

STATE OF NEW YORK DEPARTMENT OF TAXATION AND FINANCE OFFICE OF BUDGET AND MANAGEMENT ANALYSIS

Catherine Golden, Director Procurement Services

Patrick Ryan, Director Budget & Accounting Services

October 23, 2013

REQUEST FOR QUOTE #13-22

Dear Sir or Madam,

Re: Recurring Monthly Meeting Facility in Nassau County.

The New York State Department of Taxation and Finance is seeking a facility in Nassau County to host a recurring, monthly meeting for a maximum of 100 participants. The initial term of the agreement will be from November 2013 to March 2014, with an opportunity to extend based on New York State need and facility availability.

I. Requirements:

Date(s)	Reoccurring once monthly. Preferably on a consistent schedule (e.g., 1 st Monday, 2 nd Thursday, or 10 th of every month) ¹
Time	Preferably on a consistent monthly schedule of 2 hours between 9:00am and 3:00pm (½-hour increments are acceptable). New York State preference is 10:00am-12:00pm. ²
Number of Attendees	Maximum of 100
Parking	Maximum of 75 (must be factored into the monthly room charge)
Attendee Access	Within ¼ mile of public transportation
Equipment	Audio (i.e., microphone and amplification) and Internet access (WiFi or hard wired)
Room Layout	Table and chairs set up classroom style.

¹ This requirement is negotiable to an extent. For ease of travel and scheduling, we would prefer a consistent monthly schedule (e.g., the 1st Tuesday of every month) however, DTF recognizes it may not be possible for all available bidders to guarantee such a schedule and is willing to consider variations within reason.

² This requirement is negotiable to an extent. For ease of travel and scheduling, we would prefer a consistent monthly schedule of time (e.g., 10:00am-12:00pm) however, DTF recognizes it may not be possible for all available bidders to guarantee such a schedule and is willing to consider variations within reason.

II. RECEIPT OF QUOTES:

If you elect to bid, please submit the completed Receipt of Quote and include your company's cancellation policy. If it is not already noted, please include a breakdown of allotted time or conditions for a cancellation and any applicable cancellation fees.

The completed Receipt of Quote, cancellation policy and, if applicable, cancellation breakdown will constitute your companies Bid Package. Please be sure to complete every section of the Receipt of Quote and submit the requested documentation. Incomplete bid packages (i.e., missing documentation or incomplete Receipt of Quote) may be deemed unresponsive and disqualified without the chance to amend.

Responses for Quote # 13-22 must be received by 5:00pm EST November 6, 2013. Please use one of the below methods for submission.

Fax (preferred method): (518) 435-8413 (Cover Page attached for convenience)

E-mail (preferred method): bfs.contracts@tax.ny.gov.

Mail: ATTN: William Gwynn

W.A. Harriman Campus Building 9, Room 234 Albany, New York 12227

If you have any questions, please contact me at (518) 530-4484.

Sincerely,

William Gwynn

RECEIPT OF QUOTE RFQ # 13-22

Please complete the below <u>in its entirety</u> and return no later than 5:00pm EST November 6, 2013. All requested information/documentation <u>must be submitted</u> with this completed Receipt of Quote. Incomplete bid packages (i.e., missing information/documentation or incomplete Receipt of Quote) may be deemed unresponsive and disqualified without the chance to amend.

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Vendor Name	Contact Name
Street Address	E-Mail Address
City, State, Zip code	Vendor Phone Number
Federal ID Number	Vendor Fax Number

I. Cost Breakdown:

All bidders must complete Table 1.1.

Service Charges (e.g., room setup and troubleshooting) cannot be listed as separate line items. The prices listed in Table 1.1 must be inclusive of all facility rental and service charges.

Table 1.1:

Cost per month	Total cost (Nov. 2013 – March 2014)	
\$	\$	
Total Rental Cost (including room, audio	Total Rental Cost (including room, audio	
equipment, internet access, & parking)	equipment, internet access, & parking)	

II. Availability All bidders mus	/: st complete questions	1-2.		
Can your facilit	ty offer:			
1. A repet	itive, consistent date,	reoccurring month	nly (e.g. every first Monday, or the 10 th of	
every month):		\square Yes \square No, but alternate schedule provided in Table 2.1		
a.	If yes, available/prefer	red date:		
2. A repet	itive, consistent time r	matching Agency p	reference of 10:00am-12:00pm,	
reoccurring monthly:		\square Yes \square No, but alternate schedule provided in Table 2.1		
meet the repet	titive, consistent prefe	rences as stated al	e options that are available, but do not bove. This table may also be used to nat may occur in a particular month	
Month	Offered Date(s)		Offered Time(s)	
November				
December				
January				
February				
March				
Signature		Date		
[] NO QUOTE	AT THIS TIME, BUT RE	TAIN COMPANY OI	N BIDDER'S LIST.	

[] PLEASE REMOVE MY NAME FROM THIS BIDDER'S LIST.

REASON FOR NO QUOTE:

NEW YORK STATE DEPARTMENT OF TAXATION AND FINANCE FACILITY REQUIREMENTS

Minimum Requirements

Facilities must be in good repair and meet the basic needs of comfort, and cleanliness. This includes, but is not limited to, air conditioning, heat, and adequate bathroom facilities. Parking must be on site, and any parking fees must be included in the rental rate. The facility must be accessible by public transportation.

Quotes that deviate from the above specifications will be considered only if the Department determines that the proposed setup does not interfere with or detract from the training sessions being conducted. Such determination shall be made at the sole discretion of the Department.

Save Harmless Clause

The selected vendor agrees and stipulates that it will assume all risks of liability in the performance of services to be provided under this proposal and that it will be solely responsible and liable for damages resulting from all accidents and injuries to person(s) or property. The selected vendor agrees to indemnify, keep and hold harmless the State of New York, its officers and employees for any and all claims for injury or damage to persons or property, arising out of the service to be performed under this proposal, including negligence, active or passive, or wrongful or improper conduct of the selected vendor, its agents or employees.

Invariable Provisions

- 1. The vendor will read Appendix A (Standard Clauses for New York State Contracts), dated December 2012 as attached to this Request for Quote, which will be incorporated as part of the contract without revision.
- 2. All outstanding tax liabilities, if any, against the vendor in favor of the State of New York must be satisfied prior to contract execution or a payment schedule for their speedy satisfaction.