

BID SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION			
Company:	David's Custom Cleaning		
Address:	PO, Box 2595		
City:	Harrison	State: AR	Zip Code: 72601
Business Designation:	<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit		
Minority and Women-Owned Designation*:	<input type="checkbox"/> Not Applicable <input type="checkbox"/> American Indian <input type="checkbox"/> Service-Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Women-Owned <input type="checkbox"/> Asian American <input type="checkbox"/> Pacific Islander American		
AR Certification #: _____ * See Minority and Women-Owned Business Policy			
PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for bid solicitation related matters.</i>			
Contact Person:	Angela Olivan	Title:	Co-owner
Phone:	870-204-0886 / 870-741-0888	Alternate Phone:	870-391-9194
Email:	olivans2005@yahoo.com		
CONFIRMATION OF REDACTED COPY			
<input checked="" type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided in the Response Packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>			
COMBINED CERTIFICATIONS FORM			
Prospective Contractor has included, in this submission packet, the signed Attachment H-Combined Certifications for Contracting with the State of Arkansas.			

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:

Authorized Signature: David Olivan Title: owner
 Printed/Typed Name: David Olivan Date: 12/30/24

SECTIONS 1 - 4 VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all requirements as shown in the bid solicitation.

Vendor Name:	David's Custom Cleaning David Olivian	Date:	12/30/24
Signature:	David Olivian	Title:	Owner
Printed Name:	David Olivian		

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information:

Subcontractor's Company Name	Street Address	City, State, ZIP

☒ **PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

MINIMUM QUALIFICATIONS

- In accordance with Section 2.3.B, Provide the name, address, and telephone number of the supervisor that will inspect the building at least once a week to ensure that compliance with all specifications of this solicitation are met:

Name: Jessica Tacker area manager
Address: 3039 Olyler Rd. Clinton, AR 72031
Phone Number: 501-757-2919

DOCUMENTATION CHECKLIST

As outlined in section 2.3 Minimum Qualifications in the solicitation document, please provide the following:

- ✓• Active registration from the Arkansas Secretary of State's Office, or other state approved documentation
- ✓• Official Bid Price Sheet
 - All documents provided in the Bid Response Packet
- ✓• Copy of Vendor's Equal Opportunity Policy
- ✓• Signed Addenda, if applicable
- ✓• EO 98-04 Disclosure Form (Attachment A)
- ✓• Combined Certifications (Attachment H)
- ✓• Client History Form (Attachment I)
- ✓• Mandatory Site Visit Verification Form (Attachment J)

COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – MISSISSIPPI CO.

Printed Name:

Signature:

Date of Site Visit:

COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – OUACHITA CO.

Printed Name:

Signature:

Date of Site Visit:

COUNTY ADMINISTRATOR or DESIGNEE INFORMATION – RANDOLPH CO.

Printed Name:

Pamela Bohn

Signature:

Pamela Bohn

Date of Site Visit:

12/18/24

ATTACHMENT J - SITE VISIT VERIFICATION FORM

- Present this Site Visit Verification Form to the County Administrator or Designee for signature upon completion of the site visit for each location being bid.
- Submit the signed Site Visit Verification Form with the Bid Response Packet at bid submission.

This signed Site Visit Verification Form serves as verification that the Prospective Contractor or representative named below was present and participated in the site visit as required by Competitive Bid 710-25-028 for Janitorial Services.

PROSPECTIVE CONTRACTOR'S REPRESENTATIVE INFORMATION

Company Name:	David's Custom Cleaning
Representative's Printed Name:	Sunny Schumacher
Signature:	<i>[Signature]</i>

COUNTY ADMINISTRATOR or DESIGNEE INFORMATION - CHICOT CO.

Printed Name:	
Signature:	
Date of Site Visit:	

COUNTY ADMINISTRATOR or DESIGNEE INFORMATION - COLUMBIA CO.

Printed Name:	
Signature:	
Date of Site Visit:	

COUNTY ADMINISTRATOR or DESIGNEE INFORMATION - CONWAY CO.

Printed Name:	Christine Henley
Signature:	<i>[Signature]</i>
Date of Site Visit:	12/30/24

COUNTY ADMINISTRATOR or DESIGNEE INFORMATION - INDEPENDENCE PROCESSING CENTER

Printed Name:	
Signature:	
Date of Site Visit:	

Site Visit Verification

Bid No. 710-25-028



ARKANSAS
DEPARTMENT OF
**HUMAN
SERVICES**

Division of County Operations

P.O. Box 447, 114 E Old Main St, Yellville, AR 72687

P: 870.449.4058 F: 870.449.6720 TDD: 501.682.8933

3/14/2024

To Whom it May Concern,

I am pleased to recommend David's Custom Cleaning to present you with top-notch cleaning services for your company. We have been using their cleaning services for a couple of years now and have always been satisfied with the cleaning quality.

From using their services, they have always been punctual and delivered more than expected. They have provided some of the most dependable services. Aside from that, the ladies are enthusiastic cleaners that give their best while working.

Thank you for your time. I am hoping that you will try David's Custom Cleaning services for your office, as well.

Sincerely,

Krista McCalla

County Administrator



Division of County Operations
BOONE COUNTY

Delisa.martin@dhs.arkansas.gov

204 Bucher Dr, PO Box 408, Mountain Home, AR 72653
870-425-6011 · Fax: 870-425-9116
TDD: 501-682-8933



March 12, 2024

To: Whom it may concern

From: DeLisa Martin
County Administrator
Department of Human Services
Baxter County

Topic: Letter of Recommendation

I would like to offer this letter as my recommendation for David's Custom Cleaning in their bid for work with the State of Arkansas. I have had the privilege of working with David and Angela since July of 2023 here in Baxter County. They have by far done the best job as our janitor by far. They are responsive to request and needs of the office. They are always available to me either by email or by phone and they are very responsive.

I would highly recommend David's Customer Cleaning for the bid for the work with the State of Arkansas. They are above and beyond many of the other vendors who tend to bid on our janitorial contracts.

If you have any questions, please feel free to contact me at any time.

Respectfully,

A handwritten signature in black ink that reads "DeLisa Martin". The signature is fluid and cursive.

DeLisa Martin



ARKANSAS
DEPARTMENT OF
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SERVICES**

Division of County Operations

P.O. Box 447, 114 E Old Main St, Yellville, AR 72687

P: 870.449.4058 F: 870.449.6720 TDD: 501.682.8933

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From using their services, they have always been punctual and delivered more than expected. They have provided some of the most dependable services. Aside from that, the ladies are enthusiastic cleaners that give their best while working.

Thank you for your time. I am hoping that you will try David's Custom Cleaning services for your office, as well.

Sincerely,

Krista McCalla

County Administrator



**Division of County Operations
BOONE COUNTY**

christopher.holder@arkansas.gov

2126 Capps Road, PO Box 1096, Harrison, AR 72601
870-741-6107 • Fax: 870-741-6198
TDD: 501-682-8933



February 23, 2023

To: Whom it may concern

From: Chris S. Holder
County Administrator
Department of Human Services
Boone County

Topic: Letter of Recommendation

I would like to offer this letter as my recommendation for David's Custom Cleaning in their bid for work with the State of Arkansas. I have had the privilege of working with David and Angela for several years now here in Boone County. They have by far done the best job as our janitor by far. They are responsive to request and needs of the office. They are always available to me either by email or by phone and they are very responsive.

I would highly recommend David's Customer Cleaning for the bid for the work with the State of Arkansas. They are above and beyond many of the other vendors who tend to bid on our janitorial contracts.

If you have any questions please feel free to contact me at any time.

Respectfully,

Chris S. Holder

Details

For service of process contact the [Secretary of State's office](#).

LLC Member information is now confidential per Act 865 of 2007

For access to our corporations bulk data download service [click here](#).

Corporation Name
DAVIDS CUSTOM CLEANING CO.

Fictitious Names
—

Filing #
811043036

Filing Type
For Profit Corporation

Filed Under Act
Dom Bus Corp; 958 of 1987

Status
Good Standing

Principal Address
—

Reg. Agent
DAVID OLIVAN

Agent Address
6519 PARKWOOD LANE HARRISON, AR 72601

Date Filed
11/19/2013

Officers
DAVID OLIVAN, Incorporator/Organizer
ANGELA OLIVAN, Incorporator/Organizer
DAVID C OLIVAN, President
FEIGHERT FINANCIAL, LLC, Tax Preparer
ANGELA M OLIVAN, Vice-President
ANGELA M OLIVAN, Secretary

Contract Number _____
Attachment Number _____

Action Number _____

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR:

SUBCONTRACTOR NAME:

☐ Yes ☒ No

TAXPAYER ID NAME:

IS THIS FOR:

Goods? ☐ Services? ☒ Both? ☐

YOUR LAST NAME: Olivian

FIRST NAME: David

M.I.:

ADDRESS: P.O. BOX 2595

CITY: Harrison

STATE: AR

ZIP CODE: 72601

COUNTRY: US

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	Person's Name(s)	Relation
	Current	Former		From MM/YY	To MM/YY			
General Assembly								
Constitutional Officer								
State Board or Commission Member								
State Employee								

☒ None of the above applies

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and what is his/her position of control?	Ownership Interest (%)	Position of Control
	Current	Former		From MM/YY	To MM/YY			
General Assembly								
Constitutional Officer								
State Board or Commission Member								
State Employee								

☒ None of the above applies

Contract Number _____
Attachment Number _____
Action Number _____

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.
2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.
3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature David Olivan Title Owner Date 12/30/24
Vendor Contact Person Angela Olivan Title CO-OWNER Phone No. 870-224-0886
870-741-0868

Agency use only
Agency Number 0710 Agency Name Department of Human Services Agency Contact Person _____ Contact Phone No. _____ Contract or Grant No. _____



COMBINED CERTIFICATIONS FOR CONTRACTING WITH THE STATE OF ARKANSAS

Pursuant to Arkansas law, a vendor must certify as specified below and as designated by the applicable laws.

1. **Israel Boycott Restriction:** For contracts valued at \$1,000 or greater.

A public entity shall not contract with a person or company (the "Contractor") unless the Contractor certifies in writing that the Contractor is not currently engaged in a boycott of Israel. If at any time after signing this certification the Contractor decides to boycott Israel, the Contractor must notify the contracting public entity in writing. See Arkansas Code Annotated § 25-1-503.

2. **Illegal Immigrant Restriction:** For contracts valued at \$25,000 or greater.

No state agency may contract for services with a Contractor who knowingly employs or contracts with an illegal immigrant. The Contractor shall certify that it does not knowingly employ, or contract with, illegal immigrants. See Arkansas Code Annotated § 19-11-105.

3. **Energy, Fossil Fuel, Firearms, and Ammunition Industries Boycott Restriction:** For contracts valued at \$75,000 or greater.

A public entity shall not contract unless the contract includes a written certification that the Contractor is not currently engaged in and agrees not to engage in, a boycott of an Energy, Fossil Fuel, Firearms, or Ammunition Industry for the duration of the contract. See Arkansas Code Annotated § 25-1-1102.

4. **Scrutinized Company Restriction:** Required with bid or proposal submission.

A state agency shall not contract with a Scrutinized Company or a company that employs a Scrutinized Company as a subcontractor. A Scrutinized Company is a company owned in whole or with a majority ownership by the government of the People's Republic of China. A state agency shall require a company that submits a bid or proposal for a contract to certify that it is not a Scrutinized Company and does not employ a Scrutinized Company as a subcontractor. See Arkansas Code Annotated § 25-1-1203.

By signing this form, the Contractor agrees and certifies they are not a Scrutinized Company and they do not currently and shall not for the aggregate term of any resultant contract:

- Boycott Israel.
- Knowingly employ or contract with illegal immigrants.
- Boycott Energy, Fossil Fuel, Firearms, or Ammunition Industries.
- Employ a Scrutinized Company as a subcontractor.

Contract Number: 710-25-028 Description: janitorial

Agency Name: DHS Conway County

Vendor Number: 100228877 Vendor Name: David's Custom Cleaning

David Oliver
Vendor Signature

12/30/24
Date

Attachment I

Janitorial Services

Instructions: This form is intended to help the State gain a more complete understanding of each Respondent's experience. This form **must** be completed completely and accurately.

The State reserves the right to verify the accuracy of these answers by contacting any of the listed clients, and all applicable clients **must** be listed. Omission of a client will constitute a failure to complete this form.

For purposes of this form, the "client" is not an individual but the entity which held the contract. By way of explanation, in the Contract resulting from this IFB, Arkansas DHS will be the client. For each listed client, Respondents may (but are not required) provide the contact information for a person at the client entity who is knowledgeable of the named project. If the State contacts clients listed on this form, the State reserves the right to contact the listed individual or another person at the listed client.

The boxes below each prompt will expand if necessary. The form **must** be signed (please see the final page) by the same signatory who signed the Response Signature Page.

1. Please list clients where you (the prime contractor only) served as the prime contractor or subcontractor for providing janitorial services for at least two (2) years. For each client, please specify the organization/agency/division. Please specify the duration of services for each. If there are no contracts which meet this definition, please state "none."

Boone County DHS- 5yrs currently service
Marion County DHS- 4yrs currently service
Baxter County DHS- 1.5yrs currently service
Lawerence County DHS- 4yrs currently service

Authorized Signature: _____

David Olivan

Title: _____

Owner

Printed/Typed Name: _____

David Olivan

Date: _____

12/30/24



COMBINED CERTIFICATIONS FOR CONTRACTING WITH THE STATE OF ARKANSAS

Pursuant to Arkansas law, a vendor must certify as specified below and as designated by the applicable laws.

- Israel Boycott Restriction:** For contracts valued at \$1,000 or greater.
A public entity shall not contract with a person or company (the "Contractor") unless the Contractor certifies in writing that the Contractor is not currently engaged in a boycott of Israel. If at any time after signing this certification the Contractor decides to boycott Israel, the Contractor must notify the contracting public entity in writing. See Arkansas Code Annotated § 25-1-503.
- Illegal Immigrant Restriction:** For contracts valued at \$25,000 or greater.
No state agency may contract for services with a Contractor who knowingly employs or contracts with an illegal immigrant. The Contractor shall certify that it does not knowingly employ, or contract with, illegal immigrants. See Arkansas Code Annotated § 19-11-105.
- Energy, Fossil Fuel, Firearms, and Ammunition Industries Boycott Restriction:** For contracts valued at \$75,000 or greater.
A public entity shall not contract unless the contract includes a written certification that the Contractor is not currently engaged in and agrees not to engage in, a boycott of an Energy, Fossil Fuel, Firearms, or Ammunition Industry for the duration of the contract. See Arkansas Code Annotated § 25-1-1102.
- Scrutinized Company Restriction:** Required with bid or proposal submission.
A state agency shall not contract with a Scrutinized Company or a company that employs a Scrutinized Company as a subcontractor. A Scrutinized Company is a company owned in whole or with a majority ownership by the government of the People's Republic of China. A state agency shall require a company that submits a bid or proposal for a contract to certify that it is not a Scrutinized Company and does not employ a Scrutinized Company as a subcontractor. See Arkansas Code Annotated § 25-1-1203.

By signing this form, the Contractor agrees and certifies they are not a Scrutinized Company and they do not currently and shall not for the aggregate term of any resultant contract:

- Boycott Israel.
- Knowingly employ or contract with illegal immigrants.
- Boycott Energy, Fossil Fuel, Firearms, or Ammunition Industries.
- Employ a Scrutinized Company as a subcontractor.

Contract Number: 710-25028 Description: janitorial

Agency Name: DHS Randolph County

Vendor Number: 100228877 Vendor Name: David's Custom Cleaning

David Oliver
Vendor Signature

12/30/24
Date

Details

For service of process contact the Secretary of State's office.

LLC Member information is now confidential per Act 865 of 2007

For access to our corporations bulk data download service [click here](#).

Corporation Name
DAVIDS CUSTOM CLEANING CO.

Fictitious Names
—

Filing #
811043036

Filing Type
For Profit Corporation

Filed Under Act
Dom Bus Corp; 958 of 1987

Status
Good Standing

Principal Address
—

Reg. Agent
DAVID OLIVAN

Agent Address
6519 PARKWOOD LANE HARRISON, AR 72601

Date Filed
11/19/2013

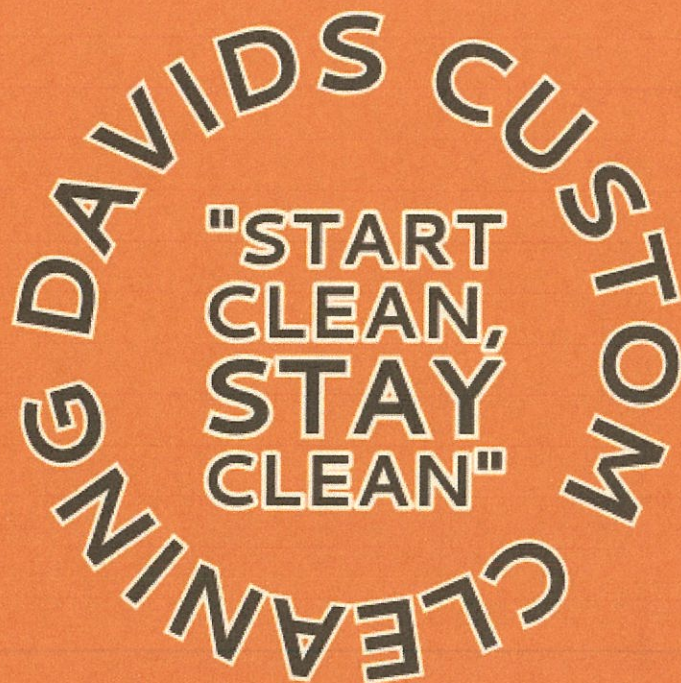
Officers
DAVID OLIVAN, Incorporator/Organizer
ANGELA OLIVAN, Incorporator/Organizer
DAVID C OLIVAN, President
FEIGHERT FINANCIAL, LLC, Tax Preparer
ANGELA M OLIVAN, Vice-President
ANGELA M OLIVAN, Secretary

Foreign Name
N/A

Foreign Address
—

State of Origin
—

Purchase a Certificate of Good Standing for this Entity.
Pay Franchise Tax for this corporation



**Davids Custom Cleaning is an
Equal Opportunity Employer**



David's Custom Cleaning is an equal-opportunity employer that complies with EEOC rules and regulations. David's Custom Cleaning is committed to diversity, equity, and inclusion and doesn't discriminate based on race, age, disability, or other non-merit characteristics. David's Custom Cleaning provides on-the-job training for all positions within our organization. Employees will have 24-hour access to a janitorial manager with any questions about safety or job requirements. David's Custom Cleaning provides monthly updates and as-needed training through our monthly newsletter. David's Custom Cleaning will retrain and offer weekly inspections to any crew member who does not perform to our cleaning standards, as detailed in the company handbook. David's Custom Cleaning is committed to the success of each crew member on our cleaning team.

OFFICIAL BID PRICE SHEET

710-25-028 Janitorial Services

All costs **must** be included in the unit price. Costs not included in the unit price below are not billable under a contract established from this solicitation. Bidder must submit a printed copy of the completed Official Bid Price Sheet with bid submission.

Quantities are estimated for bidding purposes only. Quantities may increase or decrease.

Instructions - Enter the unit price per square foot and the monthly amount for each location being bid. Pricing is not required for locations not being bid.

ITEM	DESCRIPTION	ESTIMATED QUANTITY (square feet)	UNIT PRICE (per square foot)	MONTHLY AMOUNT
1	Chicot County	10,000		
2	Columbia County	14,328		
3	Conway County	10,560	18¢	1,900.80
4	Independence Processing Center	13,166		
5	Mississippi	19,187		
6	Quachita	21,630		
7	Randolph	8,103	18¢	1,458.54

Number of hours bidder proposes to clean per day:

Randolph / Conway
3 hrs / 3.5-4 hrs.

AUTHORIZED SIGNATURE:

By my signature below, I certify that I am authorized by the respondent to submit this bid on his/her behalf.

Vendor Name:

Signature:

Printed Name:

Date:

Title:

David's Custom Cleaning
David Oliver
David Oliver
12/30/24
Owner