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| A picture containing text, coin  Description automatically generated | **State of South Carolina**    **Request for Proposal**  **AMENDMENT 4** | | | Solicitation:  Date Issued:  Procurement Officer:  Phone:  E-Mail Address:  Mailing Address: | | Project J12-9830-SG  9/8/2023  BRANDALYN BREWER  803.898.8486  brandalyn.brewer@SCDMH.ORG  SC Dept. of Mental Health  SCDMH Procurement Office  PO Box 485  Columbia SC 29202 |
| DESCRIPTION:  **CFSH Psychiatric Residential Treatment Facility** | | | | | | | |
| USING GOVERNMENTAL UNIT:  **SC Department of Mental Health** | | | | | | | |
| *The Term "Offer" Means Your "Bid" or "Proposal".  Your offer must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior. See "Submitting Your Paper Offer or Modification" provision* | | | | | | | |
| SUBMIT YOUR SEALED OFFER TO EITHER OF THE FOLLOWING ADDRESSES: | | | | | | |
| MAILING ADDRESS:            SC Dept. of Mental Health            SCDMH Procurement Office            PO Box 485            Columbia SC 29202 | | | PHYSICAL ADDRESS:            SC Dept. of Mental Health            SCDMH Procurement Office            2414 Bull Street, Room 106            Columbia SC 29201 | | | |
| SUBMIT YOUR OFFER ON-LINE AT THE FOLLOWING URL: <http://www.procurement.sc.gov> | | | | | | |
| SUBMIT OFFER BY (Opening Date/Time): **09/18/2023 11:00 A.M.** (See "Deadline For Submission Of Offer" provision) | | | | | | | |
| QUESTIONS MUST BE RECEIVED BY: (See "Questions From Offerors" provision) | | | | | | | |
| NUMBER OF COPIES TO BE SUBMITTED: **Six (6) Hard Original copies and four (4) Electronic on USB** **that includes One (1) Redacted Copy Initial here if NO redacted copy is necessary**\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
| CONFERENCE TYPE: **Not Applicable**  DATE & TIME:    (As appropriate, see "Conferences - Pre-Bid/Proposal" & "Site Visit" provisions) | | | | | LOCATION: **Not Applicable** | |
| AWARD & AMENDMENTS | | Award will be posted on **11/1/2023**. The award, this solicitation, any amendments, and any related notices will be posted at the following web address: http://www.procurement.sc.gov | | | | |
| You must submit a signed copy of this form with Your Offer. By signing, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of forty-five (45) calendar days after the Opening Date. (See "Signing Your Offer" provision.) | | | | | | |
| NAME OF OFFEROR      (full legal name of business submitting the offer) | | | Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc. | | | |
| AUTHORIZED SIGNATURE    (Person must be authorized to submit binding offer to contract on behalf of Offeror.) | | | DATE SIGNED | | | |
| TITLE    (business title of person signing above) | | | STATE VENDOR NO.    (Register to Obtain S.C. Vendor No. at www.procurement.sc.gov) | | | |
| PRINTED NAME    (printed name of person signing above) | | | STATE OF INCORPORATION    (If you are a corporation, identify the state of incorporation.) | | | |
| OFFEROR'S TYPE OF ENTITY: (Check one) (See "Signing Your Offer" provision.)    \_\_\_ Sole Proprietorship \_\_\_ Partnership \_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_ Corporate entity (not tax-exempt) \_\_\_ Corporation (tax-exempt) \_\_\_ Government entity (federal, state, or local) | | | | | | |

COVER PAGE - ON-LINE ONLY (MAR. 2015)

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**PAGE TWO**

**(Return Page Two with Your Offer)**

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| HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business) | | | | | | NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)            \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Area Code - Number - Extension Facsimile    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address | | | | | |
| PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)            \_\_\_\_Payment Address same as Home Office Address  \_\_\_\_Payment Address same as Notice Address **(check only one)** | | | | | | ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)            \_\_\_\_Order Address same as Home Office Address  \_\_\_\_Order Address same as Notice Address **(check only one)** | | | | | |
| ACKNOWLEDGMENT OF AMENDMENTS  Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision) | | | | | | | | | | | |
| Amendment No. | Amendment Issue Date | | Amendment No. | Amendment Issue Date | | Amendment No. | | Amendment Issue Date | Amendment No. | | Amendment Issue Date |
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| DISCOUNT FOR PROMPT PAYMENT  (See "Discount for Prompt Payment" clause) | | 10 Calendar Days (%) | | | 20 Calendar Days (%) | | 30 Calendar Days (%) | | | \_\_\_\_\_Calendar Days (%) | |
| PREFERENCES - A NOTICE TO VENDORS (SEP. 2009): On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at www.procurement.sc.gov/preferences .  ***ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT.* VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU'VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES.**  [11-35-1524(E)(4)&(6)] PREFERENCES DO NOT APPLY | | | | | | | | | | | |

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| PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE: Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C)(1)(i)&(ii)) or the Resident Contractor Preference (11-35-1524(C)(1)(iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)).  PREFERENCES DO NOT APPLY  \_\_\_\_In-State Office Address same as Home Office Address \_\_\_\_In-State Office Address same as Notice Address **(check only one)** | | | | | | |
| PAGE TWO (SEP 2009) | |  | End of PAGE TWO |  |  |  |

**AMENDMENTS TO SOLICITATION (JAN 2004)**

The Solicitation may be amended at any time prior to opening. All actual and prospective Offerors should monitor the following web site for the issuance of Amendments: [www.procurement.sc.gov](http://www.procurement.sc.gov/) (b) Offerors shall acknowledge receipt of any amendment to this solicitation (1) by signing and returning the amendment, (2) by identifying the amendment number and date in the space provided for this purpose on Page Two, (3) by letter, or (4) by submitting a bid that indicates in some way that the bidder received the amendment. (c) If this solicitation is amended, then all terms and conditions which are not modified remain unchanged. [02-2A005-1]

**SUBMITTAL DUE DATE HAS BEEN EXTENDED TO: SEPTEMBER 18, 2023 11:00 A.M**