



STATE OF MISSISSIPPI  
FINANCE & ADMINISTRATION  
Negotiated Bid

RESPONSES REQUIRED BY:

Submission Date : 10/03/2018  
Submission Time : 17:00:00 CST

RESPONSES OPENED ON:

Opening Date : 00/00/0000  
Opening Time : 00:00:00 CST

VENDOR NO: 3100020845

VENDOR NAME & ADDRESS:

(To be completed by Vendor)

SSM GROUP LLC, DBA  
GULF HILLS HOTEL  
13701 PASO RD  
OCEAN SPRINGS, 39564

SUBMIT NON-ELECTRONIC RESPONSE:

TO :  
501 NORTH WEST STREET  
WOOLFOLK BUILDING SUITE 1301A  
JACKSON MS 39201  
US

DELIVERY POINT

RFx number : 3130000892  
Smart number : 1130-19-R-NBID-00005  
Buyer : Candice Hay  
Buyer Phone :  
Email : CANDICE.HAY@DFA.MS.GOV

NOTICE TO VENDOR:

Proposal Request for Hotel/Motel Services. Please read Proposal Format and Guidelines prior to submitting.

Hotel Motel Services Proposal Request

Proposal Must Be Submitted By: September 17, 2018 at 5:00 p.m. CST.

ADDITIONAL CONTACT INFO:

Office of Purchasing, Travel and Fleet Management

Candice Hay

Candice.Hay@dfa.ms.gov

601-359-3409

Vendor Telephone Number	228-875-4211	Title	Date
		GENERAL MGR	9-6-2018
(Typed or printed) Name of Bidder	Signature of Authorized Bidder		
DONNA M. BROWN	Donna M. Brown		

<b>RFx number</b>	: 3130000892	<b>Submission Date:</b> 10/03/2018	<b>Time :</b> 17:00:00 CST
<b>Smart number</b>	: 1130-19-R-NBID-00005	<b>Opening Date</b>	: 00/00/0000 <b>Time :</b> 00:00:00 CST

Item	Change Indicator	Product No. / Mfg. Part No.	Description	Delivery / Req.date	Qty	Unit
# 1			Product Category : 97100 Hotel/Motel Services Only		0.000	

## REQUIRED INFORMATION

**NOTE:** Respondents are required to initial the boxes below to insure all information has been read, understood and all pertinent information and uploaded in MAGIC. This page should also be submitted with the proposal required information.



Initial box indicating the Proposal Format and Guidelines have been read and understood.



Initial box indicating a signed Proposal Letter is enclosed and uploaded in MAGIC.



Initial box indicating payment terms have been read and understood.



Initial box indicating taxes will not be charged when payment is made using the State's Travel Card, a black Visa card by UMB Bank, or when prior arrangements have been made to "direct bill" the room charges to a State department, board, commission or institution.



Initial box indicating a copy of the Lodging Rate Proposal form and a copy of your GSA pricing (if applicable) is uploaded in MAGIC.



Initial box indicating your purchase summary is uploaded in MAGIC (for renewals only). This purchase summary must indicate each state agency and governmental entity to which sales have been made, the location of each, the date of the sale, and the total dollar sales generated during the current contract period with the grand total in Excel spreadsheet format.



Initial box indicating minority vendor status has been indicated.

State of Mississippi – Office of Purchasing and Travel  
 2018 – 2019 Lodging Rate Proposal  
 (Please print legibly or type)

Hotel Name:	GULF HILLS HOTEL & CONFERENCE CENTER		
Hotel Information:	MAGIC Supplier Number: 3100020845		
	Mailing Address: 13701 PASO RD		
	City: OCEAN SPRINGS	Zip:	39564
	County: JACKSON		
Onsite Hotel Phone and Fax:	Onsite Hotel Phone: 228-875-4211		
	Onsite Hotel Fax: 228-875-4213		
Onsite Hotel Email and Website:	Email: DONNA@GULFHILLSHOTEL.COM		
	Website: WWW.GULFHILLSHOTEL.COM		
Daily Base Room Rate (Do not include tax):	\$ 81.99 Single		\$ 81.99 Double
In addition to Daily Rates, please list base rates for weekly and monthly if available (Do not include tax):	\$ N/A Weekly		\$ N/A Monthly
Have desk clerks and other personnel been informed of the agreed upon rates and policies?	<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No
Sleeping Room Door Entrances:	<input type="checkbox"/> Inside		<input checked="" type="checkbox"/> Outside
Minority Vendor Status:	<input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No



<p><u>Rates will be needed Sunday – Thursday.</u> If you will also honor the rates for Friday and Saturday for official state business, please check the line indicating so:</p>	<p><input checked="" type="checkbox"/> Yes, rates are available Sunday – Thursday.  <input checked="" type="checkbox"/> Yes, rates are available Friday – Saturday.  <input type="checkbox"/> No, rates are not available Friday – Saturday</p>	
<p>Rates available to city/county workers, community college employees, school districts and cost reimbursable contractors on official state business?</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Payment options:</p>	<p><input checked="" type="checkbox"/> MasterCard <input checked="" type="checkbox"/> Discover <input checked="" type="checkbox"/> Visa <input type="checkbox"/> Diner's Club  <input checked="" type="checkbox"/> American Express <input type="checkbox"/> Personal Check <input type="checkbox"/> Other</p> <p>*Please note that the State of MS Visa Travel Card is sales tax exempt within the state of Mississippi. All other fees may be applied.</p>	
<p>Is direct billing available?  Note: Individual agencies will be responsible for arrangements.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>*Please note that direct bill is sales tax exempt within the state of MS. All other fees may be applied.</p>	
<p>Check-in/check-out times:</p>	<p><u>12:00 NOON OR AFTER</u> <u>11:00 AM</u>  Check-in Check-out</p>	
<p>Cancellation Policy:</p>	<p><u>72 HRS PRIOR TO ARRIVAL</u></p>	
<p>Contract Onsite Contact Information for Questions, Disputes, etc.</p>	<p>Contact Name/Position:  <u>DONNA BROWN</u>  <u>GENERAL MANAGER</u></p>	<p>Contact Phone:  <u>228-875-4211</u></p>

Print Authorized Name: DONNA M. BROWN

Authorized Signature: Donna M. Brown

**Note:** By signing the above, you are indicating your rates will be effective according to the guidelines as set forth in the Proposal Format and Guidelines and Check List Form for Hotel and Motel Services for the period of October 1, 2018, through September 30, 2019. No rate changes will be acceptable during this contract period unless the Federal Register publishes a rate change. In addition, you are indicating that rates will be made available to desk clerks for state employees who request "state rate" to be given these rates.