

20170309-BOE

Sumner County Board of Education, 1500 Airport Road, Gallatin, TN 37066 for
Responses to an Invitation to Bid will be received by the Purchasing Department,
20170309-BOE for Playground Equipment until March 9, 2017 10:00

Provide all equipment and materials, and do all work necessary to furnish Playground Equipment, as specified herein. Playground Equipment shall include, but not be limited to a Playcraft Equipment as detailed in the following pages, or equal, for use at Jack Anderson Elementary School, 250 Shutes Lane, Hendersonville TN 37075.

1. Provide manufacturers product data. Any equals shall be submitted for prior approval five business days in advance of the bid opening date to:

Janice Wright
Sumner County Schools Purchasing
1500 Airport Road
Gallatin TN 37066
janice.wright@sumnerschools.org

Vendor shall submit references of no less than three previous clients, including full contact information, which shall be included with the bid.

Manufacturers warranties shall pass to the Owner and certification made that the product materials meet all applicable grade trademarks or conform to industry standards and inspection requirements.

Product shall be delivered to:

Jack Anderson Elementary School
250 Shute Lane
Hendersonville TN 37075
ATTN: Dr. Ashley Aldridge, Principal

Materials delivered to the site shall be examined for damage or defects in shipping. Any defects shall be noted and reported to the Owners representative. Replacements, if necessary, shall be immediately re-ordered, so as to minimize any conflict with the construction schedule. Sound materials shall be stored above ground under protective cover or indoors so as to provide proper protection.

SUMNER COUNTY BOARD OF EDUCATION
Purchasing Department
1500 Airport Road
Gallatin, TN 37066

COMPANY NAME _____

ADDRESS _____

TELEPHONE _____

EMAIL _____

AUTHORIZED COMPANY REPRESENTATIVE _____ SIGNATURE

AUTHORIZED COMPANY REPRESENTATIVE _____ PRINTED

DATE _____

BID TITLE _____ RISERS

DEADLINE _____

BID TOTAL \$ _____

BID GOOD THRU _____

NOTES: _____

ORGANIZATION:

CONTACT:

ADDRESS:

PHONE:

PROJECT TITLE:

REVISION:

OPTION:

TERRITORY MANAGER



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