

**Tolleson Union High  
School District #214  
E-RATE ELIGIBLE SERVICES  
Wide Area Network  
BID PACKAGE**



**Request for Quote  
#18-001-22**

\*Submitted pricing to be in accordance with an existing cooperative contract

**Tolleson Union High School District**  
9801 West Van Buren Street  
Tolleson, Arizona 85353

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## ESTIMATED TIMELINE

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01/24/17	Issue Request for Quote
02/21/17	Quotes Due (2:00 p.m.)
02/28/17	Anticipated Award

## **REQUEST FOR QUOTE UNDER A COOPERATIVE CONTRACT**

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**DUE DATE:** Tuesday, February 21, 2017

**TIME:** 2:00 p.m., Local Time

**SUBMITTAL LOCATION:** Tolleson Union High School District  
Purchasing Department  
9801 West Van Buren Street  
Tolleson, AZ 85353

**SERVICE REQUESTED:** Wide Area Network

**LOCATION:** Throughout Tolleson Union High School District.  
District Office Location: 9801 W. Van Buren St.  
Tolleson AZ 95353

**COOPERATIVE CONTRACTS:** While the District currently has Cooperative Purchasing Agreements with Mohave Educational, State of Arizona, GPPCS, SAVE, 1GPA, and TCPN, utilization of a particular contract is dependent upon review and acceptance of the contract by TUHSD. The MESC and State contracts have been accepted by the District.

The Tolleson Union High School District is requesting quotes for a Wide Area Network to support existing and anticipated future data, voice, and video traffic between the District Office locations and the campuses identified in the specifications below. The District is seeking a high reliability solution, and will accept land based copper/Optical Ethernet or Wireless proposals.

The contract start date will be July 1, 2017. The term of the contract will be five-years, however, the District will take under consideration a shorter-term contract. Please specify any early cancellation terms that may apply after the first year of the contract.

The District is seeking services and pricing through an approved State Master Contract or other Cooperative Purchasing Contract that is acceptable according to the Arizona State Procurement Rules. Please be advised that this is a Request for Quote and not a formal sealed RFP/Bid process. Arizona State Procurement Code requires a formal sealed bidding process; or purchasing from an approved cooperative purchasing contract, or compliant consortium procured contract for any procurement in excess of \$100,000.00. Any quote whose total value exceeds \$100,000.00 and is not linked to a current approved cooperative purchasing contract,

or a compliant consortium procured contract will be disqualified by Arizona State Procurement Code.

Quotes should be delivered electronically to email address [Erate@tuhsd.org](mailto:Erate@tuhsd.org) no later than the posted due date. Quotes can be mailed or delivered in person to the address above. Extensions may be requested up to three days prior to the posted due date. Extensions will be granted at the District's discretion. It is the prospective vendor's responsibility to deliver the requested quote on or prior to the posted due date and time.

The submission of a quote will indicate that the prospective vendor understands the requirements and specifications and that the services and materials requested can be supplied, and the required delivery time line can be met as specified.

Please direct all questions and requests for information to Cheryl Burt via email at [erate@tuhsd.org](mailto:erate@tuhsd.org).

Any amendments/addenda to this Request for Quote will be sent by email. Please keep us informed of any email changes. If you need directions to our office, please call 623-478-4005.

OFFERORS ARE STRONGLY ENCOURAGED TO CAREFULLY READ THE ENTIRE REQUEST FOR QUOTE.

Contact: Cheryl Burt

Phone: 623-478-4066      Fax: 623-478-4197

Director of Purchasing  
Email: [Cheryl.burt@tuhsd.org](mailto:Cheryl.burt@tuhsd.org)

Authorization: Cheryl J. Burt

Date: 1/24/17

**STATEMENT OF NO BID**

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If you are not responding to this request, please complete and return **only** this form to: Tolleson Union High School District, Attention: Purchasing, 9801 W. Van Buren Street, Tolleson, AZ 85353 or fax to 623-478-4197.

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

We, the undersigned, have declined to respond to your request because of the following reason(s):

- ☐ These are not services we provide.
- ☐ We do not have experience with the equipment listed.
- ☐ Insufficient time to respond to this solicitation.
- ☐ Our current workload does not permit us to perform.
- ☐ Other. (Specify below)

REMARKS:

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SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**ADDITIONAL INSTRUCTIONS**

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1. The pricing quoted must be compliant with the prospective vendor's State Master Contract or Cooperative Purchasing Contract pricing structure. A copy of any and all contracts that the district will be expected to sign must accompany the quote provided.
2. Submitted quotes must clearly identify the prospective vendor's State Master Contract or Cooperative Purchasing Contract number, if applicable, and E-Rate SPIN.
3. All original contracts offered that are less than a 60-month term should include specifications that allow for annual one-year extensions and/or month-to-month extensions at the discretion of the applicant; not to exceed a total of 60 months.
4. Submitted quotes must identify pricing for all bandwidth levels requested; and must be included in the contract. Partial quotes may be disqualified
5. Contract must allow for upgrades to quoted bandwidths.
6. Submitted quotes must identify the cost for all non-recurring expenses, including but not limited to construction of conduit, trenching, campus assessment, engineering, project management, documentation, contingency, installation, configuration, travel, taxes, etc. The successful vendor must obtain and pay for all permits and inspections required by all legal authorities and agencies having jurisdiction for the work.
7. All taxes, including sales taxes, must be identified separately. Sales tax will not be included in the competitive evaluation of the quote but will be included in the E-Rate Funding Application.
8. The services quoted must be eligible for E-Rate under the Category 1 provision compliant with the Schools and Libraries Division Eligible Services List for the current funding year. The costs for services not eligible for E-Rate must be clearly itemized separate from eligible services.
9. Any pricing proposed must comply with the FCC Lowest Corresponding Price Rule as required by the Universal Service First Report and Order, and restated in the FCC E-Rate Modernization Report and Order, adopted July 11, 2014. The FCC Lowest Corresponding Price rule prohibits an E-rate services offeror from offering or charging E-rate applicants a price higher than the lowest price that the offeror charges to non-residential customers who are similarly situated to a particular school, library, rural health care provider or consortium that purchase directly from the offeror.
10. Provide a minimum of three references; preferably Arizona school districts.
11. The District will evaluate all compliant responsive quotes received, and reserves the right to select the quote that is the most cost effective, compliant with FCC Fair and Competitive Bidding Rules

**Failure to comply with these general specifications may be grounds for disqualification and award may be made to the next most cost effective provider.**

## Bandwidth Requirements:

Please quote a cost for the Minimum Bandwidth, the Maximum Bandwidth, and each Incremental Bandwidth denomination specified between the Minimum and Maximum Bandwidth. For example, a Minimum Bandwidth of 100 Mbs and a Maximum Bandwidth of 500 Mbs with an Incremental Bandwidth of 100 Mbs will require quotes for 100 Mbs, 200 Mbs, 300 Mbs, 400 Mbs, and 500 Mbs levels of Bandwidth.

Location	Address	Minimum Bandwidth	Maximum Bandwidth	Incremental Bandwidth
<b>Tolleson USD DO</b>	9801 W Van Buren St Tolleson, Az 85353	2 gbps	10 gbps	1gbps
<b>Westview High School</b>	10850 W Garden Lakes Pkwy Avondale, Az 85392	500mbps	10gbps	100mbps between 500-11gbps; 1gbps between 1 and 10 gbps
<b>Copper Canyon High School</b>	9126 W Camelback Rd Phoenix, Az 85037	500mbps	10gbps	100mbps between 500-11gbps; 1gbps between 1 and 10 gbps
<b>Sierra Linda High School</b>	3434 S 67 <sup>th</sup> Avenue Phoenix, Az 85043	500mbps	10gbps	100mbps between 500-11gbps; 1gbps between 1 and 10 gbps
<b>La Jolla High School</b>	11650 W Whyman Ave Avondale, Az 85323	500mbps	10gbps	100mbps between 500-11gbps; 1gbps between 1 and 10 gbps

E-Rate Eligible Services: Wide Area Network



## WIDE AREA NETWORK SPECIFICATIONS

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1. The proposed network must support Quality of Service (QoS).
2. The proposed network must support a Service Level of 99.9% uptime.
3. The proposed network must include a 24 x 7 x 365 monitoring and trouble notification service.
4. A monthly report on trouble tickets must be provided.
5. Any components provided such as "On-Premise Priority 1" equipment must be new and purchased from the manufacturer, not refurbished or purchased from "secondary markets" or "independent re-furbishers."
6. The Vendor response must state what the vendor's policy and procedure is for escalation of unresolved trouble tickets.
7. The Vendor response must include a proposed implementation plan including a proposed cut-over date.
8. The proposed network will meet all requirements and service tariffs of the Local Exchange Carrier (LEC).
9. The successful vendor must provide and be responsible for all coordination work and correspondence required with the operating Telephone Company for arranging the required telephone service, interface, charges, cut over schedule, and dates.
10. The successful vendor must provide a competent supervisor and supporting technical personnel, acceptable to the District, during the entire installation.

**Failure to identify all of the costs requested above may result in the quote being non-responsive and disqualified.**

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## VENDOR QUALIFICATIONS

1. Provide three references including the name of organization, address, contact person, and phone number for which basic maintenance services are being provided.
2. If not expressed in the contracts provided, state the Service Level Agreement to be provided in terms of availability and response time.

## EVALUATION CRITERIA

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Evaluation of the quotes provided will be based on but not limited to the following criteria:

1. **Cost of ELIGIBLE Services** – Primary evaluation factor.
2. **Other Cost Factors** (Including Termination Fees for Existing Contract).
3. **Ability of the vendor to provide the services** – Conformance with instructions and Scope of Work.
4. **Acceptable Delivery or Completion Date.**

## INSURANCE

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Awarded vendor will be required to maintain comprehensive general liability insurance with a limit of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate coverage with a deductible of not more than \$5,000 and naming Tolleson Union High School District as an additional insured party.

Offeror agrees to maintain such automobile liability insurance as will fully protect Offeror and the School District/Public Entity for bodily injury and property damage claims arising out of the ownership, maintenance or use of owned, hired or non-owned vehicles used by Offeror or its employees, while providing services to the District.

## PURCHASE ORDERS

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All Purchase Orders will be subject to the terms and conditions listed on the TUHSD site:

[http://toolbox2.s3-website-us-west-2.amazonaws.com/acnt\\_180232/site\\_180233/Documents/TollesonUnionPOTermsConditions.pdf](http://toolbox2.s3-website-us-west-2.amazonaws.com/acnt_180232/site_180233/Documents/TollesonUnionPOTermsConditions.pdf).

## BILLING

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All billing notices must be sent to the District's Accounts Payable Department as shown on purchase orders. All invoices shall identify the specific item(s) being billed. Any purchase order issued by the Tolleson Union High School District will refer to the RFQ number of this Solicitation.

E-Rate Eligible Services: Wide Area Network

## VISA PAYMENT AUTHORIZATION

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In an effort to improve our payables process, Tolleson Union High School has entered into a partnership with Commerce Bank for vendors willing to accept Visa for invoice payment. Vendors who enroll in the program will receive an email notification when payment has been made. Within the email you will receive a link providing the Visa account number, the invoice numbers and the invoice amount. Invoices are typically processed within 72 hours of receipt.

By agreeing to accept Visa, this will streamline the payment distribution process allowing you to receive your payments promptly.

Additional benefits to your company include:

- § Emailed payment notifications will reduce delays associated with checks
- § Improved financial controls, as checks can be lost or stolen
- § Decreased administrative costs associated with processing checks
- § Reduction of late payment issues and over-extensions

Tolleson Union High School is encouraging all of our vendors to join us in this exciting new payment system. If you have any questions, you may contact the Commerce Bank Vendor hotline at 866-927-5419.

**SUBMISSION**

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Quotes may be submitted to Tolleson Union High School District, 9801 W. Van Buren Street, Tolleson, AZ 85353, Attn: Cheryl Burt. The solicitation name, RFQ #18-001-22 and Offeror's name and address should be indicated on the envelope. **Quotes may also be scanned and emailed to [erate@tuhsd.org](mailto:erate@tuhsd.org)**, with the original to follow by mail or hand delivery. Quotes must be received by Tuesday, February 21, 2017 at 2:00 p.m. local time.

The undersigned proposes to furnish all labor and materials and provide all equipment and manpower necessary to perform all work.

Pricing submitted in accordance with the \_\_\_\_\_

Cooperative Purchasing Agreement, Contract # \_\_\_\_\_

**VISA PAYMENT AUTHORIZATION**

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- ☐ We have enrolled with Commerce Bank to accept invoice payments through their Visa program.
- ☐ We are not able to accept Visa payments at this time.
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NAME OF BIDDING COMPANY: \_\_\_\_\_

TYPE OF CORPORATE ENTITY: \_\_\_\_\_

EXECUTED BY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

STATE LICENSE NUMBER  
*If applicable.* \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

## E-Rate Eligible Services: Wide Area Network

<b>Form W-9</b> (Rev. December 2014) Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer Identification Number and Certification</b>	<b>Give Form to the requester. Do not send to the IRS.</b>																																																		
Print or type See Specific Instructions on page 2.	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.																																																			
	<b>2</b> Business name/disregarded entity name, if different from above																																																			
	<b>3</b> Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input 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) ▶ _____ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____																																																			
	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Applies to accounts maintained outside the U.S.)																																																			
	<b>5</b> Address (number, street, and apt. or suite no.)	Requester's name and address (optional)																																																		
	<b>6</b> City, state, and ZIP code																																																			
	<b>7</b> List account number(s) here (optional)																																																			
<b>Part I Taxpayer Identification Number (TIN)</b> Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally 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 <i>How to get a TIN</i> on page 3. <b>Note.</b> If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.																																																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="10" style="text-align: center;"><b>Social security number</b></td> </tr> <tr> <td style="width: 25%; height: 20px;"></td> <td style="width: 25%;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%;"></td> </tr> <tr> <td colspan="10" style="text-align: center;">OR</td> </tr> <tr> <td colspan="10" style="text-align: center;"><b>Employer identification number</b></td> </tr> <tr> <td style="width: 25%; height: 20px;"></td> <td style="width: 25%;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%;"></td> </tr> </table>			<b>Social security number</b>												-			-			-		OR										<b>Employer identification number</b>												-			-			-	
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<b>Part II Certification</b> Under penalties of perjury, I certify that: <ol style="list-style-type: none"> <li>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</li> <li>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</li> <li>I am a U.S. citizen or other U.S. person (defined below); and</li> <li>The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.</li> </ol> <b>Certification instructions.</b> 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.																																																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><b>Sign Here</b></td> <td style="width: 60%;">Signature of U.S. person ▶</td> <td style="width: 25%;">Date ▶</td> </tr> </table>			<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶																																															
<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶																																																		
<b>General Instructions</b> Section references are to the Internal Revenue Code unless otherwise noted. <b>Future developments.</b> Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at <a href="http://www.irs.gov/fw9">www.irs.gov/fw9</a> . <b>Purpose of Form</b> An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following: <ul style="list-style-type: none"> <li>Form 1099-INT (interest earned or paid)</li> <li>Form 1099-DIV (dividends, including those from stocks or mutual funds)</li> <li>Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)</li> <li>Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)</li> <li>Form 1099-S (proceeds from real estate transactions)</li> <li>Form 1099-K (merchant card and third party network transactions)</li> </ul>																																																				
• Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) • Form 1099-C (canceled debt) • Form 1099-A (acquisition or abandonment of secured property) Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN. If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See <i>What is backup withholding?</i> on page 2. By signing the filled-out form, you: <ol style="list-style-type: none"> <li>Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),</li> <li>Certify that you are not subject to backup withholding, or</li> <li>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</li> <li>Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See <i>What is FATCA reporting?</i> on page 2 for further information.</li> </ol>																																																				