

**Request For Services**  
**For 2015 Holiday Celebration**  
**For**  
**GREENVILLE UTILITIES COMMISSION**

**Of the**  
**City of Greenville, North Carolina**

**401 South Greene Street**  
**Greenville, North Carolina 27834**

**Issue Date January 8, 2015**

**Response Due Date, January 16, 2015 by 4:00 pm (EDST)**

### **Purpose Of Request For Services**

Greenville Utilities Commission (GUC) is seeking written proposals/services for their 2015 Holiday Celebration.

Questions regarding this request for services should be directed to Teresa Wall, Administrative Assistant HR at 252-329-2180, walltd@guc.com, Cleve Haddock at (252) 551-1533, [haddocgc@guc.com](mailto:haddocgc@guc.com).

**The proposal should contain, at a minimum, recommended services that can meet the specifications required as stated in: (GUC) Specifications For 2015 Holiday Celebration Criteria.**

### **GOOD FAITH STATEMENT:**

All information provided by GUC in this Request For Services is offered in good faith. Individual item(s) are subject to change at any time. GUC makes no certification that any item(s) are without error. GUC is not responsible or liable for any use of the information or for any asserted claims.

### **PROPOSAL FORMAT:**

Written or an MS Excel document is the preferred format for the proposal.

### **PROPOSAL DEADLINE:**

Proposals, subject to the conditions made a part hereof, will be received in the Office of the Purchasing Department, Buyer II, Greenville Utilities Commission, 401 S. Greene Street, Greenville, North Carolina 27834 until 4:00 pm (EDST) on January 16, 2015.

### **PREPARATION OF PROPOSAL:**

Proposals must be in envelopes clearly marked on the outside with the name of the proposal and the proposal due date and time. Proposals shall be addressed to: GREENVILLE UTILITIES COMMISSION, 401 S. GREENE STREET, GREENVILLE, NORTH CAROLINA 27834, ATTENTION: PURCHASING DEPARTMENT, CLEVE HADDOCK, BUYER II.

### **EVALUATION AND AWARD:**

Proposals will be evaluated by GUC personnel. Selected Proposers may be requested to present formal presentations/demonstrations on site on a date and time mutually agreeable by both parties. GUC reserves the right to inspect, at a reasonable time, the facilities of a prospective Proposer.

[Balance of page left blank intentionally]

### **EVALUATION CRITERIA:**

Proposer selection shall be based on evaluation and rating of Proposer's demonstrated competence and qualifications/performance for the type of services/products to be offered. The following guidelines will be used as minimum criteria for rating the Proposer:

- Quality of approach and methodology that demonstrates an understanding of the requirements.
- Quality, extent and relevance of Proposer's staff / experience in conducting service(s).
- Location and facilities attributes.
- Overall cost

GUC reserves the right to reject all proposals or accept such proposals, as appears in its own best interest, and to waive technicalities or irregularities of any kind in the proposal. GUC is not obligated to accept the lowest cost proposal. If a proposal is to be awarded, it will be awarded to the responsible, responsive respondent whose evaluation by GUC indicates that the award will be in GUC's best interests.

### **MINORITY BUSINESS PARTICIPATION PROGRAM:**

GUC has adopted an Affirmative Action and Minority and Women Business Enterprise Plan (M/WBE) Program. Firms submitting a proposal are attesting that they also have taken affirmative action to ensure equality of opportunity in all aspects of employment, and to utilize M/WBE suppliers of materials and/or labor.

[Balance of page left blank intentionally]

**These Forms Must be Completed, Signed and Returned With The**  
**Respondents Proposal.**

**BUSINESS STATEMENT**

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

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

---

---

Contact Person's Name: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

---

---

Business License No.: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Federal ID No. or Social Security No.: \_\_\_\_\_

---

---

**Type of Organization:** (Check all that apply)

- ☐ Corporation, under the laws of the State of \_\_\_\_\_
- ☐ Individual
- ☐ Joint Venture
- ☐ Municipal, State, or Federal
- ☐ S Corporation
- ☐ General Partnership
- ☐ Limited Partnership
- ☐ Non-Profit Corporation
- ☐ Small Business Enterprise: A business enterprise that is independently owned and operated; organized for profit; is not dominant in its field; and meets the criteria set forth by the Small Business Administration in Title 13, Code of Federal Regulations, Part 121.
- ☐ Limited Liability Company, Manager Managed ☐ or Member Managed ☐

### **PROPOSER PROFILE QUESTIONNAIRE**

<b>Question</b>	<b>Answer</b>
Organization name and location?	
What is your organizations primary business?	
Is your organization a subsidiary to a larger parent company? If so, whom?	
Length of time your organization has been in business providing this type of services/products?	
Organization ownership?	
Number of employees: <ul style="list-style-type: none"><li>• Total</li><li>• Development</li><li>• Product Support</li><li>• Professional Services</li></ul>	

[Balance of page left blank intentionally]

## **TERMS AND CONDITIONS**

GUC reserves the right to reject all proposals or accept such proposals, as appears in its own best interest, and to waive technicalities or irregularities of any kind in the proposal. GUC is not obligated to accept the lowest cost proposal.

### **CONFLICT OF INTEREST:**

In general, conflicts of interest relate to the potential for self-gain usually, but not always, of a fiscal nature. Potential for self-gain can serve to undermine the judgment or objectivity of Proposers providing consultation services. A potential or actual conflict of interest exists when commitments and obligations to GUC are likely to be compromised by a Proposer's other interests or commitments, especially economic, particularly if those interests or commitments are not disclosed. Not all conflicting interests are necessarily impermissible. Timely and complete disclosure of potential conflicts of interest may be a satisfactory remedy and protects the consultant from suspicion and accusations of breach of professional integrity. Proposers are asked to disclose any situation or relationship that might be regarded as potential conflict of interest with, but not limited to, their expected duties and recommendations as defined in this RFP.

### **PROPOSER INCURRED COSTS:**

All costs that may be incurred to prepare proposals, attend meetings, attend site inspections, provide requested follow-up information, make formal and informal presentations, and for the entire contract negotiations process if applicable, shall be the sole responsibility of each Proposer. GUC is not responsible under any circumstances for reimbursement of any costs that may be incurred by Proposers during the proposal preparation, subsequent selection or negotiation stages.

### **MINORITY BUSINESS PARTICIPATION PROGRAM:**

GUC has adopted an Affirmative Action and Minority and Women Business Enterprise Plan (M/WBE) Program. Firms submitting a proposal are attesting that they also have taken affirmative action to ensure equality of opportunity in all aspects of employment, and to utilize M/WBE suppliers of materials and/or labor.

### **PROPOSAL WITHDRAWAL:**

A proposer must notify GUC in writing of its request to withdraw a proposal within seventy-two (72) hours after the proposal opening, not including Saturdays, Sundays, or holidays. In order to justify withdrawal, the bidder must demonstrate that a substantial error exists and that the proposal was submitted in good faith.

### **AFFIRMATIVE ACTION:**

The Provider will take affirmative action in complying with all Federal and State requirements concerning fair employment and employment of the handicapped, and concerning the treatment of all employees, without discrimination by reason of race, color, religion, sex, national origin, or physical handicap.

### **MEDIATION/BINDING ARBITRATION:**

In the event of any dispute between the Parties, the Parties agree to submit any dispute to nonbinding mediation before a mutually agreeable Mediator prior to initiating litigation. If the Parties are unable to agree upon a Mediator within thirty (30) days after demand therefore, either Party may petition a Court of competent jurisdiction for the designation of a qualified

Mediator for these purposes. Each Party shall bear its own costs and expenses of participating in the mediation (including, without limitation, reasonable attorneys' fees), and each Party shall bear one-half (1/2) of the costs and expenses of the Mediator. Unless otherwise agreed, the Parties will hold the mediation in Greenville, North Carolina. The matters discussed or revealed in the mediation session shall not be disclosed in any subsequent litigation. In the event the matter is not resolved in mediation, either Party may request arbitration. The parties shall jointly select an Arbitrator, and shall be bound by the decision of the Arbitrator with respect to any dispute between the parties with respect to this Agreement. If the parties are unable to mutually agree upon an Arbitrator, the Parties shall each select an Arbitrator, and the two Arbitrators so selected shall select a third Arbitrator, and the decision of the majority of the Arbitrators shall be conclusive and binding upon the Parties. The Parties at all times agree to equally split the costs of any Arbitrator(s) selected in an effort to resolve the dispute between the Parties. Any party desiring to resolve a dispute under the terms of this Agreement shall notify the other Party in writing, and the Parties shall seek to agree upon a mutually agreed upon Arbitrator within a period of ten (10) days from the date of such written demand. If the Parties are unable to agree within such ten (10) day period, the Parties shall each select an Arbitrator, and the two (2) Arbitrators so selected shall select a third Arbitrator within fifteen (15) days from the date of the written demand for arbitration, and a decision shall be rendered by the Arbitrator(s) so selected within five (5) days after such Arbitrator(s) is selected.

**INDEMNITY PROVISION:**

Provider agrees to indemnify and save GREENVILLE UTILITIES COMMISSION of the City of Greenville, Pitt County, North Carolina, and the City of Greenville, North Carolina, its co-owners, joint venturers, agents, employees, and insurance carriers harmless from any and all losses, claims, actions, costs, expenses including reasonable attorney fees, judgments, subrogations, or other damages resulting from injury to any person (including injury resulting in death), or damage (including loss or destruction) to property of whatsoever nature of any person arising out of or incident to the performance of the terms of this Contract by Provider, including, but not limited to, Provider's employees, agents, subcontractors, and others designated by Provider to perform work or services in, about, or attendant to, the work and services under the terms of this Contract. Provider shall not be held responsible for any losses, expenses, claims, subrogations, actions, costs, judgments, or other damages, directly, solely, and proximately caused by the negligence of Greenville Utilities Commission of the City of Greenville, Pitt County, North Carolina. Insurance covering this indemnity agreement by the Provider in favor of Greenville Utilities Commission of the City of Greenville, Pitt County, North Carolina, shall be provided by Provider.

**GOVERNING LAWS:**

All contracts, transactions, agreements, etc., are made under and shall be governed by and construed in accordance with the laws of the State of North Carolina.

**ADMINISTRATIVE CODE:**

Bids, proposals, and awards are subject to applicable provisions of the North Carolina Administrative Code.

[Balance of page left blank intentionally]

## **GREENVILLE UTILITIES COMMISSION**

### **SPECIFICATIONS FOR 2015 HOLIDAY CELEBRATION CRITERIA**

1. All alcohol, food and beverage stations must be served from within event space.
2. Facility to be fully decorated for the holidays (trees, wreaths, lights, tablescapes, etc).
3. Room for coat checks, including hangers and identification numbers.
4. Floor plan should be as follows:

Identical layout on each end of event space with respect to bar, beverage station, appetizers, Pasta Demonstration Station, Black Oak Ham Carving Station, Chicken Sliders Station and Mashed Potato Bar.

Layout of 40 tables should be equally divided in facility, no table should be within 5 ½ feet of another table and no tables should be within six foot proximity of the dance floor. Minimum of 35 foot by 25 foot dance floor to be located in the center of the room.

DJ will be located at the end of the dance floor - ample space will need to be allotted for the DJ, equipment and lights.

Sufficient space for photographer to set up for portraits.

Sufficient space for photo booth to be set up for guest use.

5. Two private cash bars should be set up, one at each end of the facility with two bartenders per bar (already said this)
6. Adequate, well-lit parking.
7. Appropriate/comfortable room temperature throughout venue.
8. Water available at the beverage stations
9. Date and time of event/services requested: **December 11, 2015, 6:30 pm to 10:30 pm**

### **SUBMIT COST PROPOSALS ON ATTACHED**



<b>FOOD</b>	<b>QUANTITY</b>	<b>PRICE</b>	<b>TOTAL</b>
<p><b>Hot Hors D'oeuvres</b></p> <p><b>Appetizer</b> Fresh Cut Fruit and Cheese &amp; cracker asst.</p> <p>Pasta Demonstration Station – Chicken and shrimp with assorted vegetables and assorted pastas served with alfredo and marinara sauces.</p> <p>Black Oak Ham – Served with Rolls and Condiments</p> <p>Spinach and Cheese Dip – Hot</p> <p>Pita Points – Toasted</p> <p>Chicken Sliders</p> <p>Mashed Potato Bar – Served with condiments</p> <p>Assortment of Mini Sweets</p> <p>Vegetable Display (for 200)</p> <p><b>Cold Hors D'oeuvres</b> <b>Appetizer – Butlered</b> Steamed Shrimp served with Homemade Cocktail Sauce – priced 2 per person</p>	400		

<b>HOSTED BEVERAGES</b>	<b>QUANTITY</b>	<b>PRICE</b>	<b>TOTAL</b>
Tea (by the gallon)	10		
Coffee (by the gallon)	10		
Soft drinks (by the 2 liter) – based on consumption			
<b>CASH BEVERAGES</b>	<b>QUANTITY</b>	<b>PRICE</b>	<b>TOTAL</b>
Beer - Domestic			
Beer - Imported			
Wine (by the glass)			
Cocktails – Well brands			

Cocktails – Call brands			
Cocktails – Premium brands			
<b>TAKE OUT PLATES (Available by designated time – 6:45 pm)</b>	<b>QUANTITY</b>	<b>PRICE</b>	<b>TOTAL</b>
For staff working	12		

<b>SET UP/SERVICE</b>	<b>QUANTITY</b>	<b>PRICE</b>	<b>TOTAL</b>
Set up and décor Fully decorated for Holiday Season, including wreaths, Christmas trees, white lights around serving tables and throughout the floorplan			
60 inch round tables with 10 chairs to each table (tables not to be positioned within 5 1/2 feet of another table) , includes napkins, floor length white linen; fork and knife pocket and center piece (mirror, hurricane globe and candle), red/green napkins under each centerpiece /alternating), and holiday wreaths around globes	40		
Cabernet Tables – floor length white linen with tables scattered throughout the room	8		
Attendant fees – for carving stations and for pasta stations (3 attendants)	6		
Butler Service – white glove service for Shrimp	3		
Parking Attendants – to direct guests to park for event	2		
Door greeters – open facility doors for arriving guests	2		
AV Equipment – Cordless microphone	1		
Bar Set- up fee – fee to set-up private cash bar with bartenders	4		
Registration table –6 foot table side by side white floor length linen with white lights	2		
Chairs for registration table	6		

[Balance of page left blank intentionally]

<b>ESTIMATED CHARGES (Actual Charges Presented At Conclusion of Event)</b>					
	<b>Charges</b>	<b>Service Charge (%)</b>	<b>Subtotal</b>	<b>Sales Tax</b>	<b>Total</b>
Facility Rental					
Food					
Beverage					
Set-Up					
Grand Totals					

**Complete and Check All Math:** It is the responsibility of the Proposer to extend all prices and supply a total price.

[Balance of page left blank intentionally]

It is certified that this proposal is made in good faith and without collusion or connection with any other person submitting a proposal on these services. It is also certified that this proposal is made in good faith and without collusion or connection with any GUC employee(s).

Certified check or cash for \$\_\_\_\_\_n/a\_\_\_\_\_or bid bond for \$\_\_\_\_\_n/a\_\_\_\_\_attached.

Firm Name \_\_\_\_\_ Phone (\_\_\_\_)\_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State\_\_\_\_\_ Zip Code\_\_\_\_\_

Fax (\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Authorized Official \_\_\_\_\_ Title \_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Signature Date \_\_\_\_\_

**Your proposal should be received no later than  
January 16, 2015 at 4:00 pm (EDST).**

[Balance of page left blank intentionally]