995125#
   Access Code: 570-995-125, if needed