SAN ANTONIO

CITY OF SAN ANTONIO

FINANCE DEPARTMENT - PURCHASING DIVISION

FORMAL REQUEST FOR OFFER ("RFO") NO.: 6100015578

SAPD-PURCHASE OF PRISONER TRANSPORT VANS

Date Issued: MAY 27, 2022

RESPONSES MUST BE RECEIVED **NO LATER** THAN: 10:00 AM, CENTRAL TIME, JUNE 6, 2022

Responses may be submitted by any of the following means: Electronic submission through the Portal Electronic submission by email

Bid Due Date: 10:00 A.M, C.T. JUNE 6, 2022

Bid No.: 6100015578

Bid Bond: None

Performance Bond: None

Payment Bond: None

Other: None

See Supplemental Terms & Conditions for information on these requirements.

Affirmative Procurement Initiative: None

DBE / ACDBE Requirements: None

See Instructions for Offerors and Attachments sections for more information on these requirements.

Pre-Submittal Conference * NO

Staff Contact Person: ANGELA ALONSO-SMTIH, PROCUREMENT SPECIALIST III, P.O. Box 839966, San Antonio, TX 78283, 2000

78283-3966

Email: ANGELA ALONSO-SMITH@SANANTONIO.GOV

SBEDA Contact Information: NA

007-SIGNATURE PAGE

By submitting an offer, Offeror represents that:

(s)he is authorized to bind Offeror to fully comply with the terms and conditions of City's Request for Offer for the prices stated therein;

(s)he has read the entire document, including the final version issued by City, and agreed to the terms therein;

Offeror is in good standing with the Texas State Comptroller's Office; and

to the best of his/her knowledge, all information is true and correct.

Complete the following and sign on the signature line below. Failure to sign and submit this Signature Page will result in rejection of your offer.

Offeror Information

Please	Print	or	Type
--------	-------	----	------

Vendor ID No.	
Signer's Name	A. Glen Angelle
Name of Business	SilsBer Ford
Street Address	1211 U.S. Hug 96 N
City, State, Zip Code	5:15Ber, TexAS 177656
Email Address	gangelle constathet agmail com
Telephone No.	409-880-9191
Fax No.	409 895-3884
City's Solicitation No.	61000 15578.

Signature of Person Authorized to Sign Offer

009-ATTACHMENTS

ATTACHMENT A - PRICE SCHEDULE

ITEM#	DESCRIPTION	QUANTITY	UNIT PRICE	EXTENDED PRICE (QUANTITY X UNIT PRICE)		
1	FORD – TRANSIT VANS	2 EACH \$716522 \$143304.		143304.50		
	YEAR, MAKE & MODEL OF TRANSIT VAN OFFERED: 2023 Tears + MR ET. CARSO					
	SPECIFIC MAKE & MODEL OF ENGINE OFFERED FORD TRANS. T (INCLUDE SAE NET HP):					
		то	OTAL PRICE	\$ 143304.50		

VEHICLE WARRANTY: 36mo/36,000 Bumper To Bumper Syre/100,000 Power TORA'S VEHICLE WARRANTY SERVICE PROVIDER FACILITY NAME: Local Deplor ReD McComBs 8333 IH 10 San & VEHICLE WARRANTY SERVICE PROVIDER FACILITY ADDRESS: eD McCom Bs 8333 TH 10 San Au CALENDER DAYS AFTER ISSUANCE OF PURCHASE ORDER. PRODUCTION CUT-OFF DATE:

INDICATE THE LAST DAY THAT THE CITY CAN PLACE ORDERS UNDER THIS CONTRACT WITHOUT M	ISSING
THE PRODUCTION CUT OFF DATE:	

OFFER BID PRICES SHALL REMAIN FIRM FOR ALL ORDERS PLACED PRIOR TO THIS CUT OFF DATE. IN THE EVENT THAT CITY DOES NOT AWARD A CONTRACT PRIOR TO PRODUCTION CUT OFF DATE, CAN BIDDER PROVIDE BID ITEMS, AT THE BID PRICE SUBMITTED, AFTER THE PRODUCTION CUT OFF DATE?

ITEM#	DESCRIPTION	QUANTITY	PRICE EACH	EXTENDED PRIŒ (PRICE EACH X QUANTITY)	
2	COOPERATIVE FEE	1 EACH	\$ \$	\$	

Please include TIPS worksheet with your bid submission.

ATTACHMENT B

VETERAN-OWNED SMALL BUSINESS PREFERENCE PROGRAM (VOSBPP) ORDINANCE

Veteran-Owned Small Business Preference Program (VOSBPP) Ordinance
Pursuant to Ordinance No. 2013-12-05-0864, effective for solicitations issued after January 15, 2014, all solicitations issued by the City are subject to tracking of Veteran Owned Small Business (VOSB) participation.

For more information on the program, refer to the Veteran-Owned Small Business Program Tracking Form attached to this solicitation.

Respondent must complete and return the attached Veteran-Owned Small Business Program Tracking Form.

ATTACHMENT C

VETERAN-OWNED SMALL BUSINESS PROGRAM TRACKING FORM (Posted as a separate document)

Finance Department - Purchasing Division Local Preference Program Identification Form

CITY RESERVES THE RIGHT TO REQUEST ADDITIONAL INFORMATION TO VALIDATE BIDDERS'/RESPONDENTS' DESIGNATION AS A CITY BUSINESS.

COMPLETE THE FOLLOWING FORM AND SUBMIT WITH YOUR RESPONSE EVEN IF YOU ARE NOT SEEKING A LOCAL PREFERENCE. THE BIDDER / RESPONDENT MUST COMPLETE THE FOLLOWING FORM TO BE IDENTIFIED AS A CITY BUSINESS. IF BIDDER / RESPONDENT IS SUBMITTING AS A JOINT VENTURE, EACH CITY BUSINESS THAT IS A MEMBER OF THE JOINT VENTURE MUST COMPLETE AND SIGN THIS FORM.

PROVIDE THE FOLLOWING INFORMATION IF BIDDER/ RESPONDENT IS SUBMITTING AS PART OF A JOINT VENTURE. Joint Venture means a collaboration of for-profit business entities, in response to a solicitation, which is manifested by a written agreement, between two or more independently owned and controlled business firms to form a third business entity solely for purposes of undertaking distinct roles and responsibilities in the completion of a given contract. Under this business arrangement, each joint venture partner shares in the management of the joint venture and also shares in the profits or losses of the joint venture enterprise commensurately with its contribution to the venture.

STATE BIDDER'S / RESPONDENT'S PERCENTAC	GE OF OWNERSHIP IN THE JOINT VENTURE:%
REQUESTED BY CITY TO SUBSTANTIATE THE	GREEMENT. SUBMIT ANY OTHER DOCUMENTATION EXISTANCE OF AND/OR PARTICIPATION IN THE JOINT E ALLOCATED TO A JOINT VENTURE THAT FAILS TO
SOLICITATION NAME/NUMBER:	0015578
PROVIDE THE FOLLOWING INFORMATI- HEADQUARTERS:	ON REGARDING BIDDER'S / RESPONDENT'S
Name of Business:	SilsBee ForeD
Physical Address	1211 US. Hu 96N
City, State, Zip Code:	SilsBar, Texas, 77USL
Phone Number:	409-880-9191
Email Address	gancelle conBaffeeTD 5mpl-cox
Provide the total number of full-time, per Bidder / Respondent:	pad-time, and contract personnel employed by
Is Business headquartered within the in	corporated San Yes No

Yes

If the answers to the questions above are "Yes", stop here. If the answer to either of

the above questions is "No", provide responses to the following questions:

Has the business been headquartered in the incorporated

San Antonio city limits for one year or more? (circle one)

Finance Department - Purchasing Division Local Preference Program Identification Form

PROVIDE THE FOLLOWING INFORMATION REGARDING BIDDER'S / RESPONDENT'S LOCAL OFFICE (IF APPLICABLE):

Name of Business:				
Physical Address:				
City, State, Zip Code:				
Phone Number:				
Email Address:				
Provide the total number of full-time, parabilider / Respondent in the local office:		ct personnel e	mployed by	
Is the business located in the incorporated San Antonio city limits? (circle one)				
Has the business been located in the Antonio city limits for one year or more?	Yes	(No)		
Are at least 100 full-time, part-time or cregularly based in the San Antonio office	Yes	(No)		
Are at least 20% of the business' total fur contract employees regularly based in office? (circle one)	Yes	No		
Do the employees in the San Antonic substantial role in the business' p commercially useful function or are a sul business' operations conducted in the S (circle one)	performance of a bstantial part of the	Yes	No	

Finance Department - Purchasing Division Local Preference Program Identification Form

ACKNOWLEDGEMENT

THE STATE OF TEXAS

I certify that my responses and the information provided on this Local Preference Program Identification Form are true and correct to the best of my personal knowledge and belief and that I have made no willful misrepresentations on this form, nor have I withheld any relevant information in my statements and answers to questions. I am aware that any information given by me on this Local Preference Program Identification Form may be investigated and I hereby give my full permission for any such investigation, including the inspection of business records and site visits by City or its authorized representative. I fully acknowledge that any misrepresentations or omissions in my responses and information may cause my offer to be rejected or contract to be terminated. I further acknowledge that providing false information is grounds for debarment.

BIDDER'S / RESPONDENT'S FULL NAME:

(Print Name) Authorized Representative of Bidder / Respondent

(Signature) Authorized Representative of Bidder Respondent

Title

Date Date

This Local Preference Identification Form must be submitted with the bidder's / respondent's bid/proposal response.

Veteran-Owned Small Business Program Tracking Form

Authority. San Antonio City Code Chapter 2, Article XI describes the City's veteran-owned small business preference program.

Tracking. This solicitation is not eligible for a preference based on status as a veteran-owned small business (VOSB). Nevertheless, in order to determine whether the program can be expanded at a later date, the City tracks VOSB participation at both prime contract and subcontract levels.

Certification. The City relies on inclusion in the database of veteran-owned small businesses (VOSB) maintained by the U.S. Small Business Administration to verify VOSB status; however, veteran status may also be confirmed by certification by another public or private entity that uses similar certification procedures.

Definitions.

The program uses the federal definitions of veteran and veteran-owned small business found in 38 CFR Part 74

- The term "veteran" means a person who served on active duty with the U.S. Army, Air Force, Navy, Marine Corps, Coast Guard, for any length of time and at any place and who was discharged or released under conditions other than dishonorable. Reservists or members of the National Guard called to federal active duty or disabled from a disease or injury incurred or aggravated in line of duty or while in training status.
- A veteran-owned small business is a business that is not less than 51 percent owned by one or more veterans, or in the case of any publicly owned business, not less than 51 percent of the stock of which is owned by one or more veterans; the management and daily business operations of which are controlled by one or more veterans and qualifies as "small" for Federal business size stand purposes.

The program uses the below definition of joint venture.

Joint Venture means a collaboration of for-profit business entities, in response to a solicitation, which
is manifested by a written agreement, between two or more independently owned and controlled
business firms to form a third business entity solely for purposes of undertaking distinct roles and
responsibilities in the completion of a given contract. Under this business arrangement, each joint
venture partner shares in the management of the joint venture and also shares in the profits or
losses of the joint venture enterprise commensurately with its contribution to the venture.

The program does not distinguish between a veteran and a service-disabled veteran-owned business and is not limited geographically.

COMPLETE THE FOLLOWING FORM AND SUBMIT WITH YOUR BID/PROPOSAL.

INSTRUCTIONS

- IF SUBMITTING AS A PRIME CONTRACTOR ONLY, COMPLETE SECTION 1 OF THIS FORM.
- IF SUBMITTING AS A PRIME CONTRACTOR UTILIZING A SUBCONTRACTOR, COMPLETE SECTIONS 1 AND 2 OF THIS FORM.

Veteran-Owned Small Business Program Tracking Form

Name of Respondent:	SilsBry	Ford
Physical Address:	1211 115	11 9/21
City, State, Zip Code:	SilsBer-	1800 7715
Phone Number:	409-880-	9191
Email Address	ganuelle.co.	Ba Star Dam
Is Respondent certified as a VOSB with the U.S. Small Business Administration?	Yes	No
(circle one)		
If yes, provide the SBA Certification #		
If not certified by the SBA, is Respondent certified as a VOSB by another public or private entity that uses similar certification procedures? (circle one)	Yes	No
If yes, provide the name of the entity who has certified Respondent as a VOSB. Include any identifying certification numbers.		
Participation Percentage:		
Participation Dollar Amount:		
Is Respondent subcontracting with a business that is certified as a VOSB? (circle one)	Yes	(No)
Name of SUBCONTRACTOR Veteran-Owned Small Business:		
Physical Address:		
City, State, Zip Code		
Phone Number:		
Email Address: Is SUBCONTRACTOR certified as a VOSB with the U.S. Small Business Administration? (circle one) If yes, provide the SBA Certification #	Yes	(Ao)
If not certified by the SBA, is SUBCONTRACTOR certified as a VOSB by another public or private entity that uses similar certification procedures? (circle one)	Yes	No
If yes, provide the name of the entity who has certified		
SUBCONTRACTOR as a VOSB, Include any identifying certification numbers.		

City of San Antonio Veteran-Owned Small Business Program Tracking Form

ACKNOWLEDGEMENT

THE STATE OF TEXAS

I certify that my responses and the information provided on this Veteran-Owned Small Business Preference Program Identification Form are true and correct to the best of my personal knowledge and belief and that I have made no willful misrepresentations on this form, nor have I withheld any relevant information in my statements and answers to questions. I am aware that any information given by me on this Veteran-Owned Small Business Preference Program Identification Form may be investigated and I hereby give my full permission for any such investigation, including the inspection of business records and site visits by City or its authorized representative. I fully acknowledge that any misrepresentations or omissions in my responses and information may cause my offer to be rejected or contract to be terminated. I further acknowledge that providing false information is grounds for debarment.

BIDDER/RESPONDENT'S FULL NAME:
A Colon Angelly
(Print Name) Authorized Representative of Bidder/Respondent
De Don Ougle.
(Signature) Authorized Representative of Bidder/Reprodent
Title
6-3.20-
Date

This Veteran-Owned Small Business Program Tracking Form must be submitted with the Bidder/Respondent's bid/proposal.



PRODUCT PRICING SUMMARY

TIPS USA 210907 AUTOMOBILES

VENDOR- Silsbee Ford, 1211 Hwy 96 N., Silsbee TX 77656

Prepared by: GLEN ANGELLE

End	User: CITY OF SAN ANTONIO				Prepared by: GLEN ANGELLE		
Co	ontact: L,D, MCGARITY				Phone: 409-880-9191		
Email:				Email: gangelle.cowboyfleet@gmail.com			
	Product Description: 2023 FORD TRA	NSIT	350 LOW	ROOF	Date: July 15, 2022		
Α.	Bid Item:	32			A. Base Price:	\$	31,435.00
В.	Factory Options						
Code	Description	I	Bid Price	Code	Description	<u> </u>	Bid Price
	EXT. MED. ROOF UPGRADE 148 W/B	\$	4,355.00		EXT_BLACL	_	
	FIXED REAR GLASS	\$	250.00			<u> </u>	
	REV. SENSING	\$	295.00		VINYL BUCKET SEATS	<u> </u>	
	FRONT/REAR AIR	\$	860.00		3.5L V6	-	
	2 ADD, KEYS	\$	75.00		10- SPD AUTO	_	
	CRUISE CONTROL	\$	325.00			_	
	REAR CAMERA	_				-	
	POWER LOCKS/WINDOWS					-	
					Total of B. Published Options:	\$	6,160.00
					Published Option Discount (5%)	S	(90.25)
					Tubilita Option Discount (670)		12.00007
C.	Unpublished Options			i		т—	
	Description	J	Bid Price		Options		Bid Price
2023 PRI	CE ADJUSTMENT	\$	12,150.00			<u> </u>	
PRISONE	ER TRANSPORT UNIT PT-F06-100-1	. \$	19,995_00			-	
TWO TO	NE PAINT	\$	1,495.00			<u> </u>	
		1_				<u> </u>	
						_	
						<u> </u>	
						_	
		_ _		1		_	
						_	
					Total of C. Unpublished Options:	\$	33,640.00
n	Floor Plan Interest (for in-stock and/o	aui	inned vehic	alos):		\$	
D.	Floor Plan Interest (for in-stock and/o.	requi	ppea vein	.163).			
E.	Lot Insurance (for in-stock and/or equ	ipped	vehicles):			\$	177
						6	
F.	Contract Price Adjustment:					\$	*
G.	Additional Delivery Charge:		290	miles		\$	507.50
	•	-					
H.	Subtotal:					\$	71,652.25
I.	Quantity Ordered	x l				\$	71,652.25
		_					
J.	Trade in:					. 5	
12						S	
K.							
L.	Total Purchase Price					\$	71,652.25