

SUMMARY INFORMATION FORM

THIS PAGE MUST BE SIGNED AND RETURNED WITH BIDDER'S RESPONSE

IFB #: SU-092018	IFB Title: Refuse Services	IFB Release Date: Electronic copies of this IFB are available at: www.purchase.edu/PurchaseMeansBusiness
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Key Events	
Release IFB	Sep 20, 2018
Non-mandatory Pre-Bid Conference and Site Visit	Oct 9, 2018 10:00AM convening at Facilities Management Bldg Conference Room
Questions/Requests for clarification due	Oct 12, 2018 Close of Business Oct 17, 2018
Response to questions/requests for clarifications issued	Oct 15, 2018 Oct 19, 2018
Proposal Due Date and Time	Oct 23, 2018 at 1:00PM Oct 31, 2018 at 1:00PM
Anticipated Notification of Award	Oct 29, 2018 Nov 7, 2018
Anticipated Contract Start Date	First day of the month following approval of the Office of the New York State Comptroller
Anticipated Term Length of Contract	Three (3) years with option to renew for two (2) additional one(1)-year terms

SUNY reserves the right, in its sole discretion, to modify the above schedule. Bidders will be notified via email of any changes in a timely manner

Designated Contact Information		
Primary Contact / Submit Bids to: F. Edward Herran Director of Procurement & Accts Payable SUNY Purchase College 735 Anderson Hill Road Purchase, NY 10577-1402 Telephone: 914-251-6070 Fax: 914-251-6075 Email: Edward.Herran@purchase.edu	Secondary (Technical) Contact: Anthony Latassa Coordinator of Waste Management Facilities Management Group SUNY Purchase College 735 Anderson Hill Road Purchase, NY 10577-1402 Telephone: 914-251-6937 Fax: 914-251-6935 Email: Anthony.Latassa@purchase.edu	Other Contact: Lula Curanovic MWBE Coordinator Purchasing & Accounts Payable Office SUNY Purchase College 735 Anderson Hill Road Purchase, NY 10577-1402 Telephone: 914-251-6088 Fax: 914-251-6075 Email: Lula.Curanovic@purchase.edu

Restricted Period
In accordance with the requirements of New York State Finance Law Sections 139j and 139k ("Lobbying Law"), the restricted period for this procurement is now in effect. Therefore, all communications regarding this procurement must be handled through the State University of New York's designated contacts only.

Bidder Information		
Legal Business Name of Company Bidding:	Bidder's Federal Tax Identification No.:	
D/B/A – Doing Business As (if applicable):	NYS SFS Vendor ID Number:	
Street Address:	City/State:	Zip Code:
If applicable, place an "x" in the appropriate box: <i>(check all that apply)</i>		
<input type="checkbox"/> Small Business (if checked, provide # of employees ____) <input type="checkbox"/> Minority Owned Business (NYS Certified) <input type="checkbox"/> Disabled Veteran Owned Business <input type="checkbox"/> Women Owned Business (NYS Certified)		
If you are not bidding, place an "x" in the box and return this page only. <input type="checkbox"/> We are unable to bid at this time because:		
Bidders Signature:	Title:	
Printed Name:	Date:	
Email Address:		

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By signing this form, bidder acknowledges (a) that the IFB instructions are understood; (b) that the bidder is committed to servicing SUNY's needs in the required time period; and (c) that all information required by this IFB has been included in bidder's bid proposal.