



# TOWN OF WALLINGFORD

Department of Finance  
Bureau of Purchases  
45 South Main Street  
Wallingford, Connecticut 06492  
Telephone (203) 294-2115  
Fax (203) 294-2119

BID NO. <b>24-070</b>	DATE OF BID OPENING <b>January 14, 2025</b>	TIME OF BID OPENING <b>2:15 P.M., Prevailing Local Time</b>	INSURANCE REQUIREMENTS <b>Liability See General Terms &amp; Conditions</b>
BID ITEM <b>Fiber Cable Replacement - Elementary and Middle Schools - E-Rate Compliant</b>			
PRE-BID MEETING: LOCATION <b>Parker Farms Elementary School 30 Parker Farms Road</b>		PRE-BID: DATE <b>December 20, 2024</b>	PRE-BID: TIME <b>10:00 A.M.</b>
AMOUNT OF BID SURETY <b>None</b>	PERFORMANCE BOND <b>None</b>	CONTRACT PERIOD OR DATE DELIVERY REQUIRED <b>As Soon As Possible - After 7/1/25</b>	

## INVITATION TO BID

**Sealed proposals will be received by the Purchasing Agent for the Town of Wallingford, in Room 206, Town Hall, 45 South Main Street, Wallingford, Connecticut, 06492, for furnishing the commodities and/or services herein listed to town agencies.**

## AFFIRMATION OF BIDDER

The undersigned bidder affirms and declares:

- 1) That this contract proposal is executed and signed by said bidder with full knowledge and acceptance of the provisions of the General terms & Conditions, Bid Specifications and Bid Proposal which are made a part of the contract.
- 2) That should any part of this proposal be accepted in writing by the Purchasing Agent within sixty (60) calendar days from the date of bid opening, said bidder will furnish and deliver the commodities and/or services for which this proposal is made, in the quantities and at the prices bid, and in compliance with the Specifications.
- 3) That this proposal is covered by surety in the following form as checked. (See Amount of Bid Surety above if required)  
☐ Proposal Bond    ☐ Cashiers Check    ☐ Certified Check    Enclosed in the amount of \$ \_\_\_\_\_

**PROPOSAL:** The undersigned, accepting the conditions set forth herein, hereby agrees in strict accordance therewith, to furnish and deliver the commodities and/or services to the town agency or agencies named at the prices bid herein.

Type of Business	<input checked="" type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sub Chapter S Corp.	<input type="checkbox"/> Corporation
Company Name <b>SYSTEC101, LLC</b>		Doing Business As (Trade Name)		
Business Address <b>418 Broadway STE N</b>		City <b>Albany</b>	State <b>NY</b>	Zip Code <b>12207</b>
Signature of Person Authorized to Sign This Bid		Title <b>Owner</b>	Date <b>01/13/2025</b>	
Print Name of Signer <b>Murat Yildirim</b>		Phone <b>+1 303-537-7575</b>	Fax	
Further information and references on any individual or company placing a bid may be required by the Town of Wallingford prior to the awarding of a bid.				

This Form Must Be Signed & Returned