



October 22, 2020

## **NOTICE TO DEALERS IN FOODS - DAIRY PRODUCTS:**

### **DUE DATE & WHERE**

Sealed, signed bids are invited and will be received by the City of Jackson, Mississippi, until 3:30 P.M. in the City Clerk's Office of Jackson, the bid must be stamped in by 3:30 P.M. Tuesday November 10, 2020, at which time said bids will be publicly opened at the City Hall located at 219 South President Street in City Hall for the following:

12-Month Supply of Foods – Dairy Products – Group IV

See attached Specifications/Descriptions

### **SPECIFICATION QUESTIONS**

For additional information regarding specifications, contact: Lender Monson Manager, Early Childhood Development Division, Department of Human and Cultural Services, (601) 960-0347.

### **EBO REQUIRED**

*The City of Jackson is committed to the principle of non-discrimination in Public Purchasing. It is the policy of the City of Jackson to promote full and equal business opportunities for all persons doing business with the City. As a pre-condition to selection, each contractor, bidder or offer shall submit a completed and signed Equal Business Opportunity (EBO) Plan Application, with each bid submission, in accordance with the provisions set forth by authority of the City of Jackson's EBO Ordinance. Failure to comply with the City's EBO Ordinance shall disqualify a contractor, bidder or offer, from being awarded an eligible contract. For more information on the City EBO Program, please contact the Office of Economic Development at 960-1638. Copies of the EBO Ordinance, EBO Plan Application and a copy of the EBO Program are available with the Office of Economic Development at 218 South President Street, Second Floor, and Jackson, Mississippi.*

### **BID PACKAGE REQUEST**

Bid Package with specifications may be secured from the City of Jackson website at [www.jacksonms.gov](http://www.jacksonms.gov), or the Purchasing Division located in the Warren Hood Building, 200 South President Street, Room 604, Jackson, MS 39201, and Phone No. (601) 960-1025., Official bid document can be downloaded from Central Bidding at [www.centralbidding.com/bids](http://www.centralbidding.com/bids) are also available at [www.centralbidding.com](http://www.centralbidding.com) or for assist call 225-810-4814.

### **SUBMITTING OF A BID**

1. You are required to send One (1) original and two (2) copies of all information being submitted, this includes your Proposal Form, completed EBO Application and any information you submit with your bid (research data sheets, booklets, pamphlets, etc.) or your bid may be considered non-responsive. Your bottom line price must be submitted on the form provided by the City when noted unless otherwise instructed, unless otherwise instructed.
2. The complete proposal pricing section must be returned if you submit a bid, and any required/mandatory documents. (Example: Bids having more than one bid section, parts, pages or a check list.

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### **SUBMITTING OF A BID**

1. You are required to send One (1) original and two (2) copies of all information being submitted, this includes your Proposal Form, completed EBO Application and any information you submit with your bid (research data sheets, booklets, pamphlets, etc.) or your bid may be considered non-responsive. Your bottom line price must be submitted on the form provided by the City when noted unless otherwise instructed, unless otherwise instructed.
2. The complete proposal pricing section must be returned if you submit a bid, and any required/mandatory documents. (Example: Bids having more than one bid section, parts, pages or a check list.

3. The instruction and specification sections should not be returned with your Bid Proposal Forms, they are yours to keep.
4. Proposal Forms must be legibly handwritten or it must be typed, if not, they will be considered non-responsive. Errors or corrections must be crossed out and changes must be printed in ink or typewritten. All changes must be initialed in ink by the person signing the bid.
5. The unit price will always govern in determining the extended price or the total price. Therefore, please review your price carefully before submitting your bid. No bid shall be altered or amended after the specified time for bid opening or once delivered.
6. Manufacturer name and model must be stated when required for each item. Any item without this information may not be considered.

#### **ALTERNATIVE BIDS OR NOTES**

7. Do not submit prices for more than one product, or the same product per item. This means only one product, one size, and price per bid form as specified in the package.
8. Alternate bids are not acceptable, unless submitted in a separate sealed routing envelope, and in no way concealed in a delivery envelope. Alternate bids may be submitted but not necessarily acceptable by the City. The City reserves the right to determine whether an alternative being offered is equivalent to and meets the standard or the specifications. All bids submitted must be on the bid proposal forms furnished by the City, otherwise it will not be considered.
9. Any bid received with limiting or conditional requirements will automatically be deemed non-responsive.  
Examples:
  1. All or none.
  2. All items must be ordered at the same time.
  3. Specified amount to be ordered.
  4. No notation or other packaging pricing below the submitted price.
10. Bid openings will be conducted and open to the public. However, note, they will serve only for the opening, and reading of the bid price and in no way considered an award.

#### **WHERE TO SEND BID**

11. Please submit one (1) original signed bid and two (2) copies, in a sealed envelope addressed to: City Clerk's Office of Jackson, P.O. Box 17, Jackson, MS 39205 or hand deliver to the City Clerk's Office of Jackson, 219 South President Street, Jackson, MS 39201 until 3:30 p.m. using the above address.
12. **ONLY ONE (1) COMPLETE BID SUBMISSION ALLOWED PER DELIVERY ENVELOPE, with the required complete Bid Number and a returnable address on the outside of that delivery envelope. If more than one completed bid proposal is submitted per a delivery envelope, it will not be accepted as an official bid.**
13. Facsimile transmitted bids or other documents are not acceptable.
14. All one-time bid awards must be valid for a minimum of 60 days from bid opening date. All term bids must be valid for the duration of the terms defined in the proposal for each particular bid. Vendors may not withdraw a bid prior to the end of the 60 days, or the stated terms of said bid. Vendors who do not comply with this requirement shall be considered non-responsive.

### **EMPLOYEE BIDDING**

15. Bidding by City employees is prohibited. It is hereby declared unlawful for any city official to bid on, or sell, or offer for sale, any merchandise services, equipment or material, or similar commodity to the City of Jackson during the tenure of his or her employment, or for the period prescribed by law thereafter, or to have any interest in the selling of the same to the City of Jackson. (§ 25-4-105) (Miss Code 1972 as amended).

### **SUBMITTING A NO BID**

16. To submit a no bid, SEND ONE (1) proposal form. Write no bid on the form, your Company name / address, sign and Note on the outside of the envelope the Bid Number and "NO BID". This must be received the same time as if you were submitting a regular bid to be recorded.

### **CITY OF JACKSON RIGHTS**

17. The City of Jackson reserves the right to waive any general condition, special conditions or minor specification deviation when considered to be in the best interest of the City of Jackson, so long as such waiver is not given so as to deliberately favor any single vendor and would have the same effect on all vendors.

The City reserves the right to reject any and all bids. The City also reserves the right to waive any and all informalities in respect to any bid submitted. Bid awards will be made to the lowest and best bidder quoting the lowest net price in accordance with specifications. The award could be according to lowest cost per item; or to the lowest total cost for all items; or to accept all or part of any proposal. **Delivery time may be considered when evaluating the bid proposal.** In those cases where it is known prior to advertising that the City's intention is to award according to the lowest total cost for all items, or in some variation thereof, statements to this affect will be included on the proposal form. Absence of such statements means the City will make that determination during the bid tabulation.

### **VENDOR BID AGREEMENT**

The vendor shall be responsible for all fees or claims for any patent invention used and shall defend any suit that may be brought against the City. Also, the vendor shall hold said City harmless for use or infringement of any patent or method used in connection with any article, equipment, material, commodity, device or thing furnished or constructed hereunder.

By signing this bid proposal the vendor agrees to hold the submitted bid price firm for the term of the bid stated. Also, the vendor understands the estimated quantity stated and amount to be ordered may be over or below the estimated usage stated in the bid. This is not in any way a guaranteed amount to be ordered. A Purchase Order will be issued by the Purchasing Division for the requested quantity to be ordered from the using Department.

The vendor agrees they have asset to the product in which they are submitting the bid on. The Company shall adhere to the delivery time stated in the specifications and the date/time they have stated in the bid, if so awarded. The vendor should note the material or commodity is required as soon as possible after receipt of any order, unless otherwise noted.

The vendor should understand their failure to stand behind the agreement could cause a statement of failure to perform being placed in the company file and the company being placed on hold with the City of Jackson or the agreement of award being canceled. By signing the bid, you understand and agree to all the terms of the bid.

**DELIVERY & OTHER COST**

This order is to be delivered F.O.B., prepaid and allowed, Jackson, Mississippi, within the number of days stated after receipt of our purchase order. "Note all cost must be included in the bid price." No additional cost can be attached to a bid order.

**TAXES**

SALES TAX AND FEDERAL EXCISE TAX ARE NOT TO BE INCLUDED IN ANY BID PRICE. **THE CITY OF JACKSON ASSUMES NO TAX LIABILITY.**

CITY OF JACKSON, MISSISSIPPI

Destiney Williams, Purchasing Manager  
Purchasing Division

DW/mo.  
38517

CITY OF JACKSON, MISSISSIPPI  
PROPOSAL FORM

**PLEASE RETURN THIS SECTION IN ITS ENTIRETY**

**NOTICE TO BIDDERS:**

**FOR DELIVERY OR MAILING INSTRUCTIONS:**

1. Submit one (1) original and two (2) copies of your Bid Package.
2. MAILING ADDRESS: City Clerk's Office of Jackson  
Post Office Box 17  
Jackson, MS 39205
3. DELIVERY ADDRESS: City Clerk's Office of Jackson  
219 South President Street  
Jackson, MS 39201
4. CENTRAL BIDDING [www.centralbidding.com](http://www.centralbidding.com)
5. Note the following on the outside of your envelope: "Bid No. 38517-111020 to be opened November 10, 2020"

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In accordance with your Notice of October 22 & 29, 2020 bid as follows:  
Twelve-Month Supply of Foods – Dairy Products – Group IV

Term: November 2, 2020 through October 30, 2021

| COMPANY NAME _____ |                                                |                      |                                                                                                                             |
|--------------------|------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------|
| <u>ITEM</u>        | <u>DESCRIPTION</u>                             |                      | <u>PRICE</u><br>Per lowest common<br>unit of pricing – "Same<br>As" not accepted (must<br>include pricing for each<br>item) |
| <b>1.</b>          | <b>Sliced American Yellow Cheese, Real</b>     |                      | \$ _____                                                                                                                    |
|                    | Est. usage during term:                        | <u>10 bx</u>         | _____                                                                                                                       |
|                    | No. of units per case:                         | <u>4</u>             | _____                                                                                                                       |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>5 lb</u>          | _____                                                                                                                       |
|                    | Brand quoting on:                              |                      | _____                                                                                                                       |
|                    | Grade (if applicable):                         | <u>USDA Approved</u> | _____                                                                                                                       |
| <b>2.</b>          | <b>Cubed Cheese</b>                            |                      | \$ _____                                                                                                                    |
|                    | Est. usage during term:                        | <u>4</u>             | _____                                                                                                                       |
|                    | No. of units per case:                         | <u>2</u>             | _____                                                                                                                       |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>5 lb</u>          | _____                                                                                                                       |
|                    | Brand quoting on:                              |                      | _____                                                                                                                       |
|                    | Grade (if applicable):                         |                      | _____                                                                                                                       |

| COMPANY NAME _____ |                                                |                      |                                                                                                                         |
|--------------------|------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------|
| <u>ITEM</u>        | <u>DESCRIPTION</u>                             |                      | <u>PRICE</u><br>Per lowest common<br>Unit of pricing. "Same As"<br>not accepted (must include<br>pricing for each item) |
| 3.                 | Cubed Cheese                                   |                      | \$ _____                                                                                                                |
|                    | Est. usage during term:                        | <u>4</u>             | _____                                                                                                                   |
|                    | No. of units per case:                         | <u>3</u>             | _____                                                                                                                   |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>5 lb</u>          | _____                                                                                                                   |
|                    | Brand quoting on:                              |                      | _____                                                                                                                   |
|                    | Grade (if applicable):                         |                      | _____                                                                                                                   |
| 4.                 | Margarine, Solid, All Vegetable                |                      | \$ _____                                                                                                                |
|                    | Est. usage during term:                        | <u>10 cs</u>         | _____                                                                                                                   |
|                    | No. of units per case:                         | <u>30</u>            | _____                                                                                                                   |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>1 lb</u>          | _____                                                                                                                   |
|                    | Brand quoting on:                              |                      | _____                                                                                                                   |
|                    | Grade (if applicable):                         | <u>USDA Approved</u> | _____                                                                                                                   |
| 5.                 | N/A                                            |                      |                                                                                                                         |
|                    |                                                |                      |                                                                                                                         |
|                    |                                                |                      |                                                                                                                         |
|                    |                                                |                      |                                                                                                                         |
|                    |                                                |                      |                                                                                                                         |
|                    |                                                |                      | _____                                                                                                                   |
| 6.                 | N/A                                            |                      | \$ _____                                                                                                                |
|                    |                                                |                      |                                                                                                                         |
|                    |                                                |                      | _____                                                                                                                   |
|                    |                                                |                      | _____                                                                                                                   |
|                    |                                                |                      | _____                                                                                                                   |
|                    |                                                |                      | _____                                                                                                                   |

| COMPANY NAME _____ |                                                |                |                                                                                                                         |
|--------------------|------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------|
| <u>ITEM</u>        | <u>DESCRIPTION</u>                             |                | <u>PRICE</u><br>Per lowest common<br>Unit of pricing. "Same As"<br>not accepted (must include<br>pricing for each item) |
| 7.                 | N/A                                            |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
| 8.                 | Soy Milk                                       |                | \$ _____                                                                                                                |
|                    | Est. usage during term:                        | <u>7 cs</u>    | _____                                                                                                                   |
|                    | No. of units per case:                         | <u>12</u>      | _____                                                                                                                   |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>32 oz</u>   | _____                                                                                                                   |
|                    | Brand quoting on:                              |                | _____                                                                                                                   |
|                    | Grade (if applicable):                         |                | _____                                                                                                                   |
| 9.                 | Cream Cheese                                   |                | \$ _____                                                                                                                |
|                    | Est. usage during term:                        | <u>3</u>       | _____                                                                                                                   |
|                    | No. of units per case:                         | <u>10</u>      | _____                                                                                                                   |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>3 lbs</u>   | _____                                                                                                                   |
|                    | Brand quoting on:                              |                | _____                                                                                                                   |
|                    | Grade (if applicable):                         | <u>Grade A</u> | _____                                                                                                                   |
| 10.                | N/A                                            |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |
|                    |                                                |                |                                                                                                                         |

| COMPANY NAME _____ |                                                |                |                                                                                                                                     |
|--------------------|------------------------------------------------|----------------|-------------------------------------------------------------------------------------------------------------------------------------|
| <u>ITEM</u>        | <u>DESCRIPTION</u>                             |                | <u>PRICE</u><br>Per lowest common<br>Unit of pricing. "Same As"<br>not accepted (must include<br>pricing for each item)<br>\$ _____ |
| <b>11.</b>         | <b>Cool Whip</b>                               |                | \$ _____                                                                                                                            |
|                    | Est. usage during term:                        | <u>10</u>      | _____                                                                                                                               |
|                    | No. of units per case:                         | <u>12</u>      | _____                                                                                                                               |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>16 oz</u>   | _____                                                                                                                               |
|                    | Brand quoting on:                              |                | _____                                                                                                                               |
|                    | Grade (if applicable):                         | <u>Grade A</u> | _____                                                                                                                               |
| <b>12.</b>         | <b>Yogurt, Plain</b>                           |                | \$ _____                                                                                                                            |
|                    | Est. usage during term:                        | <u>20</u>      | _____                                                                                                                               |
|                    | No. of units per case:                         | <u>48</u>      | _____                                                                                                                               |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>4 oz</u>    | _____                                                                                                                               |
|                    | Brand quoting on:                              |                | _____                                                                                                                               |
|                    | Grade (if applicable):                         | <u>Grade A</u> | _____                                                                                                                               |
| <b>13.</b>         | <b>Yogurt, Strawberry Bash</b>                 |                | \$ _____                                                                                                                            |
|                    | Est. usage during term:                        | <u>15</u>      | _____                                                                                                                               |
|                    | No. of units per case:                         | <u>48</u>      | _____                                                                                                                               |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>4 oz</u>    | _____                                                                                                                               |
|                    | Brand quoting on:                              |                | _____                                                                                                                               |
|                    | Grade (if applicable):                         |                | _____                                                                                                                               |
| <b>14.</b>         | <b>Yogurt, Peach</b>                           |                | \$ _____                                                                                                                            |
|                    | Est. usage during term:                        | <u>15</u>      | _____                                                                                                                               |
|                    | No. of units per case:                         | <u>48</u>      | _____                                                                                                                               |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>4 oz</u>    | _____                                                                                                                               |
|                    | Brand quoting on:                              |                | _____                                                                                                                               |
|                    | Grade (if applicable):                         |                | _____                                                                                                                               |

| COMPANY NAME _____ |                                                |              |                                                                                                                         |
|--------------------|------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------|
| <u>ITEM</u>        | <u>DESCRIPTION</u>                             |              | <u>PRICE</u><br>Per lowest common<br>Unit of pricing. "Same As"<br>not accepted (must include<br>pricing for each item) |
| 15.                | N/A                                            |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
| 16.                | Shredded Cheese                                |              | \$ _____                                                                                                                |
|                    | Est. usage during term:                        |              | _____                                                                                                                   |
|                    | No. of units per case:                         | <u>4</u>     | _____                                                                                                                   |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>5 lbs</u> | _____                                                                                                                   |
|                    | Brand quoting on:                              |              | _____                                                                                                                   |
|                    | Grade (if applicable):                         |              | _____                                                                                                                   |
| 17.                | N/A                                            |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
| 18.                | N/A                                            |              |                                                                                                                         |
|                    |                                                |              |                                                                                                                         |
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|                    |                                                |              |                                                                                                                         |
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|                    |                                                |              |                                                                                                                         |

| COMPANY NAME _____ |                                                |                    |                                                                                                                         |
|--------------------|------------------------------------------------|--------------------|-------------------------------------------------------------------------------------------------------------------------|
| <u>ITEM</u>        | <u>DESCRIPTION</u>                             |                    | <u>PRICE</u><br>Per lowest common<br>Unit of pricing. "Same As"<br>not accepted (must include<br>pricing for each item) |
| 19.                | Eggs                                           |                    | \$ _____                                                                                                                |
|                    | Est. usage during term:                        | <u>Once a week</u> | _____                                                                                                                   |
|                    | No. of units per case:                         | <u>15</u>          | _____                                                                                                                   |
|                    | Unit size (#10 can, 2 lb., gallon, qt., etc.): | <u>30 per flat</u> | _____                                                                                                                   |
|                    | Brand quoting on:                              |                    | _____                                                                                                                   |
|                    | Grade (if applicable):                         |                    | _____                                                                                                                   |

**It is the City's intention to make awards, of this proposal by items except for Dairy Products – Group IV. Awards for Dairy Products – Group IV will be to the "individual low."**

The above will comply with the specifications included in the Notice to Dealers, with any and all exceptions noted in a separate document.

The bid is valid for 60 days after bid opening, to make an award or this bid is good for the term of the bid stated, if a term bid. If bid is good for longer than 60 days for an award then state how long this bid is good for \_\_\_\_\_.

**The above will be delivered F.O.B., prepaid and allowed, Jackson, Mississippi, within \_\_\_\_\_ days after receipt of your purchase order. "Note all cost must be included in the bid price."**

**SALES TAX AND FEDERAL EXCISE TAX ARE NOT TO BE INCLUDED IN ABOVE PRICE.  
THE CITY OF JACKSON ASSUMES NO TAX LIABILITY**

**BID SUBMITTED BY:  
PLEASE TYPE OR PRINT**

**Company Complete Legal Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Physical Address, Principal Place of Business:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Name of Person Submitting Proposal:** \_\_\_\_\_

**Signature of Person Submitting Proposal:** \_\_\_\_\_

**Date:** \_\_\_\_\_, 2020 **E-Mail Address:** \_\_\_\_\_ *(Required)*

**Telephone No.:** \_\_\_\_\_ / \_\_\_\_\_ **Fax No.:** \_\_\_\_\_ / \_\_\_\_\_

**\*\*The (EBO) Application form must be completed by all vendors and returned with ALL bids. The EBO staff is available at (601) 960-1856 to assist you with any questions you may have in preparing the EBO Application.**

**CITY OF JACKSON, MISSISSIPPI**

**Chokwe Antar Lumumba**

**Mayor**

**EQUAL BUSINESS OPPORTUNITY (EBO)  
PLAN APPLICATION**

**Department of Planning and Development**

**CITY OF JACKSON, MISSISSIPPI  
EQUAL BUSINESS OPPORTUNITY EXECUTIVE  
ORDER**

***LEGAL NOTICE***

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The City of Jackson is committed to the principle of non-discrimination in public contracting. It is the policy of the City of Jackson to promote full and equal business opportunity for all persons doing business with the City. As a pre-condition to selection, every contractor, bidder or offeror shall submit a completed and signed Equal Business Opportunity (EBO) Plan Application with the bid submission, in accordance with the provisions of the City of Jackson's Equal Business Opportunity (EBO) Executive Order. Failure to comply with the City's Executive Order shall disqualify a contractor, bidder or offeror from being awarded an eligible contract.

For more information on the City of Jackson's Equal Business Opportunity Program, please contact the Division of Equal Business Opportunity at 960-1856. Copies of the EBO Executive Order EBO Plan Application, EBO Program, the MBE/FBE Directory and the MBE/FBE Certification Affidavit are available at 200 South President Street, Suite 223, Jackson, Mississippi.



(EBO FORM 7-1-2013)

## **EQUAL BUSINESS OPPORTUNITY SPECIAL NOTICE TO BIDDERS**

### **POLICY**

The City of Jackson is committed to the principle of non-discrimination in public contracting. Therefore, the City of Jackson requests that prospective vendors and contractors carefully examine their method of selecting subcontractors and suppliers, to ensure that they are not either actively, or passively, discriminating against MBEs and FBEs. As a bidder seeking to do business with the City of Jackson, you are expected to adhere to a policy of non-discrimination, and to make the maximum practicable effort to ensure that historically underutilized firms are given an opportunity to participate in the performance of contracts financed in whole, or in part, with City funds.

### **DEFINITIONS**

For purposes of this policy, the following definitions will apply:

- (1) **"African American Business Enterprise (AABE)"** shall mean a business that is an independent and continuing enterprise for profit, performing a commercially useful function and is owned and controlled by one or more African Americans, and certified as such by the Division of Business Development.
- (2) **"Asian American Business Enterprise (ABE)"** shall mean a business that is an independent and continuing enterprise for profit, performing a commercially useful function and is owned and controlled by one or more Asian Americans, and certified as such by the Division of Business Development.
- (3) **"Hispanic Business Enterprise (HBE)"** shall mean a business that is an independent and continuing enterprise for profit performing a commercially useful function and is owned and controlled by one or more Hispanics, and certified as such by the Division of Business Development.
- (4) **"Minority Business Enterprise (MBE)"** shall mean a business which is an independent and continuing operation for profit, performing a commercially useful function, and is owned and controlled by one or more minority group members, as defined in Sections 1, 2 and 3, which group has been determined to have suffered discrimination requiring amelioration and is certified as such by the City.
- (5) **"Female Business Enterprise (FBE)"** shall mean a business that is an independent and continuing enterprise for profit, performing a commercially useful function and is owned and controlled by one or more females, and certified as such by the Division of Business Development.

## **OBLIGATION**

*The Contractor and any Subcontractor shall take all necessary and reasonable steps to ensure that MBEs and FBEs have a maximum opportunity to compete for and participate in the performance of any portion of the work included in this contract and shall not discriminate on the basis of race, color, national origin or sex. If it is determined that there is a significant underutilization of MBEs and FBEs, the Equal Business Opportunity Officer is empowered, pursuant to section 127-8 of the Equal Business Opportunity Executive Order, to conduct an investigation to determine the reasons for the underutilization.*

## **GOALS**

The goals for participation by MBEs and FBEs are established by the Equal Business Opportunity Executive Order of the City of Jackson. The Contractor shall exercise all necessary and reasonable steps to ensure that participation meets or exceeds the contract goals. The goals may be attained by subcontracting to, procuring materials from, and renting equipment from MBEs and FBEs. (See Subcontractor/Supplier Participation guidelines below.)

***The Equal Business Opportunity participation goals are as follows:***

| PROCUREMENT CATEGORY              | Asian<br>(ABE) | AfricanAmerican<br>(AABE) | Hispanic<br>(HBE) | Native<br>American<br>(NABE) | Female<br>(FBE) |
|-----------------------------------|----------------|---------------------------|-------------------|------------------------------|-----------------|
| A/E & Professional Services       | 0.16           | 8.67                      | 0.00              | 0.00                         | 1.96            |
| Construction                      | 0.00           | 12.41                     | 0.37              | 0.00                         | 4.89            |
| Goods & Non-Professional Services | 0.04           | 6.78                      | 0.02              | 0.00                         | 3.03            |

Those portions of the contract that are proposed for MBEs and FBEs in the response to this bid shall be listed on the attached Equal Business Opportunity Plan Application.

Contractors may employ AABEs, HBES, ABEs or FBEs to meet the applicable project goals through various methods, as follows:

**A. Subcontractor Participation**

- (i) Where a prime contractor utilizes one or more subcontractors to satisfy its equal business opportunity commitment, the prime contractor may count toward its EBO Plan only expenditures to MBE (AABE, HBE, or ABE) or FBE contractors that perform a commercially useful function in the work of the contract.
- (ii) An MBE or FBE subcontractor is considered to perform a commercially useful function when it is responsible for execution of a distinct element of the work of a contract and carries out its responsibilities by actually performing, managing and supervising the work involved. In determining whether an MBE or FBE subcontractor, is performing a commercially useful function, factors, including but not limited to the following, will be considered:
  - (a) the amount of work subcontracted;
  - (b) the type of prime contract;
  - (c) whether the business has the skill and expertise to perform work for which it is being/has been certified;
  - (d) whether the business actually performs, manages and supervises the work for which it is being/has been certified; and
  - (e) whether the business purchases goods and/or services from a non-minority/women's business enterprise and simply resells goods to the city, city contractor, or other person doing business with the city for the purpose of allowing those goods to be counted towards fulfillment of minority/women's business enterprise utilization goals.
  - (f) standard industry practices.
- (iii) Consistent with standard industry practices, an MBE or FBE subcontractor may enter into second tier subcontracts. If an MBE or FBE subcontractor subcontracts a significantly greater portion of the work of its subcontract to a non-minority, non-female owned firm than would be expected on the basis of standard industry practices, it shall be presumed that the MBE or FBE subcontractor is not performing a commercially useful function.

**B. Suppliers Participation**

Where a prime contractor utilizes one or more suppliers to satisfy its EBO commitment, in whole or in part, the MBE or FBE supplier participation may be credited towards the applicable goal as follows:

- (i) 100 percent of the contract amount for MBE or FBE suppliers who manufacture the goods supplied.
- (ii) 100 percent of the contract amount for MBE and FBE suppliers who are wholesalers warehousing the goods supplied or who are manufacturers' representatives, provided that only 25 percent of the applicable MBE or FBE goal may be attained by non-manufacturing supplier contracts to MBEs or FBEs.

- (iii) For those contracts where an extraordinarily large proportion of the contract price is for equipment or supplies, a lower project goal may be set than otherwise would be required, or the 25 percent limit for suppliers may be increased, or a combination of these two methods may be utilized.

**C. Joint Ventures and Mentor-Protégé Programs**

- (i) The Division of Equal Business Opportunity shall encourage, where economically feasible, establishment of joint ventures and mentor protégé programs to ensure prime contracting opportunities for African American, Hispanic, Asian American, Native American and Female Business Enterprises on all eligible projects over \$1,000,000.00. Even if the prime itself is a MBE, joint venture between prime contractors and MBEs shall be required on all projects exceeding one million dollars (\$1,000,000.00).
- (ii) Where a contractor engages in a joint venture to satisfy its Equal Business Opportunity Commitment, the Equal Business Opportunity Officer shall review and approve all contractual agreements regarding:
  - (a) The initial capital investment of each venture partner;
  - (b) The proportional allocation of profits and losses to each venture partner;
  - (c) The sharing of the right to control the ownership and management of the joint venture;
  - (d) Actual participation of the venture partners in the performance of the contract;
  - (e) The method of and responsibility for accounting;
  - (f) The methods by which disputes are resolved; and
  - (g) Other pertinent factors of the joint venture.

On the basis of these factors, the Equal Business Opportunity Officer shall determine the degree of AABE, HBE, ABE, or FBE participation resulting from the joint venture that may be credited towards the applicable EBO goals of the project.

The bidder or offeror shall provide the Equal Business Opportunity Officer access to review all records pertaining to joint venture agreements before and after the award of a contract reasonably necessary to assess compliance with this policy.

The Equal Business Opportunity Program also encourages Mentor-Protégé programs to assist African American, Hispanic, Asian American, and Female business enterprises in financing, bonding, construction management and technical assistance. Mentor-Protégé agreements will be reviewed by the Equal Business Opportunity Officer for final approval of the following terms of each agreement:

- (a) type of technical assistance to be provided by mentor;
- (b) rights and responsibilities of each mentor and protégé contracting activity;
- (c) the specific duration of the agreement;
- (d) the amount of participation by the protégé that may be credited toward the applicable EBO goal.

## **EQUAL BUSINESS OPPORTUNITY PLAN**

In accordance with Section IV of the City of Jackson's Equal Opportunity Executive Order No. 2014 – 3, each contractor, bidder or offeror shall submit a completed and signed Equal Business Opportunity Plan with bid submission. Such plan should be titled "Equal Business Opportunity Plan (EBO Plan)" and should include the following:

- A. Names, addresses and contact persons of each African American Business Enterprise, Asian Business Enterprise, Hispanic Business Enterprise, and Female Business Enterprise to be used in the contract.
- B. The type of work or service each African American Business Enterprise, Asian Business Enterprise, Hispanic Business Enterprise, and Female Business Enterprise will perform.
- C. The dollar value of the work or service to be performed by each African American Business Enterprise, Asian Business Enterprise, Hispanic Business Enterprise, and Female Business Enterprise.
- D. Scope of the work to be performed by each African American Business Enterprise, Asian Business Enterprise, Hispanic Business Enterprise, and Female Business Enterprise.

### **Waiver**

If the EBO Plan does not meet the project goals, the bidder or offeror must seek a partial or total waiver of the project goals. The application for waiver of all or part of the project goals must include full documentary evidence of the bidder's or offeror's good faith efforts (*see EBO Plan Application*) to meet the project goals and why the request for waiver should be granted. The application shall be in writing and submitted as a part of the bid or offer. It should include a narrative, affidavits and/or exhibits which verify the actions taken by the bidder or offeror to meet the goals.

### **Replacement**

If a MBE/FBE Subcontractor cannot perform satisfactorily, the Contractor shall take all necessary reasonable steps to replace the Subcontractor with another MBE/FBE Contractor. All MBE/FBE replacements must be approved by the EBO Review Committee and the Department. (*See EBO Plan Application*)

To demonstrate necessary reasonable efforts to replace any Subcontractor that is unable to perform successfully, the Contractor must document steps taken to subcontract with another MBE/FBE Contractor.

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**CITY OF JACKSON, MISSISSIPPI**  
**EQUAL BUSINESS OPPORTUNITY PLAN**  
**APPLICATION**

I. Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_  
Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_  
E-mail: \_\_\_\_\_

II. Bid Name and Number: \_\_\_\_\_

III. PROPOSED MINORITY AND/OR FEMALE SUBCONTRACTORS: **(SEE ATTACHMENTS)**

*If a prime contractor utilizes one or more suppliers to satisfy its EBO commitment, all MBE or FBE supplier participation will be credited in accordance to Section VI(C)(I) of the EBO Executive Order No. 2014-3*

IV. Total Bid Amount: \$ \_\_\_\_\_

V. WAIVER REQUESTED ... ☐ (If you fail to meet either or all of the EBO Participation Goals,

*check this box and follow the directions below to provide the required **\*WAIVER STATEMENT\***. The "Waiver Statement" should be submitted on company letterhead to the EBO Officer.)*

**\* The bidder/offeror shall provide the following as evidence of its good faith efforts and will be evaluated on the same:**

- (a) Copies of written notification to MBEs and FBEs soliciting their participation as a subcontractor.
- (b) Evidence of efforts made to divide the work into economically feasible units in order to increase the likelihood of meeting the EBO participation goals.
- (c) Evidence of efforts made to negotiate with MBEs and/or FBEs, including, at a minimum:

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1. The names, addresses, and telephone numbers of the MBE and FBEs who were contacted.
2. A description of the information provided to MBEs and FBEs regarding the plans and specifications for portions of the work to be performed.
3. A statement of reasons why additional agreements with MBEs and FBEs, if needed to meet the stated goals, were not reached.
4. Evidence of efforts made to assist the MBEs and FBEs contacted who need assistance in obtaining bonding and insurance which the bidder or offeror requires.
5. For each MBE and FBE contacted which the bidder or offeror considered to be not qualified, include a written statement of the reasons for the bidder's or offeror's conclusion.
6. Written quotes solicited from all MBEs and FBEs seeking subcontract work with Prime Contractors at the time of the bidding.
7. A statement with supporting documentation and affidavits indicating whether the offeror has used MBEs and/or FBEs as joint venture partners or subcontractors in past or present private sector contracts in Jackson.

*\*If you are unable to locate an MBE/FBE, please contact the Business Development Division at (601) 9601055.*

**VI. Minority and Female Business Enterprise Actual Participation for this Bid/Offer/Proposal:**

*(\* Please list your MBE and FBE Project Participation percentages (%) in the Table below.)*

| PROCUREMENT CATEGORY              | Asian<br>(ABE) | AfricanAmerican<br>(AABE) | Hispanic<br>(HBE) | Native<br>American<br>(NABE) | Female<br>(FBE) |
|-----------------------------------|----------------|---------------------------|-------------------|------------------------------|-----------------|
| A/E & Professional Services       |                |                           |                   |                              |                 |
| Construction                      |                |                           |                   |                              |                 |
| Goods & Non-Professional Services |                |                           |                   |                              |                 |

## **VII. REPLACEMENT OF MBE/FBE**

**If an MBE or FBE is not performing satisfactorily, it is the responsibility of the Prime Contractor to notify the EBO Office immediately both in writing and by phone. All MBE/FBE replacements must be approved by the Equal Business Opportunity Review Committee (EBORC). If these steps are not taken this will result in penalties as outlined in Section XI of the EBO Executive Order No. 2014-3**

## **VIII. CERTIFICATION**

**I certify, under penalties of perjury, that the information contained in this Equal Business Opportunity Plan Application is true and accurate to the best of my knowledge, and that my company fully intends to utilize all MBEs and FBEs listed if awarded the proposed project and/or service and abide by all EBO guidelines.**

\_\_\_\_\_  
*Authorized Signature and Title*

\_\_\_\_\_  
*Date*

**PRINT "AUTHORIZED" NAME HERE:** \_\_\_\_\_

**EQUAL BUSINESS OPPORTUNITY PLAN APPLICATION -- ATTACHMENT**  
**Proposed Minority/Female Business Enterprise Firms**

**Company**

Name: \_\_\_\_\_  
Trade/Business: \_\_\_\_\_

Type

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

**Type Minority Business (MBE/FBE):**

City, State, ZIP: \_\_\_\_\_

\_\_\_\_\_ Female (FBE)

\_\_\_\_\_ African-American (AABE)

\_\_\_\_\_ Asian (ABE)

Contact Person: \_\_\_\_\_

\_\_\_\_\_ Hispanic (HBE)

\_\_\_\_\_ Native American (NABE)

Telephone Number: \_\_\_\_\_

**Type Minority Business (MBE/FBE) Involvement:**

\_\_\_\_\_ Subcontractor

\_\_\_\_\_ Supplier

\_\_\_\_\_ Joint Venture

\_\_\_\_\_ Mentor-Protégé

**Type Work or Service to be Performed:**

\_\_\_\_\_

**Scope of Work to be Performed:**

\_\_\_\_\_

Dollar Value of the Work to Be Performed by the Minority Business (MBE and/or FBE): \$ \_\_\_\_\_

Percentage of MBE and/or FBE Participation: \_\_\_\_\_ %

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**Company**

Name: \_\_\_\_\_  
Trade/Business: \_\_\_\_\_

Type

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

**Type Minority Business (MBE/FBE):**

City, State, ZIP: \_\_\_\_\_

\_\_\_\_\_ Female (FBE)

\_\_\_\_\_ African-American (AABE)

\_\_\_\_\_ Asian (ABE)

Contact Person: \_\_\_\_\_

\_\_\_\_\_ Hispanic (HBE)

\_\_\_\_\_ Native American (NABE)

Telephone Number: \_\_\_\_\_

**Type Minority Business (MBE/FBE) Involvement:**

Subcontractor

Supplier

\_\_\_\_\_ Joint Venture \_\_\_\_\_ Mentor-Protégé

Type Work or Service to be Performed:

Scope of Work to be Performed:

Dollar Value of the Work to Be Performed by the Minority Business (MBE and/or FBE): \$ \_\_\_\_\_

Percentage of MBE and/or FBE Participation: \_\_\_\_\_ %

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

Type  
Trade/Business: \_\_\_\_\_

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

Type Minority Business (MBE/FBE):

\_\_\_\_\_ Female (FBE)  
\_\_\_\_\_ African-American (AABE)  
\_\_\_\_\_ Asian (ABE)  
\_\_\_\_\_ Hispanic (HBE)  
\_\_\_\_\_ Native American (NABE)

City, State, ZIP: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Type Minority Business (MBE/FBE) Involvement:

\_\_\_\_\_ Subcontractor \_\_\_\_\_ Supplier  
\_\_\_\_\_ Joint Venture \_\_\_\_\_ Mentor-Protégé

Type Work or Service to be Performed:

Scope of Work to be Performed:

Dollar Value of the Work to Be Performed by the Minority Business (MBE and/or FBE): \$ \_\_\_\_\_

Percentage of MBE and/or FBE Participation: \_\_\_\_\_ %

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

Trade/Business: \_\_\_\_\_

Type

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

Type Minority Business (MBE/FBE):

\_\_\_\_\_ Female (FBE)

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City, State, ZIP: \_\_\_\_\_

\_\_\_\_\_ African-American (AABE)

Contact Person: \_\_\_\_\_

\_\_\_\_\_ Asian (ABE)

\_\_\_\_\_ Hispanic (HBE)

\_\_\_\_\_ Native American (NABE)

Telephone Number: \_\_\_\_\_

**Type Minority Business (MBE/FBE) Involvement:**

\_\_\_\_\_ Subcontractor

\_\_\_\_\_ Supplier

\_\_\_\_\_ Joint Venture

\_\_\_\_\_ Mentor-Protégé

**Type Work or Service to be Performed:**

\_\_\_\_\_

**Scope of Work to be Performed:**

\_\_\_\_\_

Dollar Value of the Work to Be Performed by the Minority Business (MBE and/or FBE): \$ \_\_\_\_\_

Percentage of MBE and/or FBE Participation: \_\_\_\_\_ %