

NOTICE TO BIDDER
(PLEASE USE THE ENCLOSED BID SHEETS)

NOTICE IS HEREBY GIVEN that the Board of County Commissioners of Custer County, Oklahoma will, on January 12, 2015 until the hour of 9:30 o'clock a.m. on said day, in their office in the Courthouse in Arapaho, Oklahoma, receive sealed bids for the following:

**Minimum Specifications For
One or More, New
Spray Injection Patching Unit(s)
Custer County, Oklahoma**

Specifications and information are on the file in the Custer County Clerk's Office in Arapaho, Oklahoma and may be viewed on Custer County's website, <http://custer.okcounties.org>.

All bids must be in a sealed envelope, clearly marked BID, with the BID OPENING DATE.

All bids must be mailed or delivered to:

(Mailing)

CUSTER COUNTY CLERK'S OFFICE
P.O. BOX 300
ARAPAHO, OKLAHOMA 73620-0300

(Physical)

CUSTER COUNTY CLERK'S OFFICE
675 WEST "B" STREET
ARAPAHO, OKLAHOMA 73620-0300

Please follow all instructions for submitting bid proposals completely.

/S/ KAREN FRY, CUSTER COUNTY CLERK
(SEAL)

INSTRUCTIONS FOR SUBMITTING BID PROPOSALS

1. This entire packet (Notice, Instructions, Minimum Specifications and Affidavit for Filing, Affidavit for Contracts and W-9) shall be known as the "Invitation to Bid" form. Fill out the "Invitation to Bid" form *completely*.
2. Identify the outside of the sealed envelope as follows:
SEALED BID
CLOSING (Bid Date)
BID (Opening Time)
3. Place your company name and return address on the outside of the envelope.
4. File the bid proposal with the Custer County Clerk, either by mail or in person, until **9:30 o'clock a.m. on January 12, 2015**. Bids received after this time will be rejected and unopened. All bids will be opened at **9:30 o'clock a.m., January 12, 2015** during the County Commissioner's meeting held in the Custer County Courthouse, Arapaho, Oklahoma, Room 104, at 675 West "B" Street, Arapaho, Oklahoma.
5. All forms must be filled out completely. Any incomplete forms could result in rejection if the Board of County Commissioners considers such action to be in the best interest of Custer County.
6. The address of the Custer County Clerk is as follows:

<i>(Mailing)</i> CUSTER COUNTY CLERK'S OFFICE P.O. BOX 300 ARAPAHO, OKLAHOMA 73620-0300	<i>(Physical)</i> CUSTER COUNTY CLERK'S OFFICE 675 WEST "B" STREET ARAPAHO, OKLAHOMA 73620
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7. All bid information shall be typewritten, or legibly written in ink. All corrections shall be initialed by the person signing the form(s).
8. On all bids requiring services or contract labor, proof of liability insurance may be required. Read the bid specifications carefully.
9. FOR PROMPT PAYMENT OF ALL INVOICES, PLEASE NOTE:
* Payment for maintenance & operational expenses for Custer County is made once a month. Approval of said claims is made on the second Monday of each month. For your claim to be considered for payment, the product(s) or service(s) must be delivered, and the appropriate paperwork on file with the County Clerk's office no later than five working days prior to the second Monday of the month.
* If the proper invoices and supporting documentation are not received by the monthly cut-off date, payment will be rendered during the following month's business.
* Please contact Karen Fry, Custer County Clerk, for a schedule for invoice submission in order to expedite payment processing.
10. If you have any questions regarding the bid specifications, or the bid deadlines, etc., please contact Karen Fry, Custer County Clerk or Debbie Bright, Purchasing Agent at (580) 323-4420.

NOTE: ALL BID PROPOSALS WHICH DO NOT CONTAIN THE "INVITATION TO BID" AND THE SIGNED/NOTARIZED "AFFIDAVIT FOR FILING WITH COMPETITIVE BID", WILL BE INVALID AND REJECTED.

**MINIMUM SPECIFICATIONS
ONE, OR MORE NEW
SPRAY INJECTION PATCHING UNIT(S)
CUSTER COUNTY, OKLAHOMA**

	COMPLY <u>YES/NO</u>
Minimum, Unit shall be chassis mounted, designed to fit 33,000 GVW standard single axle chassis CHASSIS TO BE PROVIDED BY PURCHASER	_____
Horizontal folding forward boom operated from cab	_____
Spray injection design with aggregate supplied from hopper by gravity feed	_____
<u>EMULSION TANK SPECIFICATIONS:</u>	
Tank shall be electric blanket heated with overnight electric heating capability – NO INTERNAL OR EXTERNAL BURNERS OR HEATING PROBES	_____
Tank to be ASME certified with 200 PSI working pressure at 500 degrees	_____
Minimum of 250 gallon capacity	_____
Minimum R15 rated fiberglass insulation	_____
Minimum 12" loading hatch with T-bolt closure	_____
Minimum 3" cleanout valve in bottom of tank	_____
Shall be capable of maintaining heat for operation in ambient low temperature of 5 degree F.	_____
<u>PATCHER FRAME SPECIFICATIONS:</u>	
Minimum construction – 10" gusseted steel channel	_____
Patcher frame to secure to chassis with U bolts	_____
Rear steel fenders shall be included	_____
A directional arrow board shall be mounted at the back of the machine and be selectable for left/right or both traffic control	_____
<u>AGGREGATE FEED/DELIVERY SYSTEM SPECIFICATIONS:</u>	
Patching unit shall use a direct driven high volume low pressure roots type blower to operate the delivery system. NO AUGERS, CONVEYORS, OR ANY OTHER MECHANICAL DEVICES	_____

Must have ability to pass aggregate up to 2 ½" in size without clogging or manual adjustment. Must be capable of reliably delivering 1/4" – 3/8" aggregate within an engine RPM range of 1200 – 1800

Aggregate Hopper shall be 6 yard minimum capacity with minimum 9 ft. x 7 ft. rectangular top opening

Hopper vibrator included and wired to operate from cab

Hopper heater shall be included

Venturi system to draw aggregate into air stream, Must have access panel for servicing

Minimum 3.5" ID schedule 40 pipe 10 ft. in length delivery tube

Aggregate delivery hose shall be minimum 3.5" ID non-kinking, plastic wire reinforced rubber neoprene-lined hose with a minimum length of 164"

A 12 volt pump shall circulate heat transfer oil through a pipe inside the emulsion tank with minimum 3/8" diameter lines the full length of the hose to the emulsion nozzle, then back

An air compressor driven off the engine shall be required to pressurize the emulsion system.

NO PUMPS FOR EMULSION DELIVERY

The emulsion nozzle shall be slotted to create a single fan of emulsion to properly coat aggregate and designed to diffuse/slow down the air stream at the tip to minimize overspray

All parts including emulsion valves, hose and nozzle shall be heated by hot fluid heating system. Nozzle will be low voltage DC heated to prevent material buildup during cold weather operation

Dual slide gates – one for operation and one for service to separate hopper from venturi system shall be air operated with minimum 4" stroke air ram

BLOWER AND COMPRESSOR SPECIFICATIONS:

Blower shall be rated at minimum 450 CFM @ 7psi @1500 RPM

Lobe style blower direct driven off patcher engine

Pop off valve set to 10 psi for protection

Dual state heavy duty filter element on blower intake and air muffler to reduce airflow noise

Air compressor to be 15CFM minimum with pressure relief set to 95psi

PATCHING BOOM SPECIFICATIONS:

Shall be a 4 axis, heavy duty, hydraulically manipulated boom arm assembly _____

Range of motion must allow repair of a minimum of 36" beyond the side of the vehicle on the passenger side and 24" on the driver's side without repositioning the chassis _____

Boom must have a minimum reach of 96" from bumper _____

Nozzle must be vertically adjustable to compensate for vehicle height variations _____

Nozzle must rotate through a 36" radius and 270 degree rotation and vertical range of motion no less than 8" at the nozzle tip _____

Boom must fold against front bumper of chassis and in no way obstruct the driver's vision when locked in the transport position _____

Boom must have stow support for transport to eliminate bushing fatigue at all pivots _____

All pivot points must be able to be greased and replaced _____

Emulsion control valve must be mounted near the emulsion nozzle and all hoses to the tank must be protected in insulated wrap to prevent clogging _____

CONTROL SYSTEM SPECIFICATIONS:

The patching unit control system shall be located in the truck cab and be a modular unit that includes mounting base _____

Console shall be fully adjustable in design with cushioned armrest and operator interface panel located at the operator's fingertips. _____

Console will have 3 easily accessible switches that control the master power, engine kill and pump control _____

All switches are to be illuminated with function _____

A joystick will control all movement of boom and patching operation _____

A fully proportional joystick handle will have momentary buttons for selecting functions including throttle, emulsion flow, vibrator and rock flow _____

Joystick control must be integrated with a programmable controller that monitors joystick positions and all inputs for simplicity in wiring and reliability _____

The system must have safety control protection for all valve functions to prevent inadvertent motion during transport _____

ENGINE SPECIFICATIONS:

Patching unit will be equipped with a water cooled direct injected, diesel engine with spin-on type oil and fuel filters. Rubber isolation engine mounts are required _____

Unit will include a minimum 18 gallon diesel fuel tank _____

Engine will protected with an engine enclosure certified by the manufacturer and shall enclose engine, battery and air compressor _____

Engine enclosure shall be lockable for security and provide noise reduction for operator safety _____

Auto shutdown protection will be provided for alternator and oil pressure coolant temperature. An hour meter and RPM gauge shall be included _____

Engine controller must be accessible without having to open engine cover and contain the hour meter, RPM gauge and shutdown for oil, water and battery _____

Tier IV 1 compliant engine shall be rated at no more than 74HP and able to operate the delivery system to fill a patch with 1/4" aggregate @ 1100 RPM and 1 1/2" aggregate at no more than 1800 RPM _____

CLEANOUT MINIMUM SPECIFICATIONS:

Minimum 13 gallon pressurized vessel shall be included for flushing emulsion lines and nozzle after use. Vessel shall be equipped with a pressure relief valve set at 110PSI _____

A clean out box shall be mounted to the frame of the machine for Ease of flushing emulsion lines and nozzle. No disassembly and soaking of any part of emulsion system shall be necessary. Entire cleanout procedure shall not get emulsion or diesel on operator. _____

PUMP SYSTEMS ARE NOT ACCEPTABLE _____

The patcher unit shall be painted with rust inhibiting paint. _____

The patcher unit shall be equipped with required safety decals And signage _____

WARRANTY:

THE MANUFACTURER SHALL WARRANTY THE EQUIPMENT FOR A PERIOD OF ONE YEAR MINIMUM. ENGINE MUST BE COVERED FOR MAJOR COMPONENTS FOR A PERIOD OF TWO YEARS OR 2000 HOURS, MINIMUM. BIDDER SHALL INCLUDE WARRANTY POLICY WITH BID SUBMITTAL. _____

TOTAL COST FOR UNIT.....\$ _____

State delivery time on completed unit _____

AFFIDAVIT MUST BE SIGNED AND NOTARIZED
S.A. & I. 425 (2000)

AFFIDAVIT FOR FILING WITH COMPETITIVE BID

STATE OF OKLAHOMA)
) SS
COUNTY OF _____)

_____, of lawful age, being first duly sworn,
on oath says, that (s)he is the agent authorized by the bidder to submit the attached bid.
Affiant further states that the bidder has not been a party to any collusion among bidders in
restraint of freedom of competition by agreement to bid at a fixed price or to refrain from
bidding; or with any county official or employee as to quantity, quality or price in the
prospective contract, or any other terms of said prospective contract; or in any discussions
between bidders and any county official concerning exchange of money or other thing of value
for special consideration in the letting of a contract.

VENDOR: _____
SIGNATURE: _____
TITLE: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE: _____
FAX: _____
EMAIL: _____

Subscribed and sworn to before me this _____, 20__.

Notary Public (Clerk or Judge)

My Commission Expires: _____

(SEAL)

**Note: Each competitive bid submitted to a county, school district or municipality must be
accompanied with the above Affidavit as required by 61 Okla.St.Ann.§138**

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional) Custer County P. O. Box 300 Arapaho, OK 73620
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number										
			-				-			

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number										
			-							

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.