



Department of Purchasing & Contract Compliance

Felicia Strong-Whitaker, Interim Director

REQUEST FOR PROJECT NUMBER: 89036A-CC		
PROJECT TITLE: FRESH Grant Summer Camp Program		
DUE DATE: Wednesday, July 3, 2013		
WILL BE RECEIVED UNTIL: 2:00 P.M. EASTERN STANDARD TIME		
BIDDERS MAY SUBMIT REQUESTS FOR CLARIFICATION OR QUESTIONS REGARDING THIS QUOTE TO THE CONTACT PERON LISTED BELOW. ANY REQUEST SHALL ONLY BE SUBMITTED BY FAX OR EMAIL. ALL RESPONSES TO WRITTEN REQUEST(S) WILL BE DISTRIBUTED AS ADDENDA TO THIS QUOTE AND POSTED ON THE FULTON COUNTY WEBSITE AT www.fultoncountyga.gov .		
THE COUNTY WILL NOT RESPOND TO REQUESTS RECEIVED AFTER <i>Wednesday, JULY 3, 2013 AT 2:00 P.M.</i>		
CONTACT NAME: Thomas Capitano	E-MAIL ADDRESS: Thomas.capitano@fultoncountyga.go v	FAX NUMBER: 404-893-1725
All information requested on this sheet must be completed. Unless specifications indicate "NO SUBSTITUTE", items determined by Fulton County to be "EQUAL OR BETTER" will be given full consideration. All prices QUOTED must be "FOB DELIVERED" unless otherwise requested, and must be submitted in the format requested. The County reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the County.		

**FRESH Grant Summer Program Services
Housing and Human Services Department**

1. DESCRIPTION

The Fulton County Department of Purchasing & Contract Compliance is soliciting quotes from qualified vendors to provide FRESH grant Summer Program services for the Housing and Humans Services Department.

2. CONTACT PERSON FOR BID SUBMISSION

Sealed bids for **89036A-CC FRESH Grant Summer Camp Program**, will be accepted by the Fulton County Department of Purchasing & Contract Compliance, 130 Peachtree Street, SW, Suite 1168, Atlanta, Georgia 30303-3459, on **Wednesday, July 3, 2013**. All bids submitted must be sealed, and received no later than 2:00 p.m. local (Eastern) time via E-mail: cheryl.cochran@fultoncountyga.gov or Fax: (404) 893-1723.

3. TERM OF AGREEMENT

July 1, 2013 through June 30, 2014

4. PRODUCT/SERVICE SPECIFICATIONS

Successful vendor shall provide the following FRESH grant services for the Summer Camp Program

SUMMER PROGRAM

Vendor /agency shall provide a Summer Camp Program that serves a total of 28 elementary, middle and high school age students through nature based outdoor activities that increase a child’s awareness of nature and their natural surroundings while fostering greater self-confidence, self-esteem and independence.

5. PRICING SHEETS

<i>Item No.</i>	<i>Item Description</i>	<i>Estimated Quantity</i>	<i>Unit of Issue</i>	<i>Unit price (\$)</i>
1	Summer Program	28	Cost per person	

6. SPECIAL CONDITIONS/INSTRUCTIONS

Vendor /agency shall answer the following questions in 3 or less pages when they reply to the quote. Vendor should also submit a copy of their Homeland Security E-Verify MOU, a copy of their Georgia Security and Immigration Contractor Affidavit and (if applicable) a copy of their Georgia Security and Immigration Subcontractor Affidavit.

Vendor shall list program services and activities that will address the requested Scopes of Services being sought (include number of Fulton County Commission District 3 youth to benefit from this service).

All potential vendors shall answer the following questions in order to validate that they have experience:

- 1) What is the official and legal name of your agency (as stated on Agency's Seal or Charter)?
- 2) What is the year of your agency's 501(c)3 incorporation?
- 3) Describe the purpose of your agency in 75 words or less.
- 4) Describe the services that your agency provides.
- 5) Please describe past or present program outcome success rate (s) for the program in which you are seeking funding to support. Be sure to indicate the number of total program participants and how they benefited from the program.

Vendor shall provide services for Summer Program from July1, 2013 thru August 30, 2013,

Camp hours shall be Monday-Friday, 8am-6:15pm.

7. INSURANCE & RISK MANAGEMENT PROVISIONS

Provide a copy of your current certificate of insurance.