

## Amendment 2

Solicitation Number: USC-RFQ-3619-CH

Date Issued: April 24, 2020

Procurement Officer: Caleisha Hayes

Phone: 803-777-4115

E-Mail Address: caleisha@mailbox.sc.edu

Mailing Address 1600 Hampton Street, Ste 606

DESCRIPTION: Furnish, Deliver and Install Micro Gas Chromatography Workstations and Software

USING GOVERNMENTAL UNIT: UNIVERSITY OF SOUTH CAROLINA

Quotes must be emailed to <a href="mailto:caleisha@mailbox.sc.edu">caleisha@mailbox.sc.edu</a>

The Term "Offer" Means Your "Bid" or "Proposal". Your offer must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior. See "Submitting Your Paper Offer or Modification" provision.

SUBMIT OFFER BY (Opening Date/Time): May 1, 2020 at 12:00 PM	(EST) (See "Deadline For Submission Of Offer" provision)				
QUESTIONS MUST BE RECEIVED BY: April 28, 2020 at 11:00 AM	(See "Questions From Offerors" provision)				
CONFERENCE TYPE: N/A DATE & TIME:  (As appropriate, see "Conferences - Pre-Bid/Proposal" & "Site Visit" provisions)	LOCATION: N/A				
You must submit a signed copy of this form with Your Offer. By signing agree to hold Your Offer open for a minimum of Thirty (30) calendar day					
NAME OF OFFEROR	Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the Offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal				
(full legal name of business submitting the offer)	entity, i.e., a separate corporation, partnership, sole proprietorship, etc.				
AUTHORIZED SIGNATURE	DATE SIGNED				
(Person must be authorized to submit binding offer to contract on behalf of Offeror.)					
TITLE	STATE VENDOR NO.				
(business title of person signing above)	(Register to Obtain S.C. Vendor No. at www.procurement.sc.gov)				
PRINTED NAME	STATE OF INCORPORATION				
(printed name of person signing above)	(If you are a corporation, identify the state of incorporation.)				
OFFEROR'S TYPE OF ENTITY: (Check one)	(See "Signing Your Offer" provision.)				
Sole Proprietorship Partnership	Other				
Corporate entity (not tax-exempt) Corporation (tax-exempt)  COVER PAGE – PAPER ONLY (MAR. 2015)	Government entity (federal, state, or local)				

## PAGE TWO (Return Page Two with Your Offer)

			(Keturi	n Page IW	o wi	th Your One	r)				
HOME OFFICE ADDRESS (Address for Offeror's home office / principal place of business)						NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)					
						Area Code	- Number - Exte	ension		Facsimile	
						E-mail Addı	ress				
(See "Payment" clause)				be	ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)						
Daymont Address ss	од Цој		™aa Addwagg			Order Address same as Home Office Address					
Payment Address same as Home Office Address  Payment Address same as Notice Address (check only one)					Order Address same as Notice Address (check only one)						
ACKNOWLEDGMEN	T OF AM	END	MENTS								
Offerors acknowledges re Solicitation" Provision)	eceipt of a	mendı	ments by indica	iting amend	lmen	t number and	its date of issue.	(See "A	Amendme	ents to	
Amendment No.	Amendr Issue D		Amendment No.	Amendm Issue Da		Amendmen No.	t Amendment Issue Date		endment No.	Amendment Issue Date	
DISCOUNT FOR BRO	NADT.	10.4	C. 1 1 D (0/	() 1 20 C	11	D (0/)	20 C 1 - 4 D	(0/)	l C	1 1 D (0/)	
DISCOUNT FOR PRC PAYMENT (See "Discount for Prompt P clause)		10 0	Calendar Days (%	ys (%) 20 Calend		ar Days (%)	30 Calendar Days (%)		Calendar Days (%)		
PREFERENCES - A NOTI preferences available to in-s Section 11-35-1524 of the SALL THE PREFERENCE BY ITEM OR LOT. VE PREFERENCES. THE I CERTIFYING THAT YOU PREFERENCE CAN HAVE	state vendor South Carol S MUST B ENDORS A REQUIRED DUR OFFE	rs, vend lina Co EE CLA ARE ( MENT ER QU	dors using in-state ode of Laws. A state	te subcontracts summary of the summa	ctors, the no D BY FULI CHA FERI	and vendors seew preferences  LINE ITEM, A LY REVIEW ANGED. IF Y ENCE YOU'V	elling in-state or US is available at www REGARDLESS OF THE STATUTI YOU REQUEST	end procu W.procu F WHE E BEF A PR	oducts. The strength of the st	nis law appears in s.gov/preferences. WARD IS MADE AIMING ANY CE, YOU ARE	
PREFERENCES - ADDRE space provided below. An Contractor Preference (11-3 required, but can be benefic  In-State Office Address In-State Office Address	in-state off 35-1524(C)(eial, if you a ss same as I	ice is 1 (1)(iii)) are clain	necessary to claim ). Accordingly, you ming the Residen Office Address	m either the ou must prov nt Subcontrac	e Resi vide t ctor P	ident Vendor P his information	Preference (11-35-1 to qualify for the p	524(C)	(1)(i)&(ii)	) or the Resident	

## **PURPOSE OF THE AMENDMENT – Reinstatement of Solicitation**

This Solicitation is hereby reinstated. There have been no changes made to the Scope of Work/Specifications
outlined in the Solicitation. Please review the Cover Pages of this Amendment for updated deadlines.

Questions and quotes must be submitted via email to: <a href="mailto:caleisha@mailbox.sc.edu">caleisha@mailbox.sc.edu</a> by the dates on Cover Page 1.

\*\*\* END OF AMENDMENT \*\*\*