

STATE OF CONNECTICUT
DEPARTMENT OF ADMINISTRATIVE SERVICES
PROCUREMENT DIVISION

BID NO. 12PSX0189

Patrick DeConti
 Contract Specialist
(860)713-5061
 Telephone Number

165 Capitol Avenue, 5th Floor South
HARTFORD, CT 06106-1659

Read & Complete
Carefully

BID NO: 12PSX0189	BID DUE DATE: 10 September 2012	BID DUE TIME: 2:00 PM Eastern Time	BID SURETY: \$0.00	DATE ISSUED: 17 August 2012
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DESCRIPTION: **A Learjet Model 25D**

FOR: State Department of Education 165 Capitol Avenue Hartford, Connecticut 06106	TERM OF CONTRACT: Date of Award through September 30, 2013
	AGENCY REQUISITION NUMBER(S): 14133

INVITATION FOR BIDS: Pursuant to the provisions of Section 4a-57 of the Connecticut General Statutes as amended, Procurement Services is soliciting bids for the State of Connecticut for the furnishing of the subject commodities and/or services to state agencies.

IMPORTANT: ALL pages of this form, Sections 1 through 5 must be completed, signed and returned by the bidder as part of the bid package. Failure to submit all pages of this form may constitute grounds for rejection of your bid.

Section 1 of 5 - **BIDDER INFORMATION**

COMPLETE BIDDER LEGAL BUSINESS NAME: PRINCIPAL PLACE OF BUSINESS:	Taxpayer ID # (TIN): <input type="checkbox"/> SSN <input type="checkbox"/> FEIN <small>WRITE/TYPE SSN/FEIN NUMBER ABOVE</small>
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BUSINESS NAME , TRADE NAME, DOING BUSINESS AS (IF DIFFERENT FROM ABOVE): PRINCIPAL PLACE OF BUSINESS (IF DIFFERENT FROM ABOVE):
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BUSINESS ENTITY: <input type="checkbox"/> LLC <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> INDIVIDUAL/SOLE PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP (ATTACH NAMES AND TITLES OF ALL PARTNERS) <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> CORPORATION TYPE OF CORPORATION: - STATE ORGANIZED IN:
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NOTE: IF INDIVIDUAL/SOLE PROPRIETOR, INDIVIDUAL'S NAME (AS OWNER) MUST APPEAR IN THE LEGAL BUSINESS NAME BLOCK ABOVE.

BUSINESS TYPE: A. SALE OF COMMODITIES B. MEDICAL SERVICES C. ATTORNEY FEES D. RENTAL OF PROPERTY (REAL ESTATE & EQUIPMENT) E. OTHER (DESCRIBE IN DETAIL)

UNDER THIS TIN, WHAT IS THE PRIMARY TYPE OF BUSINESS YOU PROVIDE TO THE STATE? (ENTER LETTER FROM ABOVE)	
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UNDER THIS TIN, WHAT OTHER TYPES OF BUSINESS MIGHT YOU PROVIDE TO THE STATE? (ENTER LETTER FROM ABOVE)	
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AFFIRMATION OF BIDDER: The above named bidder fully acknowledges and agrees with all of the terms and conditions contained in this Bid Form SP-26, the accompanying invitation to bid, Form SP-19, entitled Standard Bid Terms and Conditions and Contract #12PSX0189. Further, if the above named bidder is awarded a contract for the goods and/or services called for in the invitation to bid, the bidder's signature on this Bid Form SP-26 shall mean that the bidder shall be bound by and perform fully in accordance with all of the terms and conditions set forth in the invitation to bid, Form SP-19 and Contract #12PSX0189 as if the bidder had actually executed Form SP-19 and Contract #12PSX0189 itself.
 The bidder hereby certifies under penalty of false statement that all the information supplied is complete and true.

WRITTEN SIGNATURE OF PERSON AUTHORIZED TO SIGN BIDS ON BEHALF OF THE ABOVE NAMED BIDDER: <div align="center" style="border: 1px solid black; padding: 2px;">← SIGN HERE</div>	DATE EXECUTED:
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TYPE OR PRINT NAME OF AUTHORIZED PERSON:	TITLE OF AUTHORIZED PERSON:
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Bidder Name:	
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Section 1 of 5 - **BIDDER INFORMATION** (CONTINUED)

BIDDER ADDRESS	STREET	CITY	STATE	ZIP CODE
Add Additional Business Address information on back of this form, if needed.				
BIDDER E-MAIL ADDRESS			BIDDER WEB SITE	
REMITTANCE INFORMATION: INDICATE BELOW THE REMITTANCE ADDRESS OF YOUR BUSINESS. <input type="checkbox"/> SAME AS BIDDER ADDRESS ABOVE.				
REMIT ADDRESS	STREET	CITY	STATE	ZIP CODE

Notice: Provision pursuant to Section #35. Notice, for all communications as required by Section #35 of Contract 12PSX0189, provide the Bidder Contact Information below.

BIDDER CONTACT INFORMATION: NAME (TYPE OR PRINT)				
BIDDER ADDRESS	STREET	CITY	STATE	ZIP CODE
Add Additional Bidder Contact & Address information on back of this form, if needed.				
1 ST BUSINESS PHONE:	Ext. #	HOME PHONE:		
2 ND BUSINESS PHONE:	Ext. #	1 ST PAGER:		
CELLULAR:	2 ND PAGER:			
1 ST FAX NUMBER:	TOLL FREE PHONE:			
2 ND FAX NUMBER:	TELEX:			
IS YOUR BUSINESS CURRENTLY A DAS CERTIFIED SMALL BUSINESS ENTERPRISE? <input type="checkbox"/> YES (ATTACH CERTIFICATE COPY TO BID) <input type="checkbox"/> NO				
IS YOUR BUSINESS A MICROBUSINESS? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YOU ARE A STATE EMPLOYEE, INDICATE YOUR POSITION, AGENCY & AGENCY ADDRESS.				
PURCHASE ORDER DISTRIBUTION: (E-MAIL ADDRESS)				
NOTE: THE E-MAIL ADDRESS INDICATED IMMEDIATELY ABOVE WILL BE USED TO FORWARD PURCHASE ORDERS TO YOUR BUSINESS.				

ADD FURTHER BUSINESS ADDRESS, E-MAIL & CONTACT INFORMATION ON SEPARATE SHEET IF REQUIRED

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Bidder Name:	
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Section 2 of 5 - RESIDENT BIDDERS

In accordance with C.G.S. § 4e-48, "resident bidder" means a business that submits a bid in response to an invitation to bid by a state contracting agency has paid unemployment taxes or income taxes in Connecticut during the twelve calendar months immediately preceding submission of this bid, has a business address in the state and has affirmatively claimed such status in the bid submission.

The above signed bidder affirmatively claims that the bidder has paid unemployment taxes or income taxes in Connecticut during the twelve calendar months immediately preceding this bid submission.

YES NO

The above signed bidder affirmatively claims that the bidder has a business address in the State of Connecticut.

YES NO

If Yes, List Connecticut Business Address:

The above signed bidder affirmatively claims the status of a resident bidder.

YES NO

Section 3 of 5 - BIDDER DEBARMENT AND/OR SUSPENSION

Is the bidder, any company official, or any subcontractor to the bidder, currently debarred, disqualified or suspended from bidding or contracting with the State of Connecticut, the Federal Government or any other governmental entity?

YES NO

Does the bidder, any company official, or any subcontractor to the bidder, have a debarment, disqualification or suspension proceeding pending with the State of Connecticut, the Federal Government or any other governmental entity?

YES NO

If the above signed bidder, any company official or any subcontractor to the bidder *has* received notices of debarment and/or suspension from contracting with the State of Connecticut, the Federal Government or any governmental entity, said notices must be attached to this document when submitting this bid.

Number of notices attached _____

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Section 4 of 5 – DISCLOSURE STATEMENT OF CRIMINAL CONVICTIONS AND/OR DISCIPLINARY ACTION

List any criminal convictions, guilty pleas or nolo contendere against your company and any of your company's officers, principal shareholders, directors, partners, LLC members and LLC managers.

(Attach additional sheets if necessary)

List any administrative actions either pending review by the state or determinations that the state has made regarding your company or any of your company's officers, principal shareholders, directors, partners, LLC members or LLC managers. This would include court judgements, actions, suits, claims, demands, investigations and legal, administrative or arbitration proceedings pending in any forum. Include a listing of OSHA violations and any actions or orders pending or resolved with any state agency such as the department of consumer protection, the department of environmental protection, etc. Detail this information on a separate sheet of paper. Such information should be for the last three (3) years.

(Attach additional sheets if necessary)

Section 5 of 5 – OSHA COMPLIANCE

In accordance with C.G.S. § 31-57b, the bidder certifies that all of the statements herein contained below have been examined and are true and correct to the best of their knowledge and belief.

The bidder **HAS** **HAS NOT** been cited for three (3) or more willful or serious violations of any Occupational Safety and Health (OSHA) Act or of any standard, order or regulation promulgated pursuant to such act, during the three year period preceding the solicitation, provided such violations were cited in accordance with the provisions of any State Occupational Safety and Health Act of 1970, and not abated within the time fixed by the citation and such citation has not been set aside following appeal to the appropriate agency of court having jurisdiction or

HAS **HAS NOT** received one or more criminal convictions related to the injury or death of any employee in the three-year period preceding the solicitation.

The list of violations (if applicable) is attached.