REQUEST FOR PROPOSALS

Notice is hereby given that the City of Biloxi, Mississippi, will receive sealed proposals at City Hall, Second floor, Mayor’s Office, until 10:00 a.m. on the 1st day of December, 2021, for the following:

**OVERHEAD DOOR MAINTENANCE & REPAIR**

**CITY OF BILOXI, MISSISSIPPI**

Specifications are available on-line at [www.biloxiplans.com](http://www.biloxiplans.com) and in the Purchasing Office, City Hall, 140 Lameuse Street, Biloxi, Mississippi (228-435-6252).

Proposals will be rated on the following system to determine best bid received: Proposed Costs of Maintenance Services (35%); Proposed Hourly Rate Schedule (35%); and any other factors or criteria that the City deems appropriate for evaluation in the circumstances (30%), including but not limited to, prior performance for the City, response time, additional education/certifications, and experience.

The City of Biloxi reserves the right to reject any and all proposals and to waive any informality in the proposal subjected. The City of Biloxi is an equal opportunity employer.

PROPOSALS SHALL BE DELIVERED TO THE MAYOR’S OFFICE, SECOND FLOOR, CITY HALL BUILDING, 140 LAMEUSE STREET, BILOXI, MISSISSIPPI 39530 OR ELECTRONICALLY SUBMITTED AT WWW.BILOXIPLANS.COM.

Proposals must meet all criteria established in the Requirements and Specifications (available at [www.biloxiplans.com](http://www.biloxiplans.com)). All proposals shall be plainly marked “OVERHEAD DOOR MAINTENANCE AND REPAIR” on the sealed envelope, which should also list all applicable state and local license numbers. All proposals should be delivered to the Mayor’s Office, second floor City Hall, 140 Lameuse Street, Biloxi, Mississippi 39530.

Proposals must be received before 10:00 a.m. December 1, 2021. The selection committee will review each proposal and select a qualified firm to begin negotiation of a contract. Performance is intended to begin in January 2022.

Published by the order of the Municipal Clerk, this the 20th day of October, 2021.

SEAL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MUNICIPAL CLERK

SEND PROOF OF PUBLICATION:

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