

Sample Informal Bid Invitation for Fresh, Local Produce
Traverse City Area Public Schools
Traverse City, MI

August 8, 2007

Dear Produce Vendor:

Traverse City Area Public Schools (TCAPS) is now accepting price quotes for fruits & vegetables for delivery to all TCAPS schools for the 2007-2008 school year, as well as any other sites outlined by TCAPS.

If awarded a contract by TCAPS, Vendor(s) may be asked to visit schools within the TCAPS District and present their product(s) to students and staff as an educational tool and interactive method of introducing farm-fresh produce within the cafeteria. All successful Vendor(s) may be asked to meet with TCAPS Administration individually or collectively prior to delivery of produce and/or school presentations. All arrangements between TCAPS and any successful Vendor(s) regarding delivery schedules, ordering, payment and availability/seasonality of produce will be made during the above-mentioned meeting. TCAPS reserves the right to reject any bid for any reason, award contracts to multiple Vendors, and does not guarantee any specific ordering volumes.

Please find the written attached questionnaire for submittal to the Food Service Department, Traverse City Area Public Schools. Also enclosed are the price quote and specification sheets. In the case that the produce variety is not clearly specified, please hand write your proposed variety(s) into the blank space and provide further description as needed. All quotes are to be delivered in a sealed envelope, identified **Produce Service** clearly printed on the outside of the envelope. The quotes must reach the below address by **12 noon on August 29, 2007** and be addressed to the attention of **Kristen Misiak**. Quotes submitted by fax will not be accepted.

The enclosed form(s) must be submitted with your proposal.

Direct all responses, questions, and inquiries to:

Kristen Misiak
Food Service Department
Traverse City Area Public Schools
1180 Cass Road
Traverse City, MI 49684
Phone: 231-933-1911 E-mail: misiakkr@oper.tcaps.net

Sincerely,

Kristen Misiak

Vendor name & location: _____

Owner name & phone: _____

Contact name & phone: _____

Schools you are willing to direct deliver to (see attached list):

Amount of liability insurance coverage (provide policy copy): _____

Other current local customers & contact information: _____

Payment terms (receipt must be left at each delivery, one statement to be paid by TCAPS to vendor): _____

Discounts (volume, quick pay, etc.): _____

List inspections your facility receives from USDA/State/Local Inspectors: _____

How often? _____

Provide copy of latest inspection report(s).

Do you utilize a HACCP plan? _____

If yes, please provide a copy.

If no, please attach a copy of the food safety and sanitation plan that is followed within your operation.

Please outline any methods of pest control utilized within your operation:

Name of Vendor: _____

Signature: _____

Date: _____

Credit/return policy for poor
quality: _____

Are you available to visit school(s) and present your product(s) to students, how produce is grown, etc.? If so, please briefly outline your presentation(s): _____

Is your facility available for student field trips? If so, please briefly outline how the trip would be guided by you or your staff:

Would you be willing to assist in implementing farm to school fundraising projects in which students sell your products within the community?

Vendor's Signature _____

Date _____