



## TOWNS COUNTY, GA

### REQUEST FOR BID

Towns County, GA, (herein "County") Sole Commissioner is seeking sealed bids from qualified vendors to provide Propane Fuel Delivery (herein "services") to various Towns County Government locations in accordance with the specifications, terms and conditions outlined in the Bid Package which can be picked up at the Commissioner's office located at 48 River Street, Suite B, Hiawassee, GA 30546 or electronically by calling Andrea at 706-896-2276.

All bids must be received by Monday July 29, 2024 at 4:30pm EST. Any bids received past this time may be rejected. Bids can be submitted by mail or hand-delivered in a sealed envelope plainly marked:

Propane Bid- Towns County  
Towns County Commissioner  
48 River Street, Suite B  
Hiawassee, GA 30546

NOTICE- Bidders are responsible for delivering their bids to the above address by the due date provided. The County is not responsible for any delay in delivery by the Bidder's choice of delivery.

The county reserves the right to reject any and all bids for any reason.

The bids will be opened at a called county meeting held on Tuesday July 30, 2024, at 11:00am EST. The County is not bound to accept the lowest bid, but will evaluate every bid proposal to determine which bid is most advantageous for the county.

**1.0 GENERAL QUALIFICATIONS**

- 1.1 Bidders must be in the regular business of providing similar services, be licensed, insured, and bonded ( if required) to perform services in the state of Georgia.
- 1.2 Bidders must be a participant in EVERIFY and complete and return the EVERIFY affidavit provided in the bid documents. Failure to provide the EVERIFY affidavit OR any other required document may be cause for the bid to be rejected.
  - 1.2.1 Bid Response Sheet
  - 1.2.2 E-Verify Affidavit
  - 1.2.3 Completed W-9
  - 1.2.4 Current Certificate of Insurance

**2.0 SCOPE OF WORK- the Contractor shall be required:**

- 2.1 To provide 75,000 (+ /- 10%) gallons of HDS grade Propane to the County at a set price delivered to various locations (provided in Section \_\_\_\_).
- 2.2 To reclaim all propane stored in the present County leased tanks at the rate agreed to and replace the existing leased tanks with their own tank at no extra charge to County for replacement or any monthly lease charges. All tanks must meet the A.S.M.E. requirements for propane.
- 2.3 Delivery will either be automatic delivery or “will-call” at the County’s discretion. The delivery driver MUST deliver the delivery tickets to the County’s Accounts Payable at 48 River Street, Suite B, Hiawassee, GA for the propane invoices to be processed.
- 2.4 The winning contractor must provide propane to county employees at no more than 15 cents per gallon more than the county’s set price and provide tanks where necessary at no charge to the employees for either installation or monthly lease charges for use of the tanks. The County will provide the contractor with an updated employee list on an annual basis when requested.
- 2.5 The contractor will not add any fees to the county nor employee invoices except those mandated by law. The county has a tax-exempt status. The employees will pay all taxes.
- 2.6 The contractor shall be required to maintain information detailing propane purchases in terms of gallons, cost, date of delivery and delivery locations. This information shall be provided to the County within 10 days when requested.
- 2.7 The contractor shall include in their bid the cost-of-Service Call Labor Prices.

**3.0 DELIVERY LOCATIONS- Included herein are the locations for Propane delivery under this contract, tank sizes, and whether the tanks are county owned or will need to be provided by the contractor.**

- 3.1 PLEASE SEE TABLE A (attached)

#### **4.0 TERMS AND CONDITIONS**

4.1 The Contract will be for a term of 12 months. The contract may be renewed up to 5 times upon agreement between the County and the winning bidder.

4.2 Either party has the right to terminate the Contract under material breach, change in circumstances, insolvency, and mutual agreement. To terminate the Contract, the terminating party must provide 60 days of written notice to the other party.



### Bid Response Sheet

Company

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Address

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Contact

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Phone

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Email address

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Quantity: 75,000 gallons +/- 10%

Locked Price: \_\_\_\_\_ per gallon for 12 months from Contract signing

Employee Locked Price: \_\_\_\_\_ per gallon for 12 months from Contract signing

Service Call Labor Price: \_\_\_\_\_

Payment Terms: \_\_\_\_\_

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Signature of Authorized Representative

# TABLE A

Name of Facility	Location	No. & Size of Tank	Owner	Other Information
Towns County Jail	4070 GA-339, Young Harris, GA 30582	2/1000 gallon	County	Underground Tank
Foster Park Gym	150 Foster Park Rd Young Harris, GA 30582	2/1000 gallon	Vendor	Above Ground
Food Pantry	1294 Jack Dayton Cir Young Harris, GA 30582	1/ 500 gallon	County	Underground Tank
EMS Station West	1400 Jack Dayton Cir Young Harris, GA 30582	1/500 gallon	County	Underground Tank
Transit	1298 Jack Dayton Cir Young Harris, GA 30582	1/500 gallon	Vendor	Above Ground
Health Dept	1104 Jack Dayton Cir Young Harris, GA 30582	1/ 1000 gallon	County	Underground Tank
Daycare	1112 Jack Dayton Cir Young Harris, GA 30582	1/1000 gallon	Vendor	Above Ground
Foster Park Gym	150 Foster Park Rd Young Harris, GA 30582	2/1000 gallon	Vendor	Above Ground
Old Recreation Gym	900 Main St N Hiawassee, GA 30546	1/1000 gallon	County	Underground Tank
Road Dept-Co Barn	780 Tater Ridge Dr Hiawassee, GA 30546	2/ 500 gallon	County	Underground Tank
Senior Citizen Bld	954 Main St N Hiawassee, GA 30546	1/1000 gallon	Vendor	Above Ground
Civic Center	67 Lakeview Cir Hiawassee, GA 30546	1/1000 gallon	Vendor	Above Ground
Towns Co Library	99 Berrong St Hiawassee, GA 30546	1/500	County	Underground
Historical Museum	91 Berrong St Hiawassee, GA 30546	1/ 500 gal & 1/250	County	Underground
Fire Station 1	156 Sims Cir Hiawassee, GA 30546	1/500 gallon	Vendor	Above Ground
Fire Station 2	222 St Hwy 66 Young Harris, GA 30582	1/500 gallon	County	Underground Tank
Fire Station 3	569 Gander Gap Rd Hiawassee, GA 30546	1/500 gallon	Vendor	Above Ground
Fire Station 4	6327 US Hwy 76 E Hiawassee, GA 30546	1/500 gallon	Vendor	Above Ground
Fire Station 5	1840 Underwood Rd Hiawassee, GA 30546	1/1000 gallon	Vendor	Above Ground
Fire Station 6	441 Sunnyside Rd Hiawassee, GA 30546	1/1000 gal & 1/500 gal	Vender	Above Ground
EMS East	1505 US Hwy 76 E Hiawassee, GA 30546	1/500 gallon	County	Underground Tank



**Bid Response Sheet**

Company

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Address

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Contact

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Phone

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Email address

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Quantity: 75,000 gallons +/- 10%

Locked Price: \_\_\_\_\_ per gallon for 12 months from Contract signing

Employee Locked Price: \_\_\_\_\_ per gallon for 12 months from Contract signing

Service Call Labor Price: \_\_\_\_\_

Payment Terms: \_\_\_\_\_

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Signature of Authorized Representative

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. 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> 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 <b>not</b> 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) ▶ _____	4 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) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

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 *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>											
<b>or</b>											
<b>Employer identification number</b>											

## Part II Certification

- Under penalties of perjury, I certify that:
1. 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
  2. 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
  3. I am a U.S. citizen or other U.S. person (defined below); and
  4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**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.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**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](http://www.irs.gov/FormW9).

### Purpose of Form

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.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - 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 What is backup withholding, later.*

**TOWNS COUNTY**  
**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 on behalf of Towns County has registered with, 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. § 13-10-91. 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. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

E-VERIFY NUMBER: \_\_\_\_\_

AUTHORIZATION DATE: \_\_\_\_\_

CONTRACTOR NAME: \_\_\_\_\_

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

NAME OF PUBLIC EMPLOYER: \_\_\_\_\_

NAME OF PROJECT: \_\_\_\_\_

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

Executed on 2024 in \_\_\_\_\_ (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 \_\_\_\_\_, 2024.

\_\_\_\_\_  
NOTARY PUBLIC  
My Commission Exp