REQUEST FOR BID
#20-0009
PEST CONTROL SERVICES

January 15, 2020

Sedgwick County, Kansas (hereinafter referred to as “county”) is seeking bids from one or more firms to provide Pest Control Services at multiple County facilities. If your firm is interested in submitting a response, please do so in accordance with the instructions contained within the attached Request for Bid. Responses are due no later than 1:45pm CST, Tuesday, February 11, 2020.

All contact concerning this solicitation shall be made through the Purchasing Section. Bidders shall not contact county employees, department heads, using agencies, evaluation committee members or elected officials with questions or any other concerns about the solicitation. Questions, clarifications and concerns shall be submitted to the Purchasing Section in writing. Failure to comply with these guidelines may disqualify the Bidder’s response.

Sincerely,

Lee Barrier
Purchasing Agent

LB/hp
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I. **Purpose**
Sedgwick County, located in south-central Kansas, is one of the most populous of Kansas’ 105 counties with a population estimated at more than 511,000 persons. It is the sixteenth largest in area, with 1,008 square miles, and reportedly has the second highest per capita wealth among Kansas’ counties. Organizationally, the County is a Commission/Manager entity, employs nearly 2,800 persons, and hosts or provides a full range of municipal services, e.g., public safety, public works, criminal justice, recreation, entertainment, cultural, human/social, and education.

Sedgwick County is seeking bids for Pest Control Services, in accordance with the specifications outlined, for multiple Sedgwick County facilities.

II. **Submittals**
Carefully review this Request for Bid. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate, submit one (1) original AND one (1) electronic copy (PDF/Word supplied on a flash drive) of the entire document with any supplementary materials to:

Lee Barrier  
Sedgwick County Purchasing Section  
525 N. Main, Suite 823  
Wichita, KS 67203

SUBMITTALS are due NO LATER THAN 1:45 p.m. CST, Tuesday, February 11, 2020. Responses must be sealed and marked on the lower left-hand corner with the firm name and address, bid number, and bid due date. Late or incomplete responses will not be accepted and will not receive consideration for final award.

Bid responses will be acknowledged and read into record at bid opening which will occur at 2:00 p.m. CST, on the due date.

III. **Scope of Work**
Items listed in this section are requirements to completion of services under this contract.

**Minimum Requirements**
The county desires the most advantageous service(s) and product(s) available. The following specifications outline the minimum requirements for this RFB. Minimum requirements are provided to assist vendors in submitting a thorough response that meets the county’s objectives.

1. Contractor will furnish labor, equipment and material necessary to provide buildings with extermination and prevention of pest infestation, reported infestation, and scheduled preventative services.

2. Scheduled service will include all offices, restrooms, eating areas, halls, service closets, panel closets, crawl spaces, basement, sub-basement, vent stacks, food preparation, storage, and any other areas that departments deem necessary. **Offices occupied during time of service may be skipped or not, depending on the occupants willingness to vacate the room during treatment. Kitchens and breakrooms may be skipped under similar circumstances. Rooms containing unsealed food will not be serviced.**

3. Contact the Building Administrator of each location to determine a time convenient to that location and designated areas to be serviced. A schedule of times and dates must be compiled and presented to the Building Administrator before beginning service.

4. All spraying to be done during normal business hours unless specified. The pesticide used must be effective for no less than thirty (30) days after each application.
5. Warranty any re-infestation that occurs within 30 days of application and provide additional service if necessary. Call back service must be rendered without additional charge to the County. Extra service calls for non-warranted pests will be charged for on a per call basis.

6. All applications must be made by technicians trained, licensed and certified to make such applications and must be done in accordance with all applicable Federal, State, County and Local regulations.

7. Contractor will provide emergency service to treat re-infested areas within twenty-four (24) hours of notification, excluding weekends and holidays. Service must be rendered without additional charge.

8. All pesticides must be registered for use by the U.S. Department of Agriculture, Food and Drug Administration, U.S. Environmental Protection Agency, and all other appropriate Federal, State, County or Local agencies that have jurisdiction.

9. Use pesticides that are as odorless as possible, that will not stain carpeting, draperies, or fabrics.

10. The contractor will submit to each location’s Building Administrator a Safety Data Sheet (SDS) prior to any products(s) being used. SDS sheets must accompany all products during transportation, application and storage.

11. On site storage of products is not authorized on Sedgwick County property.

12. At random intervals, the Building Administrator will request a sample of sprayed chemicals from the service technician. Samples will be sent to an independent laboratory for testing.

13. Escort will be required at detention facilities and other sensitive areas.

14. Contractor will perform inspections and make recommendations to the Building Administrator concerning repairs to the building that may be necessary to seal off entrance points of pests or rodents, and for the removal of harborages and food supplies. Indication or evidence of termites or other wood destroying organisms should be reported immediately.

15. Obtain a signed ticket from each location after each service and submit said tickets with monthly invoicing.

16. Sedgwick County reserves the right to delete facilities from the contract.

17. Submit invoices and signed tickets for payment to Onbase_OCR@sedgwick.gov or fax to (316) 383-7055.

18. Have complete liability insurance coverage, be state licensed and certified by the Department of Agriculture and provide confirmation with bid response.

19. Direct communication with contractor for emergency service will be accomplished by email or telephone. Contractor will provide a direct phone number and email address of a responsible agent assigned to Sedgwick County for pest control service.

IV. Background Checks
Throughout the duration of this agreement, contractor hereby certifies that all personnel assigned to perform services will have been screened by means of a criminal history background check and that no convictions exist for any felony or misdemeanor, excluding traffic violations.
Contractor further agrees that it will complete a Criminal History Background Check certification for each such employee that will include a seven year court search for the following:

A. National Database Criminal
B. All Federal Districts, Federal Criminal-Kansas
C. Sedgwick County Criminal
D. Butler County Criminal
E. Kansas Statewide Criminal Search
F. Social Security
G. City of Wichita Municipality

V. Sedgwick County’s Responsibilities
- Provide information, as legally allowed, in possession of the county, which relates to the county’s requirements or which is relevant to this project.
- Designate a person to act as the county Contract Manager with respect to the work to be performed under this contract.
- County reserves the right to make inspections at various points of the project. Contractor agrees to openly participate in said inspections and provide information to the county on the progress, expected completion date and any unforeseen or unexpected complications in the project.

VI. Bid Terms

A. Questions and Contact Information
Any questions regarding this document must be submitted in writing to Lee Barrier at lee.barrier@sedgwick.gov by 5:00 p.m. CST Tuesday, January 28, 2020. Any questions of a substantive nature will be answered in written form as an addendum and posted on the purchasing website at https://www.sedgwickcounty.org/finance/purchasing/requests-for-bid-and-proposal/ under the Documents column associated with this bid number by 5:00 p.m. CST, February 4, 2020. Firms are responsible for checking the website and acknowledging any addenda on their bid response form.

B. Minimum Firm Qualifications
This section lists the criteria to be considered in evaluating the ability of firms interested in providing the service(s) and/or product(s) specified in this Request for Bid. Firms must meet or exceed these qualifications to be considered for award. Bids submitted must reflect in detail their inclusion as well as the degree to which they can be provided. Any exceptions to the requirements listed should be clearly detailed in proposer’s response.

Bidders shall:
1. Have proper certification(s) or license(s) for the services/product specified in this document.
2. Ensure that project work meets all local, state and federal laws, regulations and ordinances.
3. Have the capacity to acquire all required permits, bonds, escrows or insurances.
4. Provide appropriate project supervision and quality control procedures.
5. Have appropriate material, equipment and labor to perform job safely and efficiently. All costs associated with meeting this requirement will be the sole responsibility of the vendor.

C. Evaluation Criteria
An award will be made to the lowest responsible and responsive bidder.
D. **Request for Bid Timeline**
The following dates are provided for information purposes and are subject to change without notice. Contact the Purchasing Section at (316) 660-7255 to confirm any and all dates.

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distribution of Request for Bid to interested parties</td>
<td>January 14, 2020</td>
</tr>
<tr>
<td>Clarification, Information and Questions submitted in writing by 5:00 p.m. CST</td>
<td>January 28, 2020</td>
</tr>
<tr>
<td>Addendum Issued by 5:00pm CST</td>
<td>February 4, 2020</td>
</tr>
<tr>
<td>Sealed Bid due before 1:45pm CST</td>
<td>February 11, 2020</td>
</tr>
<tr>
<td>Board of Bids and Contracts Recommendation</td>
<td>February 20, 2020</td>
</tr>
<tr>
<td>Board of County Commission Award</td>
<td>March 4, 2020</td>
</tr>
</tbody>
</table>

E. **Contract Period and Payment Terms**
A contractual period will begin following Board of County Commissioners (BoCC) approval of the successful firm(s) for three (3) years with option to renew for (2) additional one (1) year terms.

Either party may cancel its obligations herein upon thirty-day (30) prior written notice to the other party. It is understood that funding may cease or be reduced at any time, and in the event that adequate funds are not available to meet the obligations hereunder, either party reserves the right to terminate this agreement upon thirty (30) days prior written notice to the other. Payment will be remitted following receipt of monthly detailed invoice.

Payment and Invoice Provisions
[https://www.sedgwickcounty.org/media/39239/payment_and_invoice_provisions.pdf](https://www.sedgwickcounty.org/media/39239/payment_and_invoice_provisions.pdf)

F. **Insurance Requirements**

Liability insurance coverage indicated below must be considered as primary and not as excess insurance. If required, contractor’s professional liability/errors and omissions insurance shall (i) have a policy retroactive date prior to the date any professional services are provided for this project, and (ii) be maintained for a minimum of 3 years past completion of the project. Contractor shall furnish a certificate evidencing such coverage, with county listed as an additional insured including both ongoing and completed operations, except for professional liability, workers’ compensation and employer’s liability. **Certificate shall be provided prior to award of contract.**

Certificate shall remain in force during the duration of the project/services and will not be canceled, reduced, modified, limited, or restricted until thirty (30) days after county receives written notice of such change. All insurance must be with an insurance company with a minimum BEST rating of A-VIII and licensed to do business in the State of Kansas **(must be acknowledged on the bid/proposal response form).**

**NOTE:** If any insurance is subject to a deductible or self-insured retention, written disclosure must be included in your proposal response and also be noted on the certificate of insurance.

It is the responsibility of contractor to require that any and all approved subcontractors meet the minimum insurance requirements.
## Workers’ Compensation:
- Applicable coverage per State Statutes

## Employer’s Liability Insurance:
- $500,000.00

## Commercial General Liability Insurance (on form CG 00 01 04 13 or its equivalent):
- Each Occurrence: $1,000,000.00
- General Aggregate, per project: $2,000,000.00
- Personal Injury: $1,000,000.00
- Products and Completed Operations Aggregate: $2,000,000.00

## Automobile Liability:
- Combined single limit: $500,000.00

### Umbrella Liability:
- Following form for both the general liability and automobile liability:
  - **x** Required/ ____ Not Required
    - Each Claim: $1,000,000.00
    - Aggregate: $1,000,000.00

### Professional Liability/Errors & Omissions Insurance:
- **x** Required/ ____ Not Required
  - Each Claim: $1,000,000.00
  - Aggregate: $1,000,000.00

### Pollution Liability Insurance:
- **x** Required/ ____ Not Required
  - Each Claim: $1,000,000.00
  - Aggregate: $1,000,000.00

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**Special Risks or Circumstances:**

Entity reserves the right to modify, by written contract, these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

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**G. Indemnification**

To the fullest extent of the law, the provider, its subcontractor, agents, servants, officers or employees shall indemnify and hold harmless Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, from any and all claims brought by any person or entity whatsoever, arising from any act, error, or omission of the provider during the provider’s performance of the agreement or any other agreements of the provider entered into by reason thereof. The provider shall indemnify and defend Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, with respect to any claim arising, or alleged to have arisen from negligence, and/or willful, wanton or reckless acts or omissions of the provider, its subcontractor, agents, servants, officers, or employees and any and all losses or liabilities resulting from any such claims, including, but not limited to, damage awards, costs and reasonable attorney’s fees. This indemnification shall not be affected by any other portions of the agreement relating to insurance requirements. The provider agrees that it will procure and keep in force at all times at its own expense insurance in accordance with these specifications.

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**H. Confidential Matters and Data Ownership**

The successful bidder agrees all data, records and information, which the bidder, its agents and employees, which is the subject of this bid, obtain access, remains at all times exclusively the property of Sedgwick County. The successful proposer agrees all such data, records, plans and information constitutes at all times proprietary information of Sedgwick County. The successful bidder agrees that it will not disclose, provide, or make available any of such proprietary information in any form to any person or entity. In addition, the successful proposer agrees it will not use any names or addresses contained in such data, records, plans and information for the purpose of selling or offering for sale any property or service to any person or entity who resides at any address in such data. In addition, the successful proposer agrees it will not sell, give or otherwise make available to any person or entity any names or addresses contained in or derived from such data, records and information for the purpose of allowing such person to sell or offer for sale any property or service to any person or entity named in such data.
Successful bidder agrees it will take all reasonable steps and the same protective precautions to protect Sedgwick County's proprietary information from disclosure to third parties as with successful proposer's own proprietary and confidential information. Proposer agrees that all data, regardless of form that is generated as a result of this Request for Bid is the property of Sedgwick County.

I. **Bid Conditions**

https://www.sedgwickcounty.org/media/31339/bid-terms-conditions.pdf

General Contract Provisions

Mandatory Contract Provisions
https://www.sedgwickcounty.org/media/31336/mandatory-contractual-provisions.pdf

Independent Contractor
https://www.sedgwickcounty.org/media/54780/independent-contractor-addendum.pdf

Sample Contract
https://www.sedgwickcounty.org/media/39236/sample-contract.pdf

V. **Required Response Content**
Bid response should include the following:

1. Any exclusions clearly delineated.
2. Sample invoice.
3. Completed and signed Bid Response Form.
4. Those responses that do not include all required forms/items may be deemed non-responsive.


VI. **Response Form**

**REQUEST FOR BID**  
20-0009  
PEST CONTROL SERVICES

The undersigned, on behalf of the Bidder, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a bid on the same project; (2) is in all respects fair and without collusion or fraud; (3) the person whose signature appears below is legally empowered to bind the firm in whose name the bidder is entered; (4) they have read the complete Request for Bid and understands all provisions; (5) if accepted by the County, this bid is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted bid will be their responsibility.

**NAME**
_________________________________________________________________________________________________

**DBA/SAME**
____________________________________________________________________________________________

**CONTACT**
____________________________________________________________________________________________

**ADDRESS** _______________________________ **CITY/STATE** __________________ **ZIP** _____________

**PHONE** _______________________________ **FAX** _______________________________ **HOURS** ________________

**STATE OF INCORPORATION or ORGANIZATION**
_____________________________________________________

**COMPANY WEBSITE ADDRESS**
_____________________________________________________

**E-MAIL**
______________________________________________

**NUMBER OF LOCATIONS** __________________________  **NUMBER OF PERSONS EMPLOYED** ______________

**TYPE OF ORGANIZATION:**  
Public Corporation ______ Private Corporation______ Sole Proprietorship ______

Partnership______ Other (Describe): ______________________

**BUSINESS MODEL:**  
Small Business _____ Manufacturer _____ Distributor ______ Retail ________

Dealer _____ Other (Describe): __________________________

Not a Minority-Owned Business: ____  Minority-Owned Business: ____ (Specify Below)
___ African American (05)  ___ Asian Pacific (10)  ___ Subcontinent Asian (15)  ___ Hispanic (20)
___ Native American (25)  ___ Other (30) (Please specify__________________________)

Not a Woman-Owned Business: ____  Woman-Owned Business: ____ (Specify Below)
___ Not Minority-Woman Owned (50)  ___ African American-Woman Owned (55)
___ Asian Pacific-Woman Owned (60)  ___ Subcontinent Asian-Woman Owned (65)  ___ Hispanic Woman Owned (70)
___ Native American-Woman Owned (75)  ___ Other (Woman Owned) (80) Please specify________________________

ARE YOU REGISTERED TO DO BUSINESS IN THE STATE OF KS: ______Yes ______No

INSURANCE REGISTERED IN THE STATE OF KS WITH MINIMUM BEST RATING OF A-VIII: ______Yes ______No

☐ Yes, I would like to be on the emergency vendor list.
☐ No, I would not like to be on the emergency vendor list.

After Hours Phone #:__________________________  Emergency Contact Name:__________________________

After Hours Fax #:____________________________

**ACKNOWLEDGE RECEIPT OF ADDENDA:** All addendum(s) are posted to our RFQ/RFP web page and it is the vendor’s responsibility to check and confirm all addendum(s) related to this document by going to www.sedgwickcounty.org/finance/purchasing.asp.

NO._____, DATED _______; NO._____, DATED_____; NO._____, DATED_____

In submitting a response to this document, vendor acknowledges acceptance of all sections of the entire document and has clearly delineated and detailed any exceptions.

Signature_______________________________________  Title___________________________________

Print Name______________________________________  Dated _________________________________

20-0009  
Sedgwick County….Working for You