

OREGON STATE UNIVERSITY REQUEST FOR QUOTE (RFQ)

			ISSUE DATE:	September 29, 2015		
RFQ #	SS178959	PRFQ	RFQ DUE DATE:	October 13, 2015 2:00PM PST		
DELIVER TO:			REQUESTED BY / RETURN QUOTE TO:			
DEPARTMENT:	College	of Agricultural Sciences	NAME:	Shoshana Shabazz		
ADDRESS:	Gilmore Hall, 116 Gilmore Hall		E-MAIL:	Shoshana.Shabazz@oregonstate.edu		
CITY, STATE						
ZIP:	Corvallis, OR, 97331		TELEPHONE:	541-737-0922		
REQUIRED DELIVERY						
DATE:		December 31, 2015	FAX:	541-737-4810		

Oregon State University (OSU) is seeking responsive, responsible quotes to **provide and install** a steam sterilizer (autoclave). In order to qualify as responsive you must meet the following specifications and qualifications:

Specifications:

- Materials:
 - Steam sterilizer (autoclave)
 - Services:
 - Installation
 - Coordination for installation to be done directly with College of Agricultural Sciences authorized personnel.

In response to this RFQ, interested parties shall submit the following:

The Quote Price Form on the following page, fully completed and signed.

The deadline for questions regarding this RFQ is 10:00 am Pacific Time on October 6, 2015. Questions submitted after the deadline will not be entertained.

DO NOT SUBMIT ANY OTHER DOCUMENTS INCLUDING BUT NOT LIMITED TO, A QUOTE ON COMPANY LETTERHEAD, COMPANY TERMS AND CONDITIONS OR PRODUCT BROCHURE. ONLY SUBMIT THE REQUIRED SUBMITTALS LISTED ABOVE. ANY DOCUMENTS SUBMITTED OTHER THAN THE REQUIRED SUBMITTALS LISTED ABOVE MAY CONSTITUTE CAUSE FOR QUOTE REJECTION.

OSU'S TERMS AND CONDITIONS GOVERNING THE PURCHASE RESULTING FROM THIS RFQ ARE INCLUDED IN EXHIBIT A AND WILL PREVAIL.



SS178959RFQ – STEAM STERILIZER (AUTOCLAVE) QUOTE PRICE FORM

Installer Name and Valid Oregon CCB Number			Name:					
		0	Oregon CCB Number:					
ITEM		PRICE						
Steam Sterilizer (Autoclave)			\$					
		\$						
Installation								
Shipping, freight and handling must be	included in	quoted p	rices. Addi	tional costs				
for such are disallowed.	OF			DDICES VAL	TOTAL			
DELIVERY TIME AFTER RECEIPT ORDER:	OF			PRICES VAI THROUGH:				
SPECIAL INSTRUCTIONS:			VENDO	OR INFORMA	TION:	·		
1. Unless otherwise specified, all items	COMPAN	IY:						
quoted are to be new, unused and not remanufactured in any way.	ADDRES	S:						
2. Brand names are for the purpose of	CITY, ST							
describing and establishing the characteristics desired and are not intended	ZIP:							
to limit or restrict competition. Interested	CONTAC NAME:	T						
firms may submit quotes for substantially equivalent products unless the RFQ provides								
that a specific brand is necessary because of	E-MAIL:							
compatibility requirements, etc. All such brand substitutions shall be subject to	TELEPH	UNE:						
approval by OSU.	FAX:		VENI	OD SICNATI				
3. You must clearly identify all products	VENDOR SIGNATURE: By signature below the undersigned certifies that they are authorized to act on							
quoted. Brand name and model or number must be shown.	behalf of the quoter and will comply with all aspects of the quote herein.							
4. Only documents issued as addenda by								
OSU serve to change the RFQ in any way.SIGN5. OSU reserves the right to make the awardSIGNby item, partial or whole lots, groups ofSIGN		J RE:						
items or entire quote, whichever is in the best interest of OSU.								
6. OSU may reject any Quote not in								
compliance with the RFQ, attachments, and								
addenda, or if it is in the best interest of OSU.	NAME/TI	TLE:						
This procurement is subject to the indicated On	egon State U	niversity S						
Services Purchase Order Constru		Software.	The indica	terms and	conditions ma	ay be viewed a	at	



EXHIBIT A TERMS AND CONDITIONS

The following Terms and Conditions are in addition to those included on the following pages:

- Compliance with Bureau of Labor and Industries
 - Labor provided on site to support this RFQ falls under the Bureau of Labor Industries guidelines and as such, along with the Terms and Conditions located further in Exhibit A, the following is incorporated into this RFQ. Installation MUST be performed by a commercially licensed contractor or subcontractor. This license must be issued by the Oregon Construction Contractors Board prior to submitting a quote. Contractor and all subcontractors shall comply with the provisions of ORS 279C.800 through 279C.870, relative to Prevailing Wage Rates as outlined in Sections C.1 and C.2 of the General Conditions. This Solicitation and the resulting Purchase Order are subject to the following BOLI wage rate requirements, which are incorporated herein by Exhibit C.

These BOLI wage rates are available on line at: http://www.boli.state.or.us/BOLI/WHD/PWR/pwr_state.shtml.

- Insurance Certificates and associated Endorsements will be required after award and prior to issuance of purchase order. Specifically required are
 - o General Liability and associated Endorsement
 - Auto Liability and associated Endorsement
 - Workers Compensation

Include as additional insured, by endorsement, on the liability policies, " Oregon State University, its officers, board members, agents and employees." **Provide the endorsement w/policy # attached.** Insurance coverages required under this Contract shall be obtained from acceptable insurance companies or entities authorized to do business in the State of Oregon. The Contractor shall be financially responsible for all deductibles, self-insured retentions and/or self-insurance included hereunder. See Exhibit D

Note: Insurance documents must come directly from your agent by either email (PDF) or standard mail. Faxed copies or documents delivered by the contractor/vendor, unless in a sealed envelope from your agent, will not be accepted. Insurance documents must be provided to OSU prior to the execution of a purchase order.



EXHIBIT B EQUIPTMENT SPECIFICATIONS

Minimum specifications for steam sterilizer (autoclave) to be located in the Biological & Ecological Engineering Department, Gilmore Hall, Oregon State University:

- 1. The bid is for new units only.
- 2. The autoclave may be a cabinet or stand-alone installation, or suitable for counter top operation. The chamber can be in vertical or horizontal configuration.
- 3. The interior chamber size should be rectangular and at least 19" wide x 19" high x 38" deep. The chamber may also be cylindrical in shape as long as it meets the minimum size dimensions specified. There should be a single door. The chamber gaskets should be silicon rubber or similar material and easily replaceable without tools.
- 4. The autoclave should operate at a temperature of 122°C or greater and be capable of vacuum, gravity, and slow exhaust (liquid) operation. Ancillary equipment (air compressors, etc.) necessary for operation in these modes must be included as part of the bid.
- 5. The autoclave should be fitted with microprocessor controls that control all aspects of its operation. In addition, a removable rack and at least two removable shelves should be supplied. Both the rack and shelves should be made of a corrosion resistant material.
- 6. The autoclave should be supplied with an integral electric steam generator. The autoclave facility has a 208 V, 3 phase and 115 V single phase electrical supply. The integral electric steam generator should be 208 V, 3 phase. The other electrical options should be capable of operating with the facility electric supply.
- 7. The autoclave shall have a manual swing out door.
- 8. Building compressed air (75 PSI minimum) will not be available at the autoclave.
- 9. The autoclave shall have a 1 year warranty on all parts and labor and a 10 year chamber warranty against defects in materials and workmanship. Provide ASME Code construction and registered pressure vessel and three copies of ASME Form U-l registration.
- 10. The cost of shipping the unit to Gilmore Hall, Corvallis OR 97331-3906 shall be included in the bid package.
- 11. The manufacturer shall install the unit and provide complete in-service training for the operators; these costs should be included.
- 12. <u>The unit will be going into 105B of Gilmore Hall. Gilmore Hall does not have a freight elevator or a loading dock</u>. Delivery will require the installer to have a lift-gate or a forklift.



EXHIBIT C PREVAILING WAGE RATES

In compliance with Oregon Prevailing Wage Law, the following is incorporated into this Purchase Order:

The Contractor and all subcontractors shall comply with the provisions of ORS 279C.800 through 279C.870, relative to Prevailing Wage Rates as outlined in Sections C.1 and C.2 of the General Conditions. This Purchase Order is subject to the following BOLI wage rate requirements, which are incorporated herein by Benton County

- July 1, 2015 PWR Apprenticeship Rates
- July 1, 2015 Prevailing Wage Rates for Public Works Contracts in Oregon
- July 1, 2014 Definitions of Covered Occupations for Public Works Contracts in Oregon

These BOLI wage rates are available on line at: http://www.boli.state.or.us/BOLI/WHD/PWR/pwr_state.shtml



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EXHIBIT D INSURANCE CHECKLIST

To meet insurance requirements all Insurance Certificates must:

1. Be sent to Capital Projects Contract Administration, Oregon State University, 3015 SW Western Blvd. Corvallis OR 97333. The certificates must be "originals". We can accept PDF documents directly from your agent's office. Faxed copies from your agent will not be accepted. Documents delivered by the contractor/vendor via fax or email will not be accepted. Documents delivered by the contractor/vendor via mail or in person, unless in a sealed envelope from your agent, will not be accepted.

2. Contain policy numbers on the Certificate(s) and on any endorsements or attachments affixed to the Certificate.

3. The insurance shall contain the project name "Gilmore Autoclave Install" in the description on the Certificate.

4. Show the beginning and ending dates for all policies.

5. Be issued by a company licensed to do business in Oregon.

6. Contain auto liability with minimum limits of \$1,000,000 per occurrence. If coverage does not include all autos (owned, non-owned, and hired) contractor must provide written certification to OSU that only covered autos will be used for the contract. If it becomes necessary to use non-covered autos, coverage must be purchased as required by the contract and a Certificate of Insurance must be forwarded to Capital Projects Contract Administration prior to such use.

7. Contain comprehensive general liability with broad form CGL endorsement or commercial general liability (CGL) with minimum limits of \$1,000,000 per occurrence/ \$1,000,000 annual aggregate. If the "Claims Made" form of insurance is utilized, the contractor shall certify that "Tail Coverage" will be provided if such insurance is canceled, non-renewed or not replaced in like form. This is to cover claims made up to twenty-four (24) months following work acceptance. The policy shall include an occupancy clause.

8. Contain workers' compensation insurance or a signed and dated independent contractor certification statement (Form CO-3233) from the contractor.

9. Include as additional insured, by endorsement, on the liability policies, "Oregon State University, its officers, board members, agents and employees."

10. Provide the endorsements for the general liability and auto liability w/policy # attached.

11. The general liability endorsement must not contain the language: That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as part of the same project. If that language is included in the endorsement a completed operations with the policy number typed on it shall be provided.

12. Give 30 days' notice of cancellation to Capital Projects Contract Administration. Any reservations must be crossed off the Certificate (i.e., "..will endeavor to mail 30 days' notice to the Certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives."

13. Be signed, dated and contain the title of the project," Gilmore Autoclave Install".



At all times, Capital Projects Contract Administration must have a valid Certificate of Insurance (with policy dates that have not expired) as evidence that the insurance is in force. The contractor must ensure that renewal Certificates of Insurance are forwarded to Capital Project Contract Administration prior to the expiration date(s) on the Certificates. Any conflicts between this checklist and the contract requirements will be resolved in favor of the contract.

EXHIBIT E

