

MANATEE COUNTY FLORIDA

RFQ #16-2889BLS FITNESS EQUIPMENT

Submit quotation (4 pages total) to:

Bonnie Sietman, Senior Buyer either by email or fax. P 941.749.3046 F 941.749.3034 bonnie.sietman@mymanatee.org

DATE ISSUED: August 18, 2016

CLARIFICATION DEADLINE: August 19, 2016 @ 11:00am

DUE DATE: August 19, 2016 @ 3:00pm

The Parks and Recreation Department of Manatee County invites your participation in the following quotation for exercise equipment. The specifications stated herein are the minimum requirements:

****NOTE**** ANY SOLICITATION IN EXCESS OF \$25,000 MUST BE REQUESTED BY THE PURCHASING DEPARTMENT

Award shall be made to the lowest responsive, responsible quoter meeting all specifications.

Terms and Conditions:

- ✓ Exempt tax certificate available upon request
- ✓ Certificate of Insurance required if installation is applicable
- ✓ Payment terms = Net 45 days

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Please return this 4-page Request for Quotation form to be considered responsive

<u>Item</u>	<u>Description</u>	<u>Qty</u>	<u>Price</u>	Extended Price
1	Smith Machine (or equivalent, provide the Manufacturer:)	1		
2	Low back extension machine	1		
3	Bench Press	1		
4	Inner/Outer thigh machine	1		
5	Leg press plate loaded	1		
6	Preacher Curl	1		
7	Adjustable benches	2		
8	Decline AB bench	1		
9	Chin/Dip assist machine (selectroized)	1		
10	7' Olympic power bars	5		
11	Bumper plates 45# (items 11-14 = one full set)	2		
12	Bumper plates 35# (items 11-14 = one full set)	2		
13	Bumper plates 25# (items 11-14 = one full set)	2		
14	Bumper plates 10# (items 11-14 = one full set)	2		

Quoter Name:			
Guorei Name.			

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<u>Item</u>	<u>Description</u>	<u>Qty</u>	<u>Price</u>	Extended Price		
The	squat racks, leg cher curl);					
Ite	Items #15-21 – request rubber coated plates or urethane coated plates with handles – no hex shape.					
15	45# rubber grip plates	28				
16	35# rubber grip plates	8				
17	25# rubber grip plates	14				
18	10# rubber grip plates	14				
19	5# rubber grip plates	14				
20	2.5# rubber grip plates	10				
21	Less Discount / Adjustment	1				
22	Freight Charges	1				
23	Installation	1				
24	Lead Time – ARO	weeks				
25	Installation – ARO	days				
GRAND TOTAL (items #1 through #23)						

Quoter Name:			
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COMPANY NAME:		
AUTHORIZED SIGNATURE:		
	DATE	
(Print Name & Title of Signer)		
COMPANY ADDRESS:		
E-MAIL ADDRESS:		
TELEPHONE:	FAX:	
FEIN#.:		
BUSINESS LICENSE NUMBER:		
NUMBER OF YEARS COMPANY HAS BEEN IN	BUSINESS:	
Acknowledge Addendum No. Dated:		