

Enterprise Resource Planning

Software & Services

Request for Proposal

(RFP) 2024-019

December 29, 2023



Inquiries:

Erica Dye, Director of Accounting and Finance

770-467-4283

edye@spaldingcounty.com

Proposals Due:

Friday, February 23, 2024

2:00PM EST

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Section 1 INTRODUCTION

Spalding County, GA is seeking sealed proposals from vendors qualified to a comprehensive, fully integrated, public-sector Financial and Human Capital Management Software System. This Request for Proposal (RFP) requests submitters provide a written and electronic proposal that states the overall scope of products and services desired, specific software functionality, technology foundation as well as desired vendor qualifications. Before submitting a proposal, vendors shall examine the specifications in order to understand all existing conditions and limitations.

1.1 ANTICIPATED TIMELINE

Listed below are projected dates and times of actions related to this Request for Proposal (RFP). There may or may not be a formal notification issued for changes in the estimated dates and times.

SELECTION PROCESS	TIMEFRAME
RFP Issuance	12/29/2023
Deadline for Questions	01/26/2024
Vendor Proposals Due	02/23/2024
Notification of Demonstration Dates	02/23/2024
Demonstrations of Software	03/04/2023
Selection of Vendor	03/15/2024
Contract Negotiations	03/26/2023

1.2 PROJECT GOALS AND BACKGROUND

Spalding County has been using SmartFusion from Harris for financial, payroll and human resources since 2009. The County is interested in a Cloud-based integrated solution that facilitates more efficient data exchange, improves operational efficiency, and enhances government transparency.

Spalding County was created in 1851 by an act of the Legislature of the State of Georgia and is geographically located in the middle part of the state, approximately 40 miles south of Atlanta. Its land area encompasses approximately 200 square miles and serves a population of 67,306 as reported in the 2020 U.S. Census report. The County is empowered to levy a property tax on both real and personal properties located within its boundaries. The County provides a full range of services, including law enforcement; corrections; the construction and maintenance of buildings, parks, streets, highways, bridges, stormwater drainage facilities, and other associated infrastructure; parks and recreational activities; 911 emergency communications; homeland security and emergency management; voter registration and elections; court systems; tax

assessment and collection; building inspections; geographic information systems; planning and zoning; solid waste collection and recycling; code enforcement; animal control; and general administrative and support activities.

The Organization's Goals Include:

- Increase customer service levels and responsiveness
- Replace the current system with a state-of-the-art solution
- Implement Best Practices through process workflow review and re-design
- Increase citizen access to information and documentation
- Implement features that allow for greater staff efficiency and return on effort
- Decentralize business processes where appropriate
- Enter data once in a fully integrated solution to guard against clerical errors and data redundancy
- Select and implement a system that is intuitive and flexible to ensure high utilization
- The County wishes to implement the selected solutions without compromising its ongoing operations.
- Deliver a system on-time and within a firm-fixed price budget that will serve the Organization well for 10 or more years

1.3 RESPONSE INSTRUCTIONS

The submitted proposal must follow the rules and format established within this RFP. Adherence to these rules will ensure a fair and objective analysis of all proposals. Each proposal will be prepared according to the required format described in Section 5 and be submitted before the Vendor Proposal Due date with five copies in paper form and electronically with the bid number "2024-019 and titled "Enterprise Resource Planning Software & Services." The electronic version of the proposal shall be included with the paper copies using an external thumb drive. Each Vendor shall be responsible for all costs incurred in order to prepare and submit their response to this RFP. To ensure a fair and objective evaluation of all proposals, vendors are required to submit all inquiries to the project contact noted on the cover of this RFP. Responses to the questions will be placed on the Georgia Registry website for all potential vendors to read.

DELIVERY OF PROPOSALS

Delivery of Proposals: RFPs must be delivered by the date/time specified and to the place stipulated on the cover of this RFP. It is the sole responsibility of the Vendor to see that their RFP is received in the proper time. Any proposal received after the proposal due date and time shall be eliminated from consideration.

Sealed Bids are due: Friday, February 23, 2024 2:00 PM (EST)

BIDS MUST BE SIGNED, IN A SEALED ENVELOPE AND MUST INCLUDE ALL OF THESE COMPLETED DOCUMENTS:

See [Section 5](#)

Deliver Sealed Bids and Appendix Documents to:**Spalding County Board of Commissioners**

Attn: Erica Dye

Spalding County ERP RFP

119 East Solomon Street, Room 104

Griffin, GA 30223

DUE DATE:

Sealed bids will be received at the Spalding County Board of Commissioners office, 119 East Solomon Street, Room 104, Griffin, GA 30223 no later than 2:00 PM, Local Time, Friday, February 23, 2024. Bids received after this time will not be accepted.

BID COPIES FOR EVALUATION:

One original; (1) and two (2) copies will be required for review purposes.

ADDENDA:

Answers to questions submitted that materially change the conditions and specifications of this bid will be distributed to all addresses as an addendum. Any discussions or documents will be considered non-binding unless incorporated and distributed in an addendum.

Bidders should check the Georgia Procurement Registry frequently during the bidding process to verify that they have received all issued addendums. While every attempt is made to make sure that registered bidders receive notice of addendums, bidders have the responsibility of making sure that they have received all issued addendums.

Addenda are required to be signed and returned with the bid proposal.

Announcement of award will be done upon evaluation of submitted bids and funding. Spalding County reserves the right to reject any or all bids.

Steve Ledbetter, PhD., County Manager

PARTIAL RESPONSE

Partial Response: The County feels strongly that it is in their best interest to select a fully integrated suite of applications from one vendor. Vendors submitting partial responses may still complete the RFP as fully as possible. Please refer to Section 3 "Completion of Proposal Forms" for further instructions.

QUESTIONS AND COMMUNICATIONS

Questions and Communications: Vendors are hereby notified not to contact any member of the Evaluation Committee, or any member of the Organization staff and its' elected officials, except as provided herein regarding this proposal until such time as a contract has been awarded. Questions concerning any portion of this RFP shall be directed in writing (e-mail encouraged) to the below named individual who shall be the official point of contact for this RFP. All questions must be submitted prior to the Deadline for Questions as stated in the *Anticipated Timeline* above. Failure to adhere to this policy will result in disqualification.

Erica R. Dye

Director of Accounting & Finance

Spalding County Administration Department

770-467-4283

edye@spaldingcounty.com

Any questions and/or misunderstandings that may arise from this bid must be submitted in writing and forwarded to Erica Dye at the above address or by email. NO PHONE CALLS. It shall be the Bidders responsibility to seek clarification as early as possible prior to the due date and time.

To maintain a "level playing field", and to assure that all bidders receive the same information, bidders are requested NOT to contact anyone other than the contact listed in this RFP until after the award of the contract. Doing so could result in disqualification of the proposer.

Final written questions are due by Friday, January 26, 2024 at 2:00 PM (EST).

Section 2 PROJECT SCOPE

A high-level outline of the expected system solution:

2.1 SOFTWARE

- General & Technical
- General Ledger/Chart of Accounts
- Budget Preparation and Budget Control
- Accounts Payable
- Purchasing
- Inventory/Fixed Assets
- Bid Management
- Contract Management
- Project & Grant Accounting
- Cash Management/Bank Reconciliation
- Capital Assets
- Content Management
- Employee Reimbursement
- Payroll
- Human Resources
- Employee Self Service
- Recruiting
- Time & Attendance
- Advanced Scheduling
- Misc. Billing / AR
- ACFR
- Citizen Transparency
- Cashiering
- Payments
- Integrated Content Management

2.2 SERVICES

- Project Management
- Software installation
- Data conversion

- Integration & interface development
- Training
- Ongoing support & maintenance services

2.3 DEMONSTRATIONS AND PRESENTATIONS

Vendors may be required to provide detailed demonstrations of proposed application software. Vendors may also be required to make presentations and/or provide written clarifications of their responses at the request of the County.

2.4 CONFIDENTIALITY

All information submitted as part of the vendor's proposal will be deemed confidential. Except as provided in the applicable public records law, there shall be no public disclosure of vendor's proposal submitted in response to this RFP, including but not limited to disclosure to a competing vendor.

2.5 ORGANIZATION DEMOGRAPHICS AND STATISTICS

The following shows an estimated summary of key transaction and operating volumes.

TRANSACTION AND OPERATING VOLUMES	CURRENT
ORGANIZATION	
Spalding County population	68,919
Spalding County operating budget	\$120 M
Total number of County locations	27
Total number of computer system users	456
Number of concurrent financial system users	NA
Number of concurrent human resource system users	4
Number of named asset maintenance users	4
Number of named permit and code enforcement users	1
Number of name building inspection users	NA
Number of remote field users (i.e code enforcement or field inspectors).	1
Desktop Operating System	WIN 10 & 11
E-mail System	OFFICE 365
Internet Browser(s)	Edge, Chrome

TRANSACTION AND OPERATING VOLUMES	CURRENT
GENERAL LEDGER	
Fiscal year starts	July 1
Number of funds	23
Number of departments	102
PROJECT / GRANT ACCOUNTING	
Number of project / grant accounts	Approx. 25
CAPITAL ASSETS	
Number of capital assets	Approx. 1200
Fixed asset tagging capitalization threshold	\$10,000
PURCHASING	
Number of regular purchase orders (monthly)	Approx. 210
Number of purchasing/AP vendors	Approx. 7600
ACCOUNTS PAYABLE	
Number of accounts payable checks (monthly)	Approx. 685
Frequency of accounts payable check runs	weekly
ACCOUNTS RECEIVABLE & GENERAL BILLING	
Number of Accounts Receivable statements mailed (monthly)	NA
Number of transactions (monthly)	Approx. 730
HUMAN RESOURCES AND PAYROLL	
Number of full-time employees	600
Number of part-time employees	NA
Payroll frequency	Bi-weekly
WORK ORDERS/ASSET MAINTENANCE	
Number of users needing to process work orders.	4
Utility Billing	
Number of utility billing customers.	TBD

Section 3 COMPLETION OF PROPOSAL FORMS

Vendors should submit all the information and documentation requested in Section 5 (Vendor Proposal) of this RFP. Most subsections require a narrative description and then also have questions listed in a table format for ease of evaluation. All responses should be added to this document or submitted as a separated Word document with the subsections clearly identified.

3.1 SOFTWARE CAPABILITIES

Software Functional Requirements should be submitted in the attached spreadsheet. Vendors should also attach and submit the Bid Form and Responsibility of Bidder Form. Vendors are instructed to complete Software Capabilities by placing the correct code in the vendor response column for each requirement as described below:

Coding Key:

Y= YES	Indicates that the vendor's standard software meets and/or exceeds the requirement and the stated functionality is in the current <u>General Release</u> of the software.
N = NOT PLANNED	Indicates that the vendor's software does not and cannot meet this requirement
C = CUSTOM QUOTE	Indicates that a software modification is required to meet and/or exceed this requirement. If there is a cost associated with this modification, list the dollar amount in the comment's column.
NR = NEXT RELEASE	Indicates the vendor will satisfy the requirement in a future release for no additional cost. Such future functionality must be in the <u>General Release</u> of the product within 12 months of contract date.
TP = 3RD PARTY PRODUCT	Indicates that the functional requirement can be met with a third party product. Please indicate name of the third party product under the comments section and include all associated costs in the investment summary.

Please reference the Software Functional Requirements in the attached spreadsheet.

3.2 PRICING ELIGIBILITY PERIOD

All Vendor proposals are required to be offered for a term not less than 180 calendar days in duration. A proposal may not be modified, withdrawn or cancelled by the vendor during the 180 day time period following the time and date designated for the receipt of proposals. All prices are assumed to Best and Final.

3.3 EVALUATION & RESERVED RIGHTS

Evaluation of the proposals is expected to be completed within 60 days after bid closing. An evaluation team will evaluate proposals on a variety of quantitative and qualitative criteria. It is the Organization's intentions to procure (1) the most functionally capable and complete, and (2) the most cost-effective solution from a growing, viable, and financially stable company that will meet both current and future needs. The lowest price proposal is only one criteria used in the selection process and will not necessarily be the basis for selection. The county may award based on initial proposals received, without discussion of such proposals. Selected vendors may be invited to make oral presentations or product demonstrations to the evaluation team. The Organization reserves the right to a) reject any or all proposals, or to make no award, b) require modifications to initial proposals or c) to make partial or multiple awards. The county further reserves the right to excuse technical defects in a proposal when, in its sole discretion, such excuse is beneficial to the county and the tax payers of Spalding County. Inability to score as one of the top three vendors (Initial Proposal Evaluation) will eliminate vendor from further consideration. Failure to include in the proposal all information outlined herein may be considered as non-responsive to the RFP and considered as cause for rejection of the proposal. Information and/or factors gathered during interviews, negotiations, and any reference checks, and any other information or factors deemed relevant by the county, shall be utilized in the final award. The final award of a contract is subject to approval by Spalding County Board of Commissioners.

Section 4 EVALUATION CRITERIA

The County intends to enter into a long-term relationship with a well-established vendor whose products, features, design philosophy, and support policies come closest to meeting the Organization's needs. The selected vendor must be a well-established, financially stable firm committed to providing ERP software solutions to the public sector. The ideal vendor will have a significant installed base of public sector clients using the proposed financial management applications and a proven track record of delivering products and services on-time and within budget. The Vendor evaluation process will utilize the following approach:

4.1 INITIAL PROPOSAL EVALUATION

Initial Proposal Evaluation: The initial evaluation will be based strictly on the vendor's proposal response and be performed prior to any formal demonstrations, reference checking, and/or site visits. The vendors with the highest score (no more than three) will proceed through to additional evaluation.

4.2 FINALISTS EVALUATION

Finalists Evaluation: Further evaluation associated with the finalist vendors will be performed as follows:

- Conduct scripted vendor demonstrations
- Evaluate implementation and support approach
- Perform reference checks
- Conduct site visits at the discretion of the selection committee

Based upon the proposal response, product demonstrations, and reference checks, the finalist vendors will be evaluated against the following criteria:

CRITERIA	WEIGHT
CORPORATE STRENGTH, VIABILITY AND DIRECTION	15
- Financial stability	
- Organizational structure	
- New client growth	
- Length of time company has been in business	
- Length of time product has been in the marketplace	
- Commitment to public sector	
- Quality of References	

CRITERIA	WEIGHT
- Qualifications of Resources	
- Comparable size of installations	
- Quality and clarity of proposal presentation	
- Conformance with proposal response format	
- Strategic vision and ability to execute	
APPLICATION FUNCTIONALITY	25
- Module Functional Requirements	
- General System Functions	
- Level of system complexity	
- Ability to positively impact operations through enhanced ROI and ROE	
- Reporting	
- Security	
- Overall ease of use (i.e., system navigation, menu/screen, organization, etc.)	
- Ease of customization and configuration	
- Product direction	
TECHNICAL INFRASTRUCTURE, ARCHITECTURE AND DESIGN PRINCIPLES	15
- Current technology performance (demand on CPU of current inventory of PCs and laptops)	
- Multiple Client configuration options	
- Configuration management	
- Stability of product	
- Ease of integration with other 3rd party products	
- User Centric Design	
- Extent of native data / systems integration (excludes use of 3rd party products)	
- Ease of migration	
- Compatibility with existing infrastructure	
- Overall support complexity (effort, skill-sets)	
- System reliability	

CRITERIA	WEIGHT
- System performance	
IMPLEMENTATION & SUPPORT SERVICES	25
- Strategic Relationships	
- Ability to provide timely mandated changes as part of support	
- On-going support procedures (prioritization, escalation)	
- Implementation approach (including amount and type of support)	
- Data migration approach	
- Vendor staffing provided on the project	
- Completeness of work plan	
- Vendor staff for support and development	
- Ownership of problems (scope of problem-solving responsibility)	
- Delivery of training (comprehensiveness, quality)	
- Additional Services such Change Management and Business Process Redesign.	
- Overall satisfaction with Vendor solution (support, success, training, flexibility, functionality, future direction, etc.)	
- Project Management approach	
COSTS	20
- Initial	
- Annual release/upgrades	
- Optional or third-party products	
TOTAL SCORE:	100

Section 5 **VENDOR PROPOSAL INSTRUCTIONS**

Please include the following in your proposal:

PROPOSAL SUMMARY FORM

Name of Company	Cover Letter
Software Brand Name Proposed, Itemization of all system components, service & maintenance policies,	Evidence of License/Certifications/Certificates of Insurance to legally provide services requested
Name of Primary Contact for Follow-Up Questions	W-9 & S.A.V.E Affidavit
Contact Phone Number	Contractor Affidavit (notarized)
Fax Number, E-mail Address	Exceptions or Limitations Addendum (if applicable)
Bid Proposal Form	Itemize Pricing Addendum (if applicable)

Vendors that do not address each section listed above may be considered as nonresponsive bidders by the county.

NOT RESPONSIBLE FOR COSTS

The county shall not be responsible for any cost incurred by a prospective CONTRACTOR in responding to this REQUEST FOR PROPOSAL.

PUBLIC INFORMATION

All information contained in this Proposal is public information, and as such will be handled in accordance with Georgia O.C.G.A. Title 50 Section 18.

ADDITIONAL INFORMATION

Spalding County reserves the right to require Firms to provide references and information on previous similar experience prior to award of the contract.

QUESTIONS

Any questions about the REQUEST FOR PROPOSAL should be communicated according to the instructions in the REQUEST FOR PROPOSAL.

INDEMNIFICATION AND INSURANCE

The CONTRACTOR agrees to assume liability for and indemnify, hold harmless, and defend the county, its commissioners, officers, employees, agents, and attorneys of, from, and against all liability and expense, including reasonable attorney's fees, in connection with any and all claims, demands, damages, actions, causes of action, and suits in equity of whatever kind or nature, including claims for personal injury, property damage, equitable relief, or loss of use, to the extent caused by the negligence, recklessness, or intentionally wrongful conduct of the CONTRACTOR, its agents, officers, contractors, subcontractors, employees, or anyone else employed or utilized by the CONTRACTOR in the performance of this Agreement. The CONTRACTOR's liability hereunder shall include all attorney's fees and costs incurred by the county in the enforcement of this indemnification provision. This includes claims made by the employees of the CONTRACTOR against the county and the CONTRACTOR hereby waives its entitlement, if any. The obligations contained in this provision shall survive termination of this Agreement and shall not be limited by the amount of any insurance required to be obtained or maintained under this Agreement.

INSURANCE

The CONTRACTOR shall not commence any Work until they have obtained all the following applicable types of insurance and such insurance has been approved by the county, has named the Spalding County as an additional insured, except for Worker's Compensation Coverage, nor shall the CONTRACTOR allow any Subcontractor to commence Work on his subcontract until all similar insurance required of the Subcontractor has been so obtained.

Such insurer shall have a currently valid Certificate of Authority issued by the State of Georgia, Department of Insurance authorizing it to write insurance policies in the State of Georgia and be doing business in the State of Georgia. Insurers shall have at least a Policy Holders Rating of A- and Financial Rating of Class VI as identified in the latest issue of "Best's Key Rating Guide" unless otherwise accepted by the county in writing.

The CONTRACTOR's insurance, and the insurance of any other party bound to the CONTRACTOR, shall be considered primary. The county's insurance, if any, shall be considered excess, as may be applicable to claims which arise out of indemnifications, insurance, certificates of insurance and any additional insurance provisions. Certificates of Insurance acceptable to Spalding County for the CONTRACTOR's insurance must be received within five (5) days of Notification of Selection and at time of signing Agreement.

Certificates of Insurance and the insurance policies required will include a provision that policies, except Workers' Compensation, are primary and noncontributory to any insurance maintained by the CONTRACTOR. Certificates of Insurance and the insurance policies required shall contain a provision under General Liability, Auto Liability, and Workers' Compensation to include a Waiver of Subrogation clause in favor of Spalding County.

Certificates of Insurance and the insurance policies required shall contain a provision under General Liability, Auto Liability, and Excess Liability to include Spalding County as Additional Insured, including Completed Operations (Form CG 20 10 and CG 2037 or equivalent). Other Additional Insured forms might be acceptable but only if modified to include ongoing and completed

operations. A copy of the endorsement to the policy shall be provided with the certificate of insurance. All Certificates of Insurance shall be dated and shall show the name of the insured CONTRACTOR, the specific job by name and job number, the name of the insurer, the policy number, its effective date and its termination date and a list of any exclusionary endorsements.

All the above referenced Insurance coverage is required to remain in force for the duration of the project and for the duration of the warranty period. Accordingly, at the time of submission of final application for payment, CONTRACTOR shall submit an additional Certificate of Insurance along with evidence of continuation of such coverage. The failure of Spalding County to demand certificates of insurance and endorsements evidencing the required insurance or to identify any deficiency in contractors' coverage based on the evidence of insurance provided by the contractor shall not be construed as a waiver by Spalding County of contractor's obligation to procure, maintain, and pay for required insurance.

The insurance requirements set forth herein shall in no way limit Contractors liability arising out of the work performed or related activities. The inclusions, coverage and limits set forth herein are minimum inclusion, coverage, and limits. The required minimum policy limits set forth shall not be construed as a limitation of CONTRACTOR's right under any policy with higher limits, and no policy maintained by the CONTRACTOR shall be construed as limiting the type, quality, or quantity of insurance coverage that CONTRACTOR should maintain. CONTRACTOR shall be responsible for determining appropriate inclusions, coverage, and limits, which may be more than the minimum requirements set forth herein.

The failure of CONTRACTOR to always comply fully and strictly with the insurance requirements set forth herein shall be deemed a material breach.

LOSS DEDUCTIBLE

If the insurance of any CONTRACTOR or any subcontractor contains deductible(s), penalty(s) or self-insured retention(s), the CONTRACTOR or Subcontractor whose insurance contains such provision(s) shall be solely responsible for payment of such deductible(s), penalty(s), or self-insured retention(s).

SUBCONTRACTOR'S INSURANCE

CONTRACTOR shall require each of his Subcontractors to likewise purchase and maintain at their expense Commercial General Liability insurance, Workers' Compensation, Employer's Liability coverage, Automobile Liability insurance, and Excess Liability insurance coverage meeting the same limit and requirements as the CONTRACTOR's insurance. CONTRACTOR shall also obtain from each subcontractor a written indemnification in form and substance identical to the indemnity as set forth in Part 1 above.

CERTIFICATE OF INSURANCE

The county shall be furnished proof of insurance coverage as follows:

- The name of the insured CONTRACTOR, the specific job by name and job number, the name of the insurer, the number of the policy, its effective date, and its termination date.
- Statement that the insurer will mail notice to the county and a copy to the county's representative at least thirty (30) days prior to any material changes in provisions, cancellation, renewal, or non-renewal of the policy.
- Certificate of Insurance shall be in the form as approved by the county and such Certificate shall clearly state all the coverage required in this Article.
- If requested by the county, the CONTRACTOR shall furnish complete copies of the awarded bidder's and subsequent Subcontractor's insurance policies, forms, and endorsements; and
- Receipt of certificates or other documentation of insurance or policies or copies of policies by the CONTRACTOR or by any of its representatives which indicate less coverage than required by the Contract Documents does not constitute a waiver of the CONTRACTOR's obligations to fulfill the requirements of this Article.

WORKERS' COMPENSATION INSURANCE

The CONTRACTOR shall take out and maintain Workers' Compensation and Employer's Liability Insurance for all his employees connected with the Work of this Project, and in case any work is sublet, the CONTRACTOR shall require the Subcontractor similarly to provide Workers' Compensation Insurance for all the latter's employees, unless such employees are covered by the protection afforded by the CONTRACTOR. Such insurance shall comply with the Georgia Workers' Compensation Law.

The CONTRACTOR shall purchase and maintain at the contractor's expense Workers' Compensation and Employer's Liability insurance coverage for the life of this Subcontract.

The Limits of this insurance shall not be less than the following limits:

Part One: Workers' Compensation Insurance - Unlimited Statutory Benefits as provided in the Georgia Statutes; and

Part Two: Employer's Liability Insurance

Bodily Injury by Accident	\$100,000 Each Accident
Bodily Injury by Disease	\$500,000 Policy Limit
Bodily Injury by Disease	\$100,000 Each Employee

In case any class of contract at the Project Site is not protected under the Workers' Compensation statute, the CONTRACTOR shall provide adequate insurance, satisfactory to county requirements for the protection of employees not otherwise protected.

LIABILITY INSURANCE

The CONTRACTOR shall take out and maintain Commercial General Liability and Commercial Automobile Liability Insurance as shall be required to protect Spalding

County from claims for damage, for bodily injury, and personal injury, including accidental death, as well as claims for property damages which may arise from operating under this Agreement, whether such operations are by themselves or by anyone directly or indirectly employed by CONTRACTOR, and the amount of such insurance shall be minimum limits as follows:

Commercial General Liability

The Contractor shall purchase and maintain at the Contractor's expense Commercial General Liability insurance coverage (ISO or comparable Occurrence Form) (Modified Occurrence or Claims Made forms are not acceptable).

Each Occurrence Limit	\$1,000,000
Personal & Advertising Injury Limit Fire Damage Limit (any one fire)	\$1,000,000
Medical Expense Limit (any one person)	\$50,000
Products & Completed Operations Aggregate Limit	\$5,000
General Aggregate Limit (other than Products & Completed Operations)	
Applies Per Project	\$2,000,000
The Limits of this insurance shall not be less than the following limits:	\$2,000,000

General liability coverage shall continue to apply to "bodily injury" and to "property damage" occurring after all work on the Site of the covered operations to be performed by or on behalf of the additional insured's has been completed and shall continue after that portion of "your work" out of which the injury or damage arises has been put to its intended use.

- Coverage shall include premises, operations, products, completed operations, independent contractors, contractual liability covering this Agreement, contracts and leases, broad form property damage coverage's, personal injury, and bodily injury.
- If Umbrella or Excess liability coverage is used to satisfy the requirements of this Section, it shall not be more restrictive than the underlying insurance policy coverages.

Commercial Automobile Liability

The PROFESSIONAL/CONTRACTOR shall purchase and maintain at the contractor's expense Automobile Liability insurance coverage.

The Limits of this insurance shall not be less than the following limits:

Combined \$1,000,000 Each Accident

Single Limit \$1,000,000 Bodily Injury – Per Accident *OR*

Split Limits \$500,000 Property Damage – Per Accident

Covered Automobiles shall include any auto owned or operated by the insured Contractor, insured Contractor including autos which are leased, hired, rented, or borrowed, including autos owned by their employees which are used in connection with the business of the respective contractor. Coverage shall include bodily injury and property damage arising out of ownership, maintenance, or use of any auto, including owned, non-county, and hired automobiles and employee non-ownership use.

PROPERTY INSURANCE

This additional coverage will be required if the contract includes construction of or additions to above-ground buildings or structures, or installation of machinery or **equipment**. The minimum amount of insurance shall be 100% of the completed value of the installed replacement cost of value.

TRANSMITTAL LETTER

Please acknowledge that you have received, read, and understand all aspects of the RFP and any addendum that may have been released in conjunction with the RFP. Please provide contact information of those that are authorized to participate in contract negotiations on behalf of your company.

SOLUTION SUMMARY

(Section 1)

Please describe your solution and how it addresses the stated goals of the project. This should be limited to how your proposed solution will directly benefit the Organization and your unique value that you add. Please add more detail than the typical value proposition used in your marketing material – be specific for how the proposed solution will benefit Spalding County.

CORPORATE OVERVIEW

(Section 2)

Vendors must provide information about their company so that the Organization can evaluate the Vendor’s stability and ability to support the commitments set forth in response to the RFP. The Organization, at its option, may require the Vendor to provide additional documentation to support and/or clarify requested information. The Vendor should outline the company’s background including a brief description (e.g., past history, present status, future plans, company size, etc.). The Vendor should also submit (attach) an Annual Report or audited financial information for the past two (2) completed fiscal years, which includes income statements, balance sheets, and statement of cash flows.

QUESTION	RESPONSE
1. Please state the year the Vendor started in the business of selling public sector ERP system solutions?	
2. How many new public sector ERP contracts do you average annually?	
3. Please list and briefly describe any strategic partnerships you have.	
4. Please list total revenues in the previous four years:	
2023	
2022	
2021	
2020	
5. How many total employees does the vendor have in each of the following categories:	
Sales & Marketing	
Research & Development	
Help Desk & Support Staff	
Application Development Staff	
Implementation Staff	
Other	
Total	

QUESTION	RESPONSE
6. Specify the number of public sector vs. private sector clients.	
7. Indicate whether the business is publicly held or private.	
8. What percentage of revenues does this offered system represent to your company verses other products/ services?	
9. Indicate if the company incurred an annual operating loss in the last 5 years.	
10. What is the current staff turnover rate for your company?	
11. What is the vendor's percentage of annual revenues reinvested into research & development?	

GENERAL APPLICATION ARCHITECTURE

(Section 3)

The Vendor is required to provide a general description of the application program product and how it will meet requirements of this RFP. Describe opportunities for making local customizations or development of interfaces without compromising the integrity of the base system. Also include in this description the following: content management capabilities, GIS integration and capabilities, and web-based e-Gov solutions (including what is available for employee access, citizens' access and credit card processing).

QUESTION	RESPONSE
1. Are all proposed applications owned and developed by your company? If not please list the modules, 3 rd party owners or developers and describe their relationship with your company.	
2. Describe the application architecture of the proposed solution.	
3. Describe how proposed applications are integrated with each other, including how	

QUESTION	RESPONSE
data entry and retrieval is minimized throughout the system.	
4. Describe all end-user device requirements. Include reference to supported platforms, required end-user software, and any functionality <u>not</u> available in a browser.	
5. Describe how the solution can be accessed from and is optimized for mobile devices. Include any use of responsive design and/or native mobile apps.	
6. Describe the solutions integrated content management capabilities.	
7. How does the system integrate with office productivity applications such as Microsoft Word and Excel?	
8. Describe the ability to exchange data with with third-party solutions using file-based imports and exports. Provide details on technical skills required to setup and manage interfaces and whether file integrations can be scheduled.	
9. Describe the ability to exchange data with third-party solutions using industry standard APIs. Provide details on included documentation.	
10. Describe how the system can be customized to extend and tailor functionality specific to an organization (e.g., customized field names, user-defined fields, customized screens) with limited technical expertise. How are customizations impacted by application upgrades?	
11. Describe application workflow capabilities. Provide details on the technical skills required to manage applicaiton workflow.	
12. Describe <u>integrated</u> reporting and analytic capabilities.	

QUESTION	RESPONSE
13. Does the vendor provide a library of customizable reports?	
14. What reporting services and support does the vendor offer?	
15. Describe the ability to use third-party reporting tools with the solution.	

SECURITY

(Section 4)

Vendor is required to provide a response to the following questions concerning security and access controls.

QUESTION	RESPONSE
1. Does the solution support integration with identity providers for authentication? If so, which ones?	
2. Can the application provide access to users not in the organizations identity provider? If so, how is this accomplished?	
3. Describe how clients can define and control login policies, including password complexity, expiration, and multi-factor authentication.	
4. If the solution provides “self-service” applications (e.g., specific to vendors, residents, applicants), describe the account creation and/or registration process for those users. Are social identity providers (e.g., Facebook, Apple, Google) supported for account registration?	
5. Describe the use of role-based security to manage application access?	
6. What auditing capabilities are included with the solution?	
7. Describe how data is encrypted in-transit and at-rest to keep data secured.	

QUESTION	RESPONSE
8. Describe in detail any additional security controls employed by the vendor and application.	

CLOUD HOSTING

(Section 5)

The Vendor is required to provide a response to the following questions regarding their software hosting platform proposed for the County.

QUESTION	RESPONSE
1. Is the application available as a subscription-based cloud deployment? If no, please explain.	
2. Describe the vendors cloud offering.	
3. How many years has the vendor provided cloud solutions and how many clients are using the vendors cloud solutions today?	
4. What type of disaster recovery and business continuity practices are employed.	
5. Are multiple application environments supported (e.g., production, train, test)?	
6. Describe how data is segregated between hosted clients.	
7. How often is the solution updated?	
8. Can individual clients control when new versions are applied or are updates applied to all clients at the same time as determined by the vendor?	
9. Can clients test a new version in a pre-production? If so, explain how this is possible.	
10. How long do clients have to test new versions before it's applied to production?	

QUESTION	RESPONSE
11. Can clients refresh production data to non-production environments? If so, can this be accomplished by the client directly without vendor interaction?	

IMPLEMENTATION SERVICES

(Section 5)

QUESTION	RESPONSE
1. Please describe the vendor’s implementation methodology.	
2. Does the vendor utilize 3 rd party parties or subcontractors?	
3. How many PMP certified Project Managers does the vendor currently have on staff?	
4. How many new client Implementations did the vendor perform in the past three years?	
5. What level of guarantee does the vendor offer to ensure the quality of implementation services delivered?	
6. What is the expected length of time between contract execution and commencement of the implementation?	

Please describe your approach and define your deliverables for the following implementation services. It is expected that your proposal includes these services at a minimum.

1. Project Scope Agreement
2. Project Assumptions
3. Vendor Personnel
4. Technical Support Offerings
5. Operational & Knowledge Transfer
6. Data Conversion Process Steps and Activities
7. Change Management Approach
8. Communication Plan

- 9. Quality Management and Testing
- 10. Project Risk Management
- 11. Schedule Management
- 12. Resource Management
- 13. Training Plan
- 14. Sample Implementation Plan

ON-GOING SUPPORT AND MAINTENANCE

(Section 6)

The Vendor must specify the nature, costs and conditions of any post-implementation support options including:

- 1. Operational / Functional Support
- 2. Technical Support
- 3. Release / Upgrade Assistance
- 4. Availability of user groups
- 5. Escalation options and procedures

Identify the party or business unit that is responsible for the support options provided above. Additionally, it is requested that the Vendor submit their Support “prioritization” and “escalation procedures.”

QUESTION	RESPONSE
1. Does the vendor have a toll-free support line?	
2. Does the vendor have regional and national User Groups?	
3. Does the vendor have an Annual User Conference?	
4. What are the support hours of operation?	
5. Does the vendor assign one individual to take ownership of any support issues the Organization may have?	
6. Will the vendor provide unlimited telephone support as part of their annual support agreement?	

QUESTION	RESPONSE
7. Does the vendor provide and maintain a searchable knowledgebase of product support materials made available to its client base?	
8. Does the vendor provide a customer only web site complete with documentation and software downloads?	
9. Does the vendor provide an electronic forum for clients to communicate with each other and exchange information?	

SOFTWARE FUNCTIONAL REQUIREMENTS (SPREADSHEET ATTACHED)

(Section 7)

Please reference Section 3.1 (Completion of Proposal Forms) for specific instructions.

VENDOR REFERENCE INFORMATION

(Section 8)

Provide five (5) recent clients references of similar size and requirements. These clients must be live on all modules of the software for a minimum of one year. Please include the following for each reference:

REFERENCES	
Client Name:	
Contact Name:	
Contact Title:	
Contact Phone Number:	
Contact e-mail address:	
Contract Date:	
Software Modules Purchased:	
Annual Budget:	
Population:	

REFERENCES	
Client Name:	
Contact Name:	
Contact Title:	
Contact Phone Number:	
Contact e-mail address:	
Contract Date:	
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REFERENCES	
Client Name:	
Contact Name:	
Contact Title:	
Contact Phone Number:	
Contact e-mail address:	
Contract Date:	
Software Modules Purchased:	
Annual Budget:	
Population:	

COST PROPOSAL

(Section 9)

Costs should include the complete costs for the proposed solution. Use additional pages as needed to provide additional cost detail.

The following costs must be included in your response:

- Application software license fees
- Data conversion costs
- Modification costs if denoted to satisfy a requirement
- Implementation, Training & Consulting Services costs
- Annual software maintenance cost for five years
- Estimated Travel Costs
- 3rd Party Software
- System Software
- Hardware (if required)

No additional charges, other than those listed on the price breakdown sheets, shall be made. All shipping and insurance costs to and from the site shall be included in this proposal. All payments to shipping agents and for insurance fees shall be made directly by the Vendor. Vendor shall be responsible for all arrangements for the shipment of equipment / software to the Organization's prepared site. Specific payment terms will be negotiated as part of the final contract. It is expected that certain payments will be made upon delivery of the software with additional payments made based on specific project milestones. The Organization may during the implementation period or thereafter require modifications, interfaces, conversion or other services from Vendor. The vendor agrees to provide a written Change Order describing the work to be performed and estimating the costs, including expenses, for the Organization's approval before any work is initiated by Vendor. Vendor will not exceed the costs set forth in the mutually agreed to Change Orders without justification, in writing, that is acceptable to the Organization.

PROPOSAL SIGNATURE FORM

(Section 10)

The undersigned, as proposal responder, declares that he/she has carefully examined all the items of the Specifications and Instructions herein that he/she fully understands and accepts the requirements of the same, and he/she agrees to furnish the specified items and will accept, in full payment therefore, the amount specified below.

Proposals shall include installation services, and the successful respondent shall obtain all required permits and pay fees required.

Firm Name:

Date:

Address:

Telephone:

Signature:

Local Vendor Preference

For purchases, bids, proposals, or contracts less than \$100,000 the local vendor may be given an opportunity to match the lowest price proposal, if the quotation or bid of the local vendor is within 5% of the lowest price proposal by a non-local vendor. In the event a local vendor matches the lowest price proposal, including all other terms, quality, service, and conditions, then the local vendor shall be awarded the contract.

In the event the price proposal of more than one local vendor is within 5% of the lowest overall price proposal of a non-local vendor, the local vendor with the lowest proposal will be given the first opportunity to match the lowest overall price proposal. If this local vendor declines to match the price proposal, then the local vendor with the next bid within 5% will be given the opportunity to match the lowest proposal. This process will continue with all local vendors having proposals within 5% of the lowest overall bid by a non-local vendor.

Local Vendor means a bidder or offeror which operates and maintains a brick-and- mortar business, i.e. a physical business address, within the limits of the State of Georgia and has a current business license, has paid in full all real and personal taxes owed the City, County, and State; as applicable, is considered a vendor in good standing with the City and can obtain an active vendor status. Priority will be given to local vendors within the municipal boundaries of Spalding County, second priority will extend to local vendors within Georgia.

The remainder of this page was intentionally left blank.

Enterprise Resource Planning Software & Services
RFP #2024-019 Bid

Proposal Form
Exhibit A

Total Cost of ERP Software & Services \$ _____

The following statement must be signed and submitted with bid. Failure to sign this statement will render the bid invalid.

“I certify that this bid is made without prior understanding, agreement or connection with any corporation, firm or person submitting a bid for the same materials, supplies, or equipment, and is in all respect fair and without collusion or fraud. I understand that collusive bidding is a violation of State and Federal law and can result in fines, prison sentences, and civil damage awards. I agree to abide by all conditions of this bid and certify that I am authorized to sign this bid for the bidder.”

Company Name: _____ Person Authorized to Sign: _____

Address: _____ Title: _____

City: _____

State: _____ Zip _____ Signature: _____

Telephone Number: () _____ Email: _____

This _____ Day of _____, 2023.

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 2023

NOTARY PUBLIC:- _____ My Commission Expires: _____

Contractor Affidavit under O.C.G.A. §13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. §13- 10-91 , stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services, has registered with Spalding County, and is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. §13-10-9 1.

Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. §13- 10-9 1(b). Contractor here by attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor Name of Project

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____ day of _____, 2023

City, _____ State _____

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 2023

NOTARY PUBLIC:- _____

My Commission Expires: _____

<p>Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service</p>	<p>Request for Taxpayer Identification Number and Certification</p> <p><small>a Go to www.irs.gov/FormW9 for instructions and the latest information.</small></p>	<p>Give Form to the requester. Do not send to the IRS.</p>																				
<p>1. Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/>																						
<p>2. Business name/disregarded entity name, if different from above</p> <hr/>																						
<p>Print or type. See specific instructions on page 3.</p>	<p>3. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p> <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) ^{a1} _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ^{a1} _____ </p>		<p>4. Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="text-align: right;"><small>(Applies to accounts maintained outside the U.S.)</small></p>																			
	<p>5. Address (number, street, and apt. or suite no.) See instructions.</p> <hr/>		<p>Requester's name and address (optional)</p> <hr/>																			
	<p>6. City, state, and ZIP code</p> <hr/>																					
<p>7. List account number(s) here (optional)</p> <hr/>																						
<p>Taxpayer Identification Number (TIN)</p>																						
<p>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 instructions for Part I, later. 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>, later.</p> <p>Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.</p>																						
		<p>Social security number</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> <td style="width:20px; height:20px;"></td> </tr> </table>																				
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<p>Part II Certification</p>																						
<p>Under penalties of perjury, I certify that:</p> <ul style="list-style-type: none"> 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 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 I am a U.S. citizen or other U.S. person (defined below); and The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. <p>Certification instructions. 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 for Part II, later.</p>																						
<p>Sign Here</p>	<p>Signature of U.S. person ^{a1}</p> <hr/>	<p>Date ^{a1}</p> <hr/>																				
<p>General Instructions</p> <p>Section references are to the Internal Revenue Code unless otherwise noted.</p> <p>Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.</p> <p>Purpose of Form</p> <p>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.</p>																						
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**S.A.V.E. Affidavit Verifying Status for Business Transactions
with SPALDING COUNTY GOVERNMENT**

By executing this affidavit under oath, as an applicant for a Spalding County Government Business License or Occupational Tax Certificate, Alcohol License, Taxi Permit, or other public benefit as referenced in O.C.G.A. Section 50-36-1, I am stating the following with respect to my application for a Spalding County Government **public benefit** (Purchase Orders, etc), I am stating the following for:

(Name of person applying on behalf of business, corporation, partnership, or other private entity)

As a representative of:

(Name, Address and Phone # of the business, corporation, partnership, or other private entity must be identified)

Check only one:

- 1) ___ I am a United States citizen
- 2) ___ I am a legal permanent resident of the United States 18 years of age or older, please include Alien Registration Number below signature *
- 3) ___ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States *

*** OCGA § 50-36-1(e)(2) requires that aliens under the Federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien," legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:**

Number and Document Source

In making the above statement under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of OCGA Section 16-10-20.

Signature of Applicant Printed Name Date

*Alien Registration number for non-citizens

NOTARIZATION REQUIRED:

APPLICANT'S IDENTIFICATION:**

Sworn to and subscribed before me
THIS THE ___ DAY OF _____, 20__.

Notary Public

ID type: _____
Number: _____
Expiration: _____
State of issuance: _____
E-mail: _____

**** A copy of a 'secure & verifiable' ID (driver license, passport, state-issued ID, etc.) must accompany this form.**