



Offer and Acceptance

Solicitation No.: ADSP014-00003936

Description: Building and Plumbing Materials - Statewide

State of Arizona
State Procurement Office
100 N. 15th Ave, Suite 201
Phoenix, AZ 85007

OFFER

TO THE STATE OF ARIZONA:

The Undersigned hereby offers and agrees to furnish the material, service or construction in compliance with all terms, conditions, specifications and amendments in the Solicitation and any written exceptions in the offer. Signature also certifies Small Business status.

Intermountain Lock & Security Supply

Company Name

5620 S 32nd St.

Address

Phoenix

City

AZ

State

85040

Zip

dan.bleasdale@IMLSS.com

Contact Email Address

Signature of Person Authorized to Sign Offer

Dan Bleasdale

Printed Name

Account Manager

Title

Phone:

602-438-6068

Fax:

602-438-0396

By signature in the Offer section above, the Offeror certifies:

1. The submission of the Offer did not involve collusion or other anticompetitive practices.
2. The Offeror shall not discriminate against any employee or applicant for employment in violation of Federal Executive Order 11246, State Executive Order 2009-09 or A.R.S. §§ 41-1461 through 1465.
3. The Offeror has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted offer. Failure to provide a valid signature affirming the stipulations required by this clause shall result in rejection of the offer. Signing the offer with a false statement shall void the offer, any resulting contract and may be subject to legal remedies provided by law.
4. The Offeror certifies that the above referenced organization ___ IS/ ___ IS NOT a small business with less than 100 employees or has gross revenues of \$4 million or less.

ACCEPTANCE OF OFFER

The Offer is hereby accepted.

The Contractor is now bound to sell the materials or services listed by the attached contract and based upon the solicitation, including all terms, conditions, specifications, amendments, etc., and the Contractor's Offer as accepted by the State.

This Contract shall henceforth be referred to as Contract No. _____.

The effective date of the Contract shall be: _____.

The Contractor has been cautioned not to commence any billable work or to provide any material or service under this contract until Contractor receives purchase order, contract release document or written notice to proceed.

State of Arizona

Awarded this

_____ day of _____

20 _____

Procurement Officer



Attachment I

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Questionnaire

Offeror shall provide the following information:

Delivery:

Delivery for in-stock items 3 days ARO

Delivery for non-stock items 50 days ARO

Prompt Payment Terms _____

Purchases of the requested Building and/or Plumbing Materials will be made as needed in varying quantities during the contract period. Vendors shall take this into consideration and provide below the minimum quantities of assorted items and/or minimum quantities of one item for freight prepaid delivery or provide the dollar amount required to qualify for pre-paid delivery.

Amount for Pre-Paid Delivery _____

Identification of Taxes: Sales Tax Percent: _____% (See Uniform Instructions to Offerors, paragraph 3.8)

Ordering Capabilities: The Offeror shall indicate their ability to provide the following ordering methods:

Indicate Yes / No	<u>P-Card</u>	<u>Purchase Order</u>	<u>Phone</u>	<u>Electronic through Vendor Website</u>	<u>Electronic through Procure AZ</u>
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Customer Service Information:

Telephone ordering Support: Toll-Free Number _____ or telephone to accept collect calls: _____

Primary Representative:

Secondary Representative

Name: Dan Bleasdale	Name: Al Schmuki
Telephone Number: 602-438-6068	Telephone Number: 602-438-6038
E-mail Address: dan.bleasdale@IMLSS.com	E-mail Address: al.schmuki@IMLSS.com

Additional Discounts Offered: Offeror shall list any additional discounts being offered (see paragraph 4.3 of the Scope of Work)

Education Discount _____%

Single Bulk Purchase Discount _____% please describe minimum requirements of discount _____

Purchasing Card Discount _____%

Other Discounts: Offeror shall list any other additional discounts being offered: _____

Price Lists/Catalogs:

URL of website based catalog or Website: www.IMLSS@.com

Electronic (PDF or Excel Document Attached with offer in ProcureAZ)

Hardcopy Available

Authorized Dealers, Distributors and/or Manufacturers: The Offeror shall indicate their status and ability to provide the offered items:

NO, The Offeror is not an authorized distributor of offered items.

YES, The Offeror is an authorized distributor of offered items.

Warranties: Offeror shall list all warranties being offered that exceed standard manufacturer's warranties. _____



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Service Area: The Offeror shall indicate their ability to provide service to the indicated areas.

Place an "X" next to the areas your company can service. It is preferred, but not mandatory that a Contractor service the entire State of Arizona.

Apache County	<input checked="" type="checkbox"/>	Mohave County	<input checked="" type="checkbox"/>	Statewide	<input checked="" type="checkbox"/>
Cochise County	<input checked="" type="checkbox"/>	Navajo County	<input checked="" type="checkbox"/>	Phoenix Metro	<input checked="" type="checkbox"/>
Coconino County	<input checked="" type="checkbox"/>	Pima County	<input checked="" type="checkbox"/>	Miles from Business Location	_____
Gila County	<input checked="" type="checkbox"/>	Pinal County	<input checked="" type="checkbox"/>	Identify Additional Geographic Locations Below (if applicable)	
Graham County	<input checked="" type="checkbox"/>	Santa Cruz County	<input checked="" type="checkbox"/>	_____	_____
Greenlee County	<input checked="" type="checkbox"/>	Yavapai County	<input checked="" type="checkbox"/>	_____	_____
La Paz County	<input checked="" type="checkbox"/>	Yuma County	<input checked="" type="checkbox"/>	_____	_____
Maricopa County	<input checked="" type="checkbox"/>			_____	_____



Attachment II

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Proposed Subcontractor(s)

The Offeror shall indicate all subcontractors that the Offeror will use to perform any portion of this solicitation's Specifications.

- If the Offeror will not subcontract any portion of this solicitation's Specifications and will be performing this solicitation's Specifications entirely with its own employees, then Offeror shall clearly indicate this by checking **NO** in the section below.
- If any subcontractors will be used, the Offeror shall clearly indicate this by checking **Yes** in the section below and follow the instructions contained in that paragraph for identifying all subcontractors.

NO, The above Offeror will not subcontract any portion of performance of any resultant contract under this solicitation.

YES, The above Offeror will use the subcontractor(s) listed below in performance of any resultant contract under this solicitation.

- The Offeror shall list below each subcontractor's name/location, the type of service to be provided, the certifications they possess (copies of all certifications shall be provided as an attachment to the submitted contractor's response) and the amount of time or effort (as a percent of total contract performance) that the subcontractor will perform in relation to total performance of this solicitation's requirements. Additional Pages may be used if necessary.
- The Offeror shall describe the quality assurance measures that the Offeror will use to monitor the subcontractor's performance.
- The State reserves the right to request any additional information deemed necessary about any proposed subcontractors.

Please include all requested information below or attach as separate document

SUBCONTRACTOR INFORMATION

Name/Contact Information	Small Business (Y/N)	Type of Service	%



Attachment III

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Discount Off & Core List Pricing Schedule

Category Discount Off:

***Sub-Category Discount is not required, but may be utilized in addition to category discount off if desired. Sub-Category may be utilized to identify a specific brand name or subcategory. If you need additional room for pricing please attach a separate excel spreadsheet utilizing the below format identifying additional pricing discounts.**

Percentage (%) of discount off Concrete, Cement & Masonry:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Lumber:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Roofing:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Drywall:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Paints:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Windows & Doors:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Fasteners:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Locking Systems & Parts:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
*Percentage (%) of discount off Sub-Category_____:			_____ %
Percentage (%) of discount off Plumbing Tools & Sundries Manufacturers:			
A.O. Smith	_____ %	Haws	_____ %
Acorn	_____ %	Hersey	_____ %
Alsons	_____ %	Huntington Brass	_____ %
American Standard	_____ %	Jay R Smith Manufacturing	_____ %
Ames Fire and Waterworks Co.	_____ %	Jones Stephens	_____ %
Ameteck	_____ %	Kohler	_____ %
Anvil	_____ %	Leonard	_____ %
Apollo	_____ %	Milwaukee Valve	_____ %
Aquapure	_____ %	Moen	_____ %
Arrowhead	_____ %	Mueller	_____ %
ASCO	_____ %	Nibco	_____ %



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Beeco	%	Orbit	%
Bell & Gossett	%	Parker	%
Bemis	%	Pasco	%
Bonney Forge	%	Powers	%
Bradley	%	Precision Plumbing Products	%
Brass Craft	%	Price Pfister	%
Caroma	%	Pro-Flo	%
Cerro	%	Reed	%
Chicago	%	Rheem	%
Clampette	%	Ridgid Kollman	%
Conbraco	%	Sioux Chief	%
Crane/Flowseal/Centerline	%	Sloan	%
Cuno	%	Speakman	%
Delaney	%	Spears	%
Delta	%	Spirax-Sarco	%
Ebco Oasis	%	Symmons	%
Eljer	%	T & S Brass	%
Elkay	%	Taco	%
Elkhart	%	Teel	%
Febco	%	Toto	%
Fernco	%	Victaulic	%
Fiat	%	Watts	%
Fisher	%	Weldbend	%
Fluidmaster	%	Western China	%
Ford Meter Box Co.	%	Wike	%
GA Industries	%	Wilkins	%
General Wire	%	Willoughby	%
Grohe	%	Woodford	%
Grundfos	%	Zoeller	%
Halsey Taylor	%	Zurn	%

Core List Pricing:

Pricing for core items shall be completed by utilizing the provided table below. Attachment III must be attached to Offerors Bid within ProcureAZ in accordance with Uniform Instructions to Offerors. Use of a brand name is for the purpose of describing the standard of quality, performance, and characteristics desired and is not intended to limit or restrict competition. Products substantially equivalent to the brands designated qualify for consideration. If Offeror is proposing an equivalent item this shall be indicated by checking the applicable field provided. Having identified an equivalent product, Offeror shall attach within ProcureAZ, separate documentation verifying brand quality is equivalent to the requested item.

Paint Core List

<u>Item</u>	<u>Mfg Part #</u>	<u>Manufacturer</u>	<u>Unit</u>	<u>Price</u>	<u>Equivalent Item</u>
1 Quart Metal Paint Tray	RM400	Linzer	Each	\$ _____	<input type="checkbox"/>
1" General Masking Tape:	2020	3M	Each	\$ _____	<input type="checkbox"/>
1" Poly/Nylon Paint Brush:	1825-1	Linzer	Each	\$ _____	<input type="checkbox"/>
2" General Masking Tape:	203	3M	Each	\$ _____	<input type="checkbox"/>



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2" Poly/Nylon Paint Brush:	1825-2	Linzer	Each	\$ _____	<input type="checkbox"/>
3" Poly/Nylon Paint Brush:	1825-3	Linzer	Each	\$ _____	<input type="checkbox"/>
9" x 3/4" Pylam Synthetic Lambskin Roller Cover:	RC145-9	Linzer	Each	\$ _____	<input type="checkbox"/>
9" x 3/8" Pylam Synthetic Lambskin Roller Cover:	RC143-9	Linzer	Each	\$ _____	<input type="checkbox"/>
Banner Red Int/Ext Aerosol:	K02108	Krylon	16 OZ	\$ _____	<input type="checkbox"/>
Gloss White Speed Enamel Aerosol:	Z397	Zynolyte	16 OZ	\$ _____	<input type="checkbox"/>
Hydropox #1 Water Reducible High Gloss Styrenated Acrylic Enamel (Please Reference Exhibit 1 for Standards of Quality)	N/A	Various	5 Gallon	\$ _____	<input type="checkbox"/>
Industrial Tough Coat Machinery Lt Gray:	S00326	Krylon	16 OZ	\$ _____	<input type="checkbox"/>
Interior/Exterior Grade 100% Acrylic Flat Paint (Please Reference Exhibit 1 for Standards of Quality)	N/A	Various	5 Gallon	\$ _____	<input type="checkbox"/>
Interior/Exterior Grade 100% Acrylic Gloss Paint	N/A	Various	5 Gallon	\$ _____	<input type="checkbox"/>
Interior/Exterior Grade 100% Acrylic Semi-Gloss Paint (Please Reference Exhibit 1 for Standards of Quality)	N/A	Various	5 Gallon	\$ _____	<input type="checkbox"/>
Light Gray Primer Aerosol:	Z8072	Zynolyte	16 OZ	\$ _____	<input type="checkbox"/>
OSHA Paint Red Aerosol:	K02116	Krylon	16 OZ	\$ _____	<input type="checkbox"/>
OSHA Paint Safety Yellow Aerosol:	K01813	Krylon	16 OZ	\$ _____	<input type="checkbox"/>
Roller Covers 4" x 3/8" Nap:	4EAP038DH	Quali-Tech	2 Pack	\$ _____	<input type="checkbox"/>
Semi Flat Black Int/Ext Aerosol:	K01613	Krylon	16 OZ	\$ _____	<input type="checkbox"/>
SemiGloss White Int/Ext Aerosol:	K01508	Krylon	16 OZ	\$ _____	<input type="checkbox"/>
Stone Gray Int/Ext Aerosol:	K01605	Krylon	16 OZ	\$ _____	<input type="checkbox"/>
Tough Coat Enamel OSHA Black Aerosol:	S01770	Krylon	16 OZ	\$ _____	<input type="checkbox"/>

Building Materials Core List

<u>Item</u>	<u>Mfg Part #</u>	<u>Manufacturer</u>	<u>Unit</u>	<u>Price</u>	<u>Equivalent Item</u>
1/4" x 4 x 8' Fir Plywood Pine	N/A	Various	Each	\$ _____	<input type="checkbox"/>
1/2" x 4 x 8' Sheetrock	N/A	USG	Each	\$ _____	<input type="checkbox"/>
3/4"x10" Copper Tube	38R50S	Cambridge Lee	Each	\$ _____	<input type="checkbox"/>
1 x 2 x 8' Kiln-Dried Douglas-Fir Larch Eazed Edge	N/A	Various	Each	\$ _____	<input type="checkbox"/>
12THHN Standard Wire White 500'	22965858	Southwire	Each	\$ _____	<input type="checkbox"/>
2 1/2" x 8' Metal Stud 20ga	250S8.0-030	Universal	Each	\$ _____	<input type="checkbox"/>
2 x 4 x 10 #2 Kiln-Dried Douglas-Fir S4S	N/A	Various	Each	\$ _____	<input type="checkbox"/>
2 x 4 x 8' Kiln-Dried Hem-Fir	N/A	Various	Each	\$ _____	<input type="checkbox"/>
2' x 4' x 5/8" Radar White Ceiling Tile	2310	USG	Each	\$ _____	<input type="checkbox"/>
2" x 2" x 96" Kiln-Dried Douglas-Fir Stud	N/A	Various	Each	\$ _____	<input type="checkbox"/>
24" x 48" x 5/8" Ceiling Tile	793	Armstrong	Each	\$ _____	<input type="checkbox"/>
3/8"x50' Copper Tube	34L10	Cambridge Lee	Each	\$ _____	<input type="checkbox"/>
40# Concrete Mix	1101	Quikrete	Each	\$ _____	<input type="checkbox"/>
40# Mortar Mix	1102	Quikrete	Each	\$ _____	<input type="checkbox"/>
60# Concrete Mix	1101	Quikrete	Each	\$ _____	<input type="checkbox"/>
8" x 4" x 16" Cinder Block	30163700	Superlite	Each	\$ _____	<input type="checkbox"/>
8" x 6" x 16" Cinder Block	30163765	Superlite	Each	\$ _____	<input type="checkbox"/>



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8" x 8" x 16" Cinder Block	30163807	Superlite	Each	\$ _____	<input type="checkbox"/>
8" x 8" x 8" Cinder Block	30163871	Superlite	Each	\$ _____	<input type="checkbox"/>
80# Concrete Mix	1101	Quikrete	Each	\$ _____	<input type="checkbox"/>
80# Mason Mix Type S	1136	Quikrete	Each	\$ _____	<input type="checkbox"/>
Slip-Lok Tee Nozzle 3/8"	10121W	Orbit	Each	\$ _____	<input type="checkbox"/>
Z-MAX Galvanized 18-Gauge Hurricane Tie	H2.5AZ	Simpson Strong-Tie	Each	\$ _____	<input type="checkbox"/>

Locking Systems and Parts Core List

<u>Item</u>	<u>Mfg Part #</u>	<u>Manufacturer</u>	<u>Unit</u>	<u>Price</u>	<u>Equivalent Item</u>
Key Blank Everest-D, DND, Emboss ED	35-002 D145	Schlage	Each	\$ _____	<input type="checkbox"/>
Key Blank Everest-D, DND, Emboss ED	35-002 D135	Schlage	Each	\$ _____	<input type="checkbox"/>
Key Blank Everest-D, DND, Emboss ED	35-002 D150	Schlage	Each	\$ _____	<input type="checkbox"/>
Key Blank Primus/Everest Standard Emboss	35-004-LVL9 D145	Schlage	Each	\$ _____	<input type="checkbox"/>
Key Blank Primus/Everest Standard Emboss	35-004-LVL9 D150	Schlage	Each	\$ _____	<input type="checkbox"/>
Soft Lock Pad 1-1/2 W 3/4T D 1S	A1105BRN	American Lock	Each	\$ _____	<input type="checkbox"/>
Soft Lock Pad 1-1/2W 3/4T D 1-1	A1106BRN	American Lock	Each	\$ _____	<input type="checkbox"/>
Aluminum Heavy Duty, Surf, MT, Extra Duty Sprayed Aluminum Arm Closer	4041 EDA-AL	LCN	Each	\$ _____	<input type="checkbox"/>
Aluminum TBMS Heavy Duty Surf, Delay, Reg Arm w/p, Sprayed Aluminum Closer	4041 RW/PA DEL	LCN	Each	\$ _____	<input type="checkbox"/>
Tamper-Proof Key Ring 2" Diameter	270	Key Systems, Inc.	Each	\$ _____	<input type="checkbox"/>
Tamper-Proof Key Ring 1-5/8" Diameter	278	Key Systems, Inc.	Each	\$ _____	<input type="checkbox"/>
Best Big Bow Coined w/o keyway Blank Key	1A1J1-NS-BB	Jet Hardware	Each	\$ _____	<input type="checkbox"/>
#2 Master Pins	34-202	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#4 Master Pins	34-204	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#6 Master Pins	34-206	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#0 Bottom Pins	34-300	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#1 Bottom Pins	34-301	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#3 Bottom Pins	34-303	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#5 Bottom Pins	34-305	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#7 Bottom Pins	34-307	Schlage	100/pk	\$ _____	<input type="checkbox"/>
#3 Top Pins	34-103	Schlage	100/pk	\$ _____	<input type="checkbox"/>
Hub Spring (J Lever Only)	97-0566	Sargent	Each	\$ _____	<input type="checkbox"/>
5" Corrections Handcuff Key	ZT70B	Zak Tool	Each	\$ _____	<input type="checkbox"/>
Flat Grip Handcuff Key	ZT25	Zak Tool	Each	\$ _____	<input type="checkbox"/>
7 Pin SFIC Core	IC7B J 26D	General Lock	Each	\$ _____	<input type="checkbox"/>
Restricted Tumbler	AK6WR2BOX	American Lock	Each	\$ _____	<input type="checkbox"/>
Combolock with Key Override	1525LH V643	Master Lock	Each	\$ _____	<input type="checkbox"/>

Plumbing Parts and Supplies

<u>Item</u>	<u>Mfg Part #</u>	<u>Manufacturer</u>	<u>Unit</u>	<u>Price</u>	<u>Equivalent Item</u>
.5 gpm Flow Control	0469-005-000	Acorn	Each	\$ _____	<input type="checkbox"/>



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1/4" O.D. Poly Tubing	44-2029-1	Jones Stephens	Foot	\$ _____	<input type="checkbox"/>
1/2" Copper 90 Elbow	10031272	Elkhart	Each	\$ _____	<input type="checkbox"/>
1/2" Copper Pipe Strap	10032416	Elkhart	Each	\$ _____	<input type="checkbox"/>
1/2" Copper Pipe Type L	N/A	Streamline	Foot	\$ _____	<input type="checkbox"/>
1/2" Copper Street 90 Elbow	10031460	Elkhart	Each	\$ _____	<input type="checkbox"/>
1/2" Copper X MIP Adapter	10030310	Elkhart	Each	\$ _____	<input type="checkbox"/>
3/4" Copper Coupling	10030898	Elkhart	Each	\$ _____	<input type="checkbox"/>
3/4" Copper Pipe Strap	10032420	Elkhart	Each	\$ _____	<input type="checkbox"/>
3/4" Copper Pipe Type L	N/A	Streamline	Foot	\$ _____	<input type="checkbox"/>
3/4" Copper X MIP Adapter	10030330	Elkhart	Each	\$ _____	<input type="checkbox"/>
1 1/2 Poly Slip Joint Washer	T180-150	Jones Stephens	Each	\$ _____	<input type="checkbox"/>
1 1/2 Standard Slip Joint Washer	T79-150	Jones Stephens	Each	\$ _____	<input type="checkbox"/>
1 1/2" Copper Pipe Type L	N/A	Streamline	Foot	\$ _____	<input type="checkbox"/>
1 1/2" x 1 1/2" Rubber Closet Spud Gasket	2088	Pasco	Each	\$ _____	<input type="checkbox"/>
1.6 gpf Closet Kit	A41A	Sloan	Each	\$ _____	<input type="checkbox"/>
1.6c Master Repair Kit Closet	R1004A	Sloan	Each	\$ _____	<input type="checkbox"/>
10/32" MIP x .0625 Barb Fitting	600480	Willoughby	Each	\$ _____	<input type="checkbox"/>
3.5 gpf Closet Kit	A38A	Sloan	Each	\$ _____	<input type="checkbox"/>
Cover Packing	F28G	Delany	Each	\$ _____	<input type="checkbox"/>
Handle Seal	B39	Sloan	Each	\$ _____	<input type="checkbox"/>
Renewal Closet Kit	F141KC	Delany	Each	\$ _____	<input type="checkbox"/>
Repair Kit 24V Mod Plug	MCR1001A	Sloan	Each	\$ _____	<input type="checkbox"/>
Reseal Kit for 600276 Cartridge	600103	Willoughby	Each	\$ _____	<input type="checkbox"/>
Royal Vacuum Breaker Kit	V651A	Sloan	Each	\$ _____	<input type="checkbox"/>
Vacuum Breaker Repair Kit	V551A	Sloan	Each	\$ _____	<input type="checkbox"/>
Water Diaphragm	2563-010-001	Acorn	Each	\$ _____	<input type="checkbox"/>



Addition to Attachment III

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LIST OF MANUFACTURERS FOR LOCKING SYSTEMS AND PARTS

Manufacturer	Discount
Arrow	55/40 parts
Corbin Russwin	60/40 parts
Stanley/Best	53.45/53.45 parts
Von Duprin	50 /50 parts
LCN	50/50 parts
Pemko	55/55 parts
Falcon	53/53 PARTS
Rockwood	55/40 parts
Altronix	52.5/52.5
HES	55 /55 parts
Securitron	55 /55 parts
Lab	15% off dealer price list
Schlage Electronics Ad Series Off Line	55/40 parts
Schlage Mechanical	55/55 parts



Solicitation Amendment No. 2

Solicitation No.: ADSPO14-00003936
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AZ DEPT. OF ADMINISTRATION
STATE PROCUREMENT OFFICE
100 N. 15TH AVE., STE. 201
Phoenix, AZ 85007

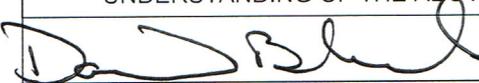
Pursuant to the Uniform Instructions to Offerors, Item 2.6, Solicitation Amendments, the above referenced Solicitation shall be amended as follows:

1. Specifications Section 3.4 Installation Pricing(Optional), shall be added and shall read as follows:
 - 3.4 *Installation Pricing (Optional)*: Please provide a description and cost of installation services in reference to products offered that you are able to provide to requesting Eligible Agencies.
2. Special Terms and Conditions Section 3.6, *Installation Pricing (Optional)*, shall be added and shall read as follows:
 - 3.6 *Installation Pricing (Optional)*: Hourly rate indicated in ProcureAZ, shall be for installation services provided in Offerors attached installation excel document.
3. Special Instructions to Offerors Section 4.4, *Installation Pricing (Optional)*, shall be added and shall read as follows:
 - 4.4 *Installation Pricing (Optional)*: Please provide a description and cost of any installation services in reference to products offered that you are able to provide to requesting Eligible Agencies by attaching a separate excel document within ProcureAZ that identifies and describes the installation services being offered. Enter the hourly installation rate for any installation services being offered within ProcureAZ Line Item 10.
If the offer does not include installation services the Offeror shall indicate "No Bid" in ProcureAZ Line Item 10.
4. ProcureAZ Line Item 10 shall be added allowing Offeror to submit hourly installation rate.
5. Solicitation has been extended as indicated in the general tab of ProcureAZ.

ALL OTHER PROVISIONS OF THE CONTRACT SHALL REMAIN IN THEIR ENTIRETY.

CONTRACTOR HEREBY ACKNOWLEDGES RECEIPT AND UNDERSTANDING OF THE ABOVE AMENDMENT.

THE ABOVE REFERENCED CONTRACT AMENDMENT IS HEREBY EXECUTED THIS DATE BY THE STATE.

 June 6, 2014

 05/30/2014

SIGNATURE

DATE

SIGNATURE

DATE

Dan Bleasdale

Account Manager

PRINTED/TYPED NAME AND TITLE

Jennifer Wenger
Senior Procurement Officer



Solicitation Amendment No. 3

AZ DEPT. OF ADMINISTRATION
STATE PROCUREMENT OFFICE
100 N. 15TH AVE., STE. 201
Phoenix, AZ 85007

Solicitation No.: ADSPO14-00003936
Building and Plumbing Materials - Statewide

Pursuant to the Uniform Instructions to Offerors, Item 2.6, Solicitation Amendments, the above referenced Solicitation shall be amended as follows:

1. The Pre-Offer Conference was held May 29, 2014 and the Sign-in sheet has been uploaded to the solicitation and is located in the attachments tab.

ALL OTHER PROVISIONS OF THE SOLICITATION SHALL REMAIN IN THEIR ENTIRETY.

CONTRACTOR HEREBY ACKNOWLEDGES RECEIPT AND UNDERSTANDING OF THE ABOVE AMENDMENT.

THE ABOVE REFERENCED SOLICITATION AMENDMENT IS HEREBY EXECUTED THIS DATE BY THE STATE.

June 6, 2014

06/02/2014

SIGNATURE

DATE

SIGNATURE

DATE

Dan Bleasdale

Account Manager

PRINTED/TYPED NAME AND TITLE

Jennifer Wenger
Senior Procurement Officer

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) INTERMOUNTAIN LOCK & SECURITY SUPPLY		
	Business name/disregarded entity name, if different from above		
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input checked="" 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.) 3106 S MAIN ST.	Requester's name and address (optional)	
	City, state, and ZIP code SALT LAKE CITY UT 84115	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									

Employer identification number									
8	7	-	0	2	8	3	1	9	0

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

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below), and
4. 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 ▶ <u>June 4, 2014</u>
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General Instructions

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

Future developments. The IRS has created a page on www.irs.gov/w9 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:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. 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

4. 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.