

**ATTACHMENT 1**  
**IFB 1184**

**NYS Office of Children and Family Services  
Commission for the Blind  
Business Enterprise Program**

**Bid Location(s) Included:**

**Sunmount DDSO Location**

NOTE: See **Appendix D** for the complete address(es) of each location.

**BID COMMITMENT**

- Our organization has been providing vending machine services since the following date:

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **(REQUIRED – must have at least 1 year of experience)**  
month    day    year

- Our organization agrees to place required machines at the locations specified in IFB **Section I.2 “Location”** (also Appendix D) either on the contract start date, or within 5 business days of contract approval by the NYS Office of the State Comptroller (OSC), whichever is later.

\_\_\_\_\_ **(REQUIRED – must provide initials to confirm your agreement)**  
initials

- Please indicate the **percentage of Net Sales** (Net Sales being defined as Total Sales minus bottle deposit minus sales tax) per month you will pay for IFB 1184 Automatic Vending Machine Services, and sign below:

\_\_\_\_\_ % per month for 60 months **(REQUIRED – must be 20% or greater)**

**NOTE: The award of a contract pursuant to this IFB will be made to an eligible, responsive, and responsible bidder based on the highest bid amount as outlined in Section IV “Selection Criteria / Award of Contract” which meets or exceeds the minimum acceptable bid rate. See IFB Section I “Information for Prospective Bidders” sub-section #3 entitled “Minimum Bid Requirement and Eligibility Criteria” for additional information.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Fax #

**Non-Collusive Bidding Certification:**

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of his/her knowledge and belief:

- (1) The monthly percentage amount in this bid has been arrived at independently without collusion, consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such percentage amount with any other bidder or with any competitor;
- (2) Unless otherwise required by law, the monthly percentage amount quoted in this bid has not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor;
- (3) No attempt has been made or will be made by the bidder to induce any other person, partnership, or corporation to submit or not to submit a bid for the purpose of restricting competition.

**Policy on Sexual Harassment Prevention/Training Certification:**

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies its own organization, under penalty of perjury, that the bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy shall, at a minimum, meet the requirements of section two hundred one-g of the labor law. Please note that a bid will not be considered for award, nor will any award be made to a bidder who is not able to make this certification in compliance with State Finance Law section 139-l; provided, however, that if the bidder cannot make the foregoing certification, such bidder shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons therein.

\_\_\_\_\_  
Signature of Individual authorized to bind the Bidder contractually

\_\_\_\_\_  
Date

**Note:** *This sheet must be completed, signed, dated, and returned with your bid proposal.*

**BID PROPOSALS MUST BE RECEIVED NO LATER THAN  
THE DATE/TIME SET FORTH IN THE CALENDAR OF EVENTS.  
ALL BIDS MUST MEET OR EXCEED THE MINIMAL ACCEPTABLE BID RATE.  
OFFERERS ASSUME ALL RISKS FOR TIMELY, PROPERLY SUBMITTED BIDS.  
PLEASE REMEMBER TO INCLUDE YOUR REFERENCES IN YOUR SUBMISSION.**