

REQUEST FOR OFFIER NO.:6100008556

SAFD-FITNESS EQUIPMENT

DATE ISSUED: FEBRUARY 1, 2017

OPEN 10:00 AM CT, FEBRUARY 6TH, 2017

BID SUBMISSION BY

WHEELS & FITNESS IN MOTION OF SOUTH TEXAS, LLC

DBA: FITNESS IN MOTION OF SOUTH TEXAS

LORNE LAPORTE

REGIONAL SALES MANAGER of the COMMERCIAL DIVISION

512-585-3485 C. / 512.218-9148 F.

llaporte@austin.rr.com

AND

RON ADAMS

DIRECTOR OF BUSINESS DEVELOPMENT

512-658-2860 C. /512.331.6802

Radams30@hotmail.com



CITY OF SAN ANTONIO
PURCHASING AND GENERAL SERVICES DEPARTMENT

REQUEST FOR OFFER ("RFO") NO.: 6100008556

SAFD-FITNESS EQUIPMENT

Date Issued: FEBRUARY 1, 2017

RESPONSES MUST BE RECEIVED NO LATER THAN: FEBRUARY 6, 2017
10:00 AM CENTRAL TIME

Responses may be submitted by any of the following means:

- Electronic submission through the Portal
- Hard copy in person or by mail

Address for hard copy responses:

Physical Address:

Purchasing & General Services
Riverview Tower
111 Soledad, Suite 500
San Antonio, Texas 78205

Mailing Address:

Purchasing & General Services
P.O. Box 839966
San Antonio, Texas 78283-3966

For Hard Copy Submissions, Mark Envelope

"SAFD-FITNESS EQUIPMENT"

Offer Due Date: 10:00 A.M. CENTRAL TIME, FEBRUARY 6, 2017

RFO No.: 6100008556

Offeror's Name and Address

Bid Bond: NO Performance Bond: NO Payment Bond: NO Other: NO

See Supplemental Terms & Conditions for information on these requirements.

Affirmative Procurement Initiative: NO

DBE / ACDBE Requirements: NO

See Instructions for Offerors and Attachments sections for more information on these requirements.

Pre-Submittal Conference * NO

Staff Contact Person: STEPHANIE CRIOLLO, PROCUREMENT SPECIALIST III, P.O. Box 839966, San Antonio, TX
78283-3966

Email: STEPHANIE.CRIOLLO@SANANTONIO.GOV

SBEDA Contact Information: , 210-207-3900,

004 - SPECIFICATIONS / SCOPE OF SERVICES

1.0 SCOPE

The City of San Antonio is soliciting bids to furnish all labor, material and equipment necessary to provide inside delivery of "NEW" Fitness Equipment to the San Antonio Fire Department in accordance with the enclosed general terms, conditions and specifications.

NOTE: Used or Refurbished Equipment will not be accepted.

2.1 DELIVERIES

2.2 All prices shall be quoted F.O.B. Destination, freight prepaid. Shipping/freight and any other fees to locations shall be included in quoted price. Shipping shall include inside delivery and install, removal of all packing materials, testing, and calibration.

2.2 ALL trash shall be removed by the Contractor upon completion. Contractor shall ensure said debris is disposed of in a proper manner. Debris shall not be deposited into City or privately owned trash receptacles, dumpsters or left on the side of any facility.

2.3 See Attachment C for delivery locations. Point of Contact information will be provided to vendor upon issuance of a Purchase Order. At least 48 hours notice must be provided to the point of contact prior to delivery.

3.0 WARRANTY

In addition to the warranty requirements stated in the General Terms and Conditions section of this RFO, Vendor shall provide a warranty against defects in materials and workmanship for all parts supplied hereunder, or the manufacturer's warranty if greater. Vendor shall replace all parts found to be defective at no cost to City during the warranty period. In addition, during the warranty period, vendor shall be responsible for all shipping fees applicable to replacement of defective parts.

4.1 SPECIFICATIONS

| ITEM # | PART # | DESCRIPTION | QTY |
|--------|-----------|-----------------------------|-----|
| 1. | CE 800 | SPIRIT ELLIPTICAL | 17 |
| 2. | CT 800 | SPIRIT TREADMILL | 31 |
| 3. | 2711-US | Concept 2 Model D Rower | 56 |
| 4. | | Assault Fitness Air Bike | 2 |
| 5. | MB20 | 20lb Dynamax Medicine Balls | 98 |
| 6. | MB16 | 16lb Dynamax Medicine Balls | 98 |
| 7. | IP0210-25 | 25lb Rogue Echo Slam Balls | 98 |
| 8. | IP0210-50 | 50lb Rogue Echo Slam Balls | 98 |
| 9. | SB-070 | 70lb GET RXd Slam Balls | 4 |
| 10. | SB-100 | 100lb GET RXd Slam Balls | 4 |

| | | | |
|-----|---------------|--|----|
| 11. | SB-150 | 150lb GET RXd Slam Balls | 1 |
| 12. | IP0004 | 26lb Rogue Kettlebells | 98 |
| 13. | IP0005 | 35lb Rogue Kettlebells | 98 |
| 14. | IP0007 | 53lb Rogue Kettlebells | 98 |
| 15. | IP0009 | 70lb Rogue Kettlebells | 98 |
| 16. | SDXXR | Troy Rubber Hex Dumbbell Set: 5-50lbs | 51 |
| 17. | T-DR | Troy Universal Storage System 2-tier db rack | 51 |
| 18. | TDR | Troy Universal Storage System 3-tier db storage system | 4 |
| 19. | RA0720-Medium | Rogue Funnel Filler Sandbag Liners - Med | 6 |
| 20. | RA0720-Large | Rogue Funnel Filler Sandbag Liners - Large | 6 |
| 21. | RA0720-XL | Rogue Funnel Filler Sandbag Liners - x-Large | 6 |
| 22. | C3X | Matrix Climbmill | 1 |
| 23. | RA0501 | Rogue V2 Gun Rack with plastic | 4 |

Vendor must submit specification sheets if bidding alternate equipment.

ACCOUNT REPRESENTATIVE CONTACT INFORMATION

Vendor shall list the account representative information servicing the City's account if awarded this contract.

Name: Lorne LaPorte
 Title: Regional Sales Manager
 Phone: 512-585-3485 Fax: 512-218-9148
 Email: llaporte@austin.rr.com

ORDER PLACEMENT INFORMATION

Vendor shall list the preferred service contact method and contact information.

Services shall be coordinated via: (check all that apply)

Phone: Fax: Email:
 Name: Lorne LaPorte
 Title: Regional Sales Manager
 Phone: 512-585-3485 Fax: 512-218-9148
 Email: llaporte@austin.rr.com

007 - SIGNATURE PAGE

By submitting an offer, whether electronically or by paper, Offeror represents that:

(s)he is authorized to bind Offeror to fully comply with the terms and conditions of City's Request for Offer for the prices stated therein;

(s)he has read the entire document, including the final version issued by City, and agreed to the terms therein;

Offeror is in good standing with the Texas State Comptroller's Office; and

to the best of his/her knowledge, all information is true and correct.

If submitting your offer by paper, complete the following and sign on the signature line below. Failure to sign and submit this Signature Page will result in rejection of your offer.

Offeror Information

Please Print or Type

Vendor ID No.

1014414

Signer's Name

Ron Adams

Name of Business

Fitness in Motion of South Texas, LLC

Street Address

8522 Broadway, Ste 101

City, State, Zip Code

San Antonio TX 78217

Email Address

llaporte@austin.rr.com

Telephone No.

512.585.3485

Fax No.

512.218.9148

City's Solicitation No.

6100008556



Signature of Person Authorized to Sign Offer

009 - ATTACHMENTS

Attachment A-Price Schedule

All pricing includes shipping, inside delivery, installation, removal of all packing materials, and where applicable, installation, testing, and calibration.

CARDIO FITNESS EQUIPMENT

| ITEM # | MFG. PART # | DESCRIPTION | MFG. NAME | VENDOR PART # | QTY | PRICE | EXTENDED PRICE (PRICE X QTY) |
|--------|---------------|--|-----------|---------------|-----|---------------------|------------------------------|
| 1. | CE 800 | SPIRIT ELLIPTICAL | Spirit | CE800 | 17 | 1839. ⁴⁶ | 31,270. ⁸¹ |
| 2. | CT 800 | SPIRIT TREADMILL | Spirit | CT800 | 31 | 2047. ⁹⁰ | 63,484. ⁸⁸ |
| 3. | 2711-US | Concept 2 Model D Rower | Concept | 2711-US | 56 | 981. ⁹⁴ | 54,988. ⁶¹ |
| 4. | | Assault Fitness Air Bike | Assault | Air Bike | 2 | 856. ⁹⁰ | 1,713. ⁷⁹ |
| 5. | MB20 | 20lb Dynamax Medicine Balls | Dynamax | MB20 | 98 | 128. ⁸⁹ | 12,631. ⁷¹ |
| 6. | MB16 | 16lb Dynamax Medicine Balls | Dynamax | MB16 | 98 | 116. ³⁷ | 11,403. ⁹⁶ |
| 7. | IP0210-25 | 25lb Rogue Echo Slam Balls | Rogue | IP0210-25 | 98 | 65. ⁶¹ | 6,429. ⁴⁸ |
| 8. | IP0210-50 | 50lb Rogue Echo Slam Balls | Rogue | IP0210-50 | 98 | 103. ⁵¹ | 10,144. ⁴⁷ |
| 9. | SB-070 | 70lb GET RXd Slam Balls | RXd | SB-070 | 4 | 154. ⁸¹ | 619. ²⁶ |
| 10. | SB-100 | 100lb GET RXd Slam Balls | RXd | SB-100 | 4 | 229. ⁸⁷ | 919. ⁵⁰ |
| 11. | SB-150 | 150lb GET RXd Slam Balls | RXd | SB-150 | 1 | 297. ⁹¹ | 297. ⁹¹ |
| 12. | IP0004 | 26lb Rogue Kettlebells | Rogue | IP0004 | 98 | 44. ²² | 4,333. ⁸⁵ |
| 13. | IP0005 | 35lb Rogue Kettlebells | Rogue | IP0005 | 98 | 52. ⁹⁷ | 5,191. ¹⁵ |
| 14. | IP0007 | 53lb Rogue Kettlebells | Rogue | IP0007 | 98 | 68. ⁵² | 6,715. ²⁵ |
| 15. | IP0009 | 70lb Rogue Kettlebells | Rogue | IP0009 | 98 | 91. ⁸⁵ | 9,001. ³⁹ |
| 16. | SDXXR | Troy Rubber Hex Dumbbell Set: 5-50lbs | Troy | SDXXR | 51 | 703. ⁴⁵ | 35,876. ²⁰ |
| 17. | T-DR | Troy Universal Storage System 2-tier db rack | Troy | T-DR | 51 | 251. ⁸⁶ | 12,844. ⁸³ |
| 18. | TDR | Troy Universal Storage System 3-tier db storage system | Troy | TDR | 4 | 295. ⁰⁶ | 1,180. ²⁴ |
| 19. | RA0720-Medium | Rogue Funnel Filler Sandbag Liners - Med, | Rogue | RA0720-medium | 6 | 60. ⁸⁵ | 365. ¹³ |

| | | | | | | | |
|-----|------------------|---|--------|------------------|---|----------|----------|
| 20. | RA0720- Large | Rogue Funnel Filler Sandbag Liners – Large | Rogue | RA0720- Large | 6 | 71.65 | 429.93 |
| 21. | RA0720- XL | Rogue Funnel Filler Sandbag Liners – x- Large | Rogue | RA0720 XL | 6 | 82.45 | 494.73 |
| 22. | C3X | Matrix Climbmill | matrix | C3X | 1 | 4,196.02 | 4,196.02 |
| 23. | RA0501 | Rogue V2 Gun Rack with plastic | Rogue | RA0501 | 4 | 106.21 | 424.86 |

Prompt Payment Discount: _____% _____days. (If no discount is offered, Net 30 will apply.)

Delivery will be made within 24 calendar days after receipt of purchase order.



**CITY OF SAN ANTONIO
 SUBCONTRACTOR/SUPPLIER UTILIZATION PLAN**

SOLICITATION NAME: *Fitness Equipment for the San Antonio Fire Department*

PRIME CONTRACTOR NAME:

Fitness in Motion of South Texas, LLC

Please review the following information before completing the form:

1. **NO API HAS BEEN APPLIED TO THE SOLICITATION.**
2. Prime contractor must list **ALL** certified and non-certified Subcontractors/Suppliers that will be utilized for the entire contract period.
3. To be SBEDA eligible a Prime contractor or Subcontractor must be certified as a Small Business Enterprise (SBE) through the South Central Texas Regional Certification Agency (www.SCTRCA.org) **AND** must be headquartered or have a significant business presence in the San Antonio Metropolitan Statistical Area.

For further clarification, please contact Small Business Office at (210) 207-3922 or refer to the SBEDA language within the solicitation document(s).

| ROLE | NAME OF FIRM | SBEDA ELIGIBLE (YES/NO) | DOLLAR AMOUNT BY FIRM | % OF TOTAL CONTRACT VALUE BY FIRM | WORK TO BE PERFORMED (5 DIGIT NIGP CODE) |
|------------------|---|-------------------------|-----------------------|-----------------------------------|--|
| PRIME CONTRACTOR | <i>Fitness in Motion of South Texas</i> | <i>NO</i> | <i>279,332.67</i> | <i>100</i> | |
| SUB | | | | | |
| SUB | | | | | |
| SUB | | | | | |
| SUB | | | | | |

I hereby affirm that the information on this form is true and complete to the best of my knowledge and belief. I possess internal documentation from all proposed Subcontractors/Suppliers confirming their intent to perform the scope of work for the price or percentage indicated. I understand and agree that if approved, this document shall be attached thereto and become a binding part of the contract.

Prime Contractor's Authorized Agent:

Sign and Date

Ron Adams 2-2-17

Name

Ron Adams

Title

Dir of Bus. Dev.

Director or Designee of Economic Development:

Sign and Date

APPROVED

DENIED

City of San Antonio
Veteran-Owned Small Business Program Tracking Form

Authority. San Antonio City Code Chapter 2, Article XI describes the City's veteran-owned small business preference program.

Tracking. This solicitation is not eligible for a preference based on status as a veteran-owned small business (VOSB). Nevertheless, in order to determine whether the program can be expanded at a later date, the City tracks VOSB participation at both prime contract and subcontract levels.

Certification. The City relies on inclusion in the database of veteran-owned small businesses (VOSB) maintained by the U.S. Small Business Administration to verify VOSB status; however, veteran status may also be confirmed by certification by another public or private entity that uses similar certification procedures.

Definitions.

The program uses the federal definitions of veteran and veteran-owned small business found in 38 CFR Part 74.

- The term "veteran" means a person who served on active duty with the U.S. Army, Air Force, Navy, Marine Corps, Coast Guard, for any length of time and at any place and who was discharged or released under conditions other than dishonorable. Reservists or members of the National Guard called to federal active duty or disabled from a disease or injury incurred or aggravated in line of duty or while in training status.
- A veteran-owned small business is a business that is not less than 51 percent owned by one or more veterans, or in the case of any publicly owned business, not less than 51 percent of the stock of which is owned by one or more veterans; the management and daily business operations of which are controlled by one or more veterans and qualifies as "small" for Federal business size stand purposes.

The program uses the below definition of joint venture.

- Joint Venture means a collaboration of for-profit business entities, in response to a solicitation, which is manifested by a written agreement, between two or more independently owned and controlled business firms to form a third business entity solely for purposes of undertaking distinct roles and responsibilities in the completion of a given contract. Under this business arrangement, each joint venture partner shares in the management of the joint venture and also shares in the profits or losses of the joint venture enterprise commensurately with its contribution to the venture.

The program does not distinguish between a veteran and a service-disabled veteran-owned business and is not limited geographically.

COMPLETE THE FOLLOWING FORM AND SUBMIT WITH YOUR BID/PROPOSAL.

INSTRUCTIONS

- IF SUBMITTING AS A PRIME CONTRACTOR ONLY, COMPLETE **SECTION 1** OF THIS FORM.
- IF SUBMITTING AS A PRIME CONTRACTOR UTILIZING A SUBCONTRACTOR, COMPLETE **SECTIONS 1 AND 2** OF THIS FORM.

City of San Antonio
Veteran-Owned Small Business Program Tracking Form

SOLICITATION NAME/NUMBER: 6100008556

| | |
|---|--|
| Name of Respondent: <i>Fitness in Motion of South TX</i> | |
| Physical Address: | <i>8522 Broadway, Ste 101</i> |
| City, State, Zip Code: | <i>San Antonio TX 78217</i> |
| Phone Number: | <i>512-585-3485</i> |
| Email Address: | <i>llaporte@austin.rr.com</i> |
| Is Respondent certified as a VOSB with the U.S. Small Business Administration? (circle one) | Yes <input checked="" type="radio"/> No |
| If yes, provide the SBA Certification # | |
| If not certified by the SBA, is Respondent certified as a VOSB by another public or private entity that uses similar certification procedures? (circle one) | Yes <input checked="" type="radio"/> No |
| If yes, provide the name of the entity who has certified Respondent as a VOSB. Include any identifying certification numbers. | |
| Participation Percentage: | |
| Participation Dollar Amount: | |

| | |
|---|--|
| Is Respondent subcontracting with a business that is certified as a VOSB? (circle one) | Yes <input checked="" type="radio"/> No |
| Name of SUBCONTRACTOR Veteran-Owned Small Business: | |
| Physical Address: | |
| City, State, Zip Code: | |
| Phone Number: | |
| Email Address: | |
| Is SUBCONTRACTOR certified as a VOSB with the U.S. Small Business Administration? (circle one) | Yes <input checked="" type="radio"/> No |
| If yes, provide the SBA Certification # | |
| If not certified by the SBA, is SUBCONTRACTOR certified as a VOSB by another public or private entity that uses similar certification procedures? (circle one) | Yes <input checked="" type="radio"/> No |
| If yes, provide the name of the entity who has certified SUBCONTRACTOR as a VOSB. Include any identifying certification numbers. | |
| Participation Percentage: | |
| Participation Dollar Amount | |

City of San Antonio
Veteran-Owned Small Business Program Tracking Form

ACKNOWLEDGEMENT

THE STATE OF TEXAS

I certify that my responses and the information provided on this Veteran-Owned Small Business Preference Program Identification Form are true and correct to the best of my personal knowledge and belief and that I have made no willful misrepresentations on this form, nor have I withheld any relevant information in my statements and answers to questions. I am aware that any information given by me on this Veteran-Owned Small Business Preference Program Identification Form may be investigated and I hereby give my full permission for any such investigation, including the inspection of business records and site visits by City or its authorized representative. I fully acknowledge that any misrepresentations or omissions in my responses and information may cause my offer to be rejected or contract to be terminated. I further acknowledge that providing false information is grounds for debarment.

BIDDER/RESPONDENT'S FULL NAME:

Ron Adams

(Print Name) Authorized Representative of Bidder/Respondent

Ron Adams

(Signature) Authorized Representative of Bidder/Respondent

Director of Bus. Dev.

Title

2-2-2017

Date

This Veteran-Owned Small Business Program Tracking Form must be submitted with the Bidder/Respondent's bid/proposal.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
2017-162241

Date Filed:
02/04/2017

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Fitness In Motion of South Texas
SAN ANTONIO, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

City of San Antonio

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

RFO 6100008556

We sell commercial fitness equipment: cardio, strength and accessories; and provide installation and service after the sale.

| 4 | Name of Interested Party | City, State, Country (place of business) | Nature of interest (check applicable) | |
|---|--------------------------|--|---------------------------------------|--------------|
| | | | Controlling | Intermediary |
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5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



Ron Adams
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Ronald Dean Adams, this the 4th day of Feb., 2017, to certify which, witness my hand and seal of office.

Parul Gupta
Signature of officer administering oath

Parul Gupta
Printed name of officer administering oath

Notary Public
Title of officer administering oath