

STATE OF TENNESSEE



TENNESSEE REHABILITATIVE INITIATIVE IN CORRECTION
PURCHASING OFFICE
6185 COCKRILLBEND Circle, NASHVILLE TN 37209
Phone (615)253-4948 615-253-4865 Fax (615)

Bill Haslam
Governor

David Hart
Chief Executive Officer

INVITATION TO BID

BID AMENDED ON 04/18/2017 AT 1:00 PM CST.

04/21/2017 3:00 PM CST

TRICOR-STATE OF TENNESSEE

BID WILL CLOSE: 04/18/2017 3:00 PM CST
Bid will be reviewed on or after bid close date & time.

PURCHASING DEPARTMENT

RETURN BID TO:
Tiffany Sanderson, Senior Buyer
TRICOR PURCHASING DEPT.
6185 Cockrill Bend Circle
NASHVILLE, TN 37209

VENDOR NO: To Be Determined
SOLICITATION NO: 8000907
VENDOR NAME: WEBSITE
LOCATION
CITY STATE AND ZIP
ATTN: CONTACT NAME
DESCRIPTION: FORKLIFT PURCHASES

This is a sealed bid; the bid must arrive before the bid close date in a sealed envelope. Cost information should be in one sealed envelope and technical specifications in a separate envelope. The two envelopes must arrive in one sealed envelope and labeled with the solicitation number. Failure to comply can result in the bid being rejected.

INSTRUCTION TO BIDDERS

- 1. READ THE ENTIRE BID, INCLUDING ALL TERMS, CONDITIONS AND SPECIFICATIONS.
2. BID REQUIRES A MANUALLY SIGNED SIGNATURE.
3. BID PRICES SHALL INCLUDE DELIVERY OF ALL ITEMS F.O.B. DESTINATION OR PROVIDE PRE-PAY AND ADD INFORMATION.
4. AMOUNT OF BID BOND: \$ N/A OR N/A % OF YOUR BID.
5. AMOUNT OF PERFORMANCE BOND: \$ N/A OR N/A% OF THE AWARD.
6. ADDRESS ALL INQUIRIES AND CORRESPONDENCE TO THE BUYER AT THE PHONE AND ADDRESS SHOWN ABOVE.

TO BE COMPETED BY VENDOR

- 7. NO BID AT THIS TIME. PLEASE RETAIN ON BID LIST.
8. DELIVERY WILL BE MADE THIS NUMBER OF DAYS AFTER RECEIPT OF PURCHASE ORDER.
9. % CASH DISCOUNT FOR PROMPT PAYMENT IF MADE WITHIN THIRTY (30) DAYS. PAYMENT TERMS FOR LESS THAN THIRTY (30) DAYS WILL NOT BE CONSIDERED IN EVALUATION PROCESS.
10. BID OFFER EXPIRES IN THIS NUMBER OF DAYS FROM THE BID OPENING, REQUEST (90) DAYS IF POSSIBLE.
11. BID BOND ATTACHED, CERTIFIED CHECK ATTACHED, OTHER, IF REQUIRED.
12. SMALL BUSINESS, WOMAN OWNED BUSINESS, AFRICAN AMERICAN OWNED, HISPANIC OWNED, ASIAN AMERICAN OWNED, NATIVE AMERICAN OWNED (PLEASE SELECT ONE OF THE ABOVE IF APPLICABLE)
13. VENDOR PHONE & FAX NUMBER TITLE DATE