



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
BEP07050

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
KRISTA FERRELL 304-558-2596

RFQ COPY
 TYPE NAME/ADDRESS HERE

VENDOR

SHIP TO

BUREAU OF EMPLOYMENT PROGRAMS
 5501FED-UC BOARD OF REVIEW

 1321 PLAZA EAST
 CHARLESTON, WV
 25301-1400 558-2634

DATE PRINTED 11/09/2006	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
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BID OPENING DATE: 11/27/2006 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>*****ADDENDUM NO. 1*****</p> <p>1. QUESTIONS AND ANSWERS 2. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION.</p> <p>QUESTION: WILL THERE STILL BE A REQUIREMENT TO PICK UP AND DROP OFF HEARING TAPES AND HEARING TRANSCRIPTS TWICE A WEEK, AS IS THE CURRENT PRACTICE? RESPONSE: YES</p> <p>QUESTION: WE NOTICE THERE IS NO SEPARATE LINE PRICING FOR 1) THE INDEXED PAGES OR FOR 2) THE SEARCHABLE DATA BASE PROGRAM. SHOULD BOTH OF THOSE COSTS BE INCLUDED IN THE PER PAGE COST OF THE HEARING TRANSCRIPT? RESPONSE: YES</p> <p>QUESTION: IS THIS RFQ TO BE A BIDDING PROCESS WHERE THE SELECTION WILL BE MADE BASED UPON LOWEST COST ONLY? RESPONSE: THE RFQ REQUIRES 5 YEAR EXPERIENCE DOING THIS TYPE OF WORK. THE BID WILL BE AWARDED TO THE LOWEST BIDDER.</p> <p>*****END OF ADDENDUM NO. 1*****</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE	TELEPHONE	DATE
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

**GENERAL TERMS & CONDITIONS
REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)**

1. Awards will be made in the best interest of the State of West Virginia.
2. The State may accept or reject in part, or in whole, any bid.
3. All quotations are governed by the *West Virginia Code* and the *Legislative Rules* of the Purchasing Division.
4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125.00 registration fee.
5. All services performed or goods delivered under State Purchase Orders/Contracts are to be continued for the term of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.
6. Payment may only be made after the delivery and acceptance of goods or services.
7. Interest may be paid for late payment in accordance with the *West Virginia Code*.
8. Vendor preference will be granted upon written request in accordance with the *West Virginia Code*.
9. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
11. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
12. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
13. **BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, this contract is automatically null and void, and is terminated without further order.
14. **HIPAA Business Associate Addendum** - The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site (<http://www.state.wv.us/admin/purchase/vrc/hipaa.htm>) is hereby made part of the agreement. Provided that, the Agency meets the definition of a Covered Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.

INSTRUCTIONS TO BIDDERS

1. Use the quotation forms provided by the Purchasing Division.
2. **SPECIFICATIONS:** Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
3. Complete all sections of the quotation form.
4. Unit prices shall prevail in cases of discrepancy.
5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
6. **BID SUBMISSION:** All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications.

SIGNED BID TO:

Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

11/11

**Thursday November 2, 2006
PRE-BID SIGN IN SHEET
FOR
BEP07050**

> Only the vendor(s) attending the pre-bid conference will:

- Receive an addendum, if one is necessary
- Be allowed to bid on this project

SIGNATURE OF VENDOR REPRESENTATIVE* Please print name under signature	VENDOR NAME	VENDOR ADDRESS	VENDOR TELEPHONE NUMBER**	VENDOR FAX NUMBER**
1 <i>[Signature]</i> Luther Ferguson	LS Services Inc	1405 County Rd 1 South Point OH 45070	800-221-0244	(746) 377-4559
2 <i>[Signature]</i> Sara Jordan	Transcription + Training Services	1085 Main Street Mieser, WV 25541	304-633-1909	
3				
4				
5				
6				

*PLEASE PROVIDE A BUSINESS CARD IF AVAILABLE

**INCLUDE AREA CODE

Vendor: _____ Spending Unit: _____

003

Requisition No.: _____

ADDENDUM ACKNOWLEDGEMENT

I hereby acknowledge receipt of the following checked addendum(s) and have made the necessary revisions to my proposal, plans and/or specifications, etc.

Addendum No.'s:

- No. 1 _____
- No. 2 _____
- No. 3 _____
- No. 4 _____
- No. 5 _____

I understand that failure to confirm the receipt of the addendum(s) is cause for rejection of bids.

Signature

Company

Date