

THE SCHOOL BOARD OF VOLUSIA COUNTY
SPECIAL EVENT EQUIPMENT LEASE COMPANIES POLICIES AND PROCEDURES APPLICATION

VENDORS RESPONSIBILITIES:

1. Special Event Equipment Lease Companies offering their services to the VCSB **must be approved prior to contracting with any VCSB School** for the lease of any special event inflatable's or equipment.
2. The Purchasing Department will review each application and once approved will post the company name and contact person on the District website. It can take up to two (2) weeks from the date all information is submitted to the Purchasing Department, to secure approval.
3. Approved Vendor Site Modifications: All changes must be made in writing thirty (30) days prior to the effective date. This includes all modifications, including but not limited to, address changes, change of ownership, change of company name, and changes to required insurance and/or carriers.
4. Insurance Requirements: All Special Event Equipment Lease Companies must have and maintain the following minimum insurance requirements. Successful lease companies will be required to send an original current Certificate of Insurance to the Purchasing Department within ten (10) business days after notice of approval to be added to the approved list. Such certificates must contain a provision for notification to the Board thirty (30) days in advance of any material change in coverage or of cancellation.
 - a) General Liability: \$1,000,000 each occurrence, \$2,000,000 aggregate.
 - b) Workers compensation: In accordance with FS 440
 - c) Comprehensive Automobile Liability Insurance: \$1,000,000 along with underinsured / uninsured motorist limits.
5. Special Event Equipment Companies that need to lease / rent additional equipment to fulfill their lease agreement contract will ONLY be allowed to lease / rent from other Board approved lease companies.
6. Restrictions for Inflatable Activities: There are some District restrictions that have been placed on air inflatable activities both rented and owned.
 - a) The inflatable activity cannot have an accessible play area higher than 15 feet in height.
 - b) Inflatable slides cannot have more than 2 slide lanes.
 - c) Inflatable water slides cannot have an accessible play area higher than 8 feet and the pool cannot be deeper than 12 inches.
 - d) The operation of the activity cannot require any materials other than air or water to be used properly.
 - e) Inflatable activities that become airborne, roll or come away from direct contact with the ground surface (i.e. Bouncing inflatable ball or tube)

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7. Activities associated with carnivals and fundraisers.
 - a) Food purchased or provided should be from a reputable vendor, grocery store, restaurant or caterer. While parents may want to provide baked goods and other items from their personal kitchen, this practice is strongly discouraged. People may have allergic reactions to unusual ingredients or may even become ill to improperly prepared foods from home. Remember if you are not having your food catered then make sure your staff and facilities are adequate to serve and store food items safely.
 - b) Compressed helium gas cylinders used to fill balloons need to be handled with caution due to their high internal pressure. Use a hand truck and safety strapping when transporting and properly secure the tank when in use.
 - c) Dunk tanks are discouraged due to the hazards and injuries associated with unexpectedly plunging into stagnant water. Although the dunk tanks are not prohibited they must be safely operated and properly maintained in order to be used. The water should be treated or changed out regularly during the event and participants need to be fully aware of the safety precautions before seated. Some alternatives is a device where a bucket of water safely secured overhead tips onto the person when activated.
 - d) Mechanical rides and trailer mounted rock climbing are prohibited.
 - e) Small inflatable toys or ground bas water activities will be addressed individually. Activities like slip-n-slides, kiddie pools and other similar outdoor play events will be Evaluated by the Safety Department when notified by the school.

SCHOOLS RESPONSIBILITIES: The procedures to be followed by Schools/Departments/ Centers when contracting for the leasing of Special Event Equipment is as follows:

1. Contract ONLY with VCSB approved companies who are included on the list as a prequalified Special Events Leasing Equipment Company.
2. Prepare an itinerary and fax or otherwise transmit the lease information and layout sheet to the lease company (s).
3. Schools/departments/centers will accept and confirm reservations made with approved companies by signing the vendor completed School District approved lease contract, and the vendors contract if required, returning a copy to the vendor for their signature and keeping a copy of all completed contracts on file.
4. Payment of invoices: Payment will be made either by check the day of the event or by a School Activity Fund Internal Account Purchase Order or a School Board of Volusia County Purchase Order if acceptable by the vendor. Purchase orders will be binding on the School Board to pay for services rendered. Schools/departments/centers will take into consideration cancellation terms and conditions when selecting a company from the Board approved list.
5. Electrical will be provided where required.
6. Water supply will be provided where required.
7. Properly trained attendants will be provided where required.

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8. School staff shall inspect each piece of equipment prior to use to insure that piece is safe for all Users.
9. Complaint/Removal Procedures: Lease companies may be removed from the Board Approved List of pre-qualified companies in accordance with the procedures contained herein.
 - a) Schools/departments/centers are requested to report all complaints in writing promptly to the Purchasing Department.
 - b) The School District will attempt to contact the person listed on vendor's response by phone to alert him/her of the problem and to discuss the situation. If the problem can be resolved amicably by phone and is so resolved, no further action is necessary.
 - c) When complaints become complicated, the School District will attempt to meet in person with the vendor, as needed. It is recognized that all companies have problems occasionally. How the vendor responds, as well as the severity and the number of complaints received, will be used as a basis for the School District's decision in how the complaint will be handled. In the absence of an equitable resolution of the complaint (s) between the school/department/center and the company, the School District's Instructional Council may be convened, upon request of the school Principal, to make a final determination and/or to determine the penalty. Penalties may include removal from the approved Board list for a specified period of time.

9. Please submit questions to:

Purchasing Department
Michelle L. Black, Procurement Specialist / Buyer
Phone No. 386-734-7190 ext 50863
The School Board of Volusia County
3750 Olson Drive
Daytona Beach, FL 32124

Alternate Contact: Laura Daulton,
Procurement Specialist / Buyer
Phone No. 386-734-7190 ext 50841

SPECIAL EVENT EQUIPMENT RENTAL VENDOR'S CHECKLIST

**VENDOR MUST COMPLETE AND RETURN THE FOLLOWING
INFORMATION. ALL PAGES MUST BE RETURNED FOR APPROVAL.**

1. COMPLETED APPLICATION
2. PROVIDE A COPY OF YOUR CURRENT OCCUPATIONAL LICENSE
3. PROVIDE A COPY OF YOUR SAFETY AND SANITATION PROGRAM – CRITERIA AND/OR PROCEDURES USED TO SUPPORT YOUR SAFETY PROGRAM.
4. CRIMINAL BACKGROUND / JLA CLEARANCE)
5. REFERENCE FORMS (PAGES 7– 9)
6. PROVIDE AN INVENTORY LIST OF AVAILABLE LEASE EQUIPMENT YOU WISH TO OFFER OUR SCHOOLS. (PAGE 10)
7. ATTENDANT PRICING IF OFFERED.
8. DEPOSIT AND REFUND POLICY
9. CERTIFICATE(S) OF INSURANCE :
 - a) General Liability
 - b) Workers' Compensation
 - c) Comprehensive Automobile Liability Insurance
10. SIGNED DEBARMENT FORM (PAGE 12)
11. DRUG FREE WORKPLACE CERTIFICATE (PAGE 13)

Send completed forms and attachments to : VCSB Purchasing Department
Attn: Michelle L. Black, Buyer
3750 Olson Drive
Daytona Beach, FL 32124

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“INFORMATION TO BE INCLUDED IN THE APPLICATION”

1. Application Cover Page: Please include all items submitted in the order listed on the cover page.

Company Name: _____

Contact Person: _____

Company Owner: _____

Company Address: _____

City: _____ State: _____ Zip Code: _____

Company Phone Number: _____

Company Representative's Cell Number: _____

Company Fax Number: _____

Company FEIN: _____

Signature: _____

Company Representative Authorized to Sign Contracts

Print Name: _____

Additional Info: _____

2. Provide a copy of your current Volusia County Occupational License.

3. Provide a copy of your current safety and sanitation program for your equipment. Vendors shall also explain their operational training program for site and school personnel. Provide a copy of your Acknowledgement form that must be signed by all individuals trained on the safe operation of each Piece of equipment.

4. Criminal background check / JLA clearance.

Provide the names of your employees who currently have Volusia County JLA clearance and Provide a copy of their Volusia County School Board JLA Clearance ID Card.

Names: _____

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5. References: Provide three (3) client references, on forms provided (pages 13-15 of 17), who have Used your company's services within the past five (5) years. Include contact names and phone numbers. References may be employees of the School District. A new company may be approved for a ninety (90) Day probationary period at which time three (3) references should be submitted to the Purchasing Department to meet this qualification. Failure to obtain these references will require the district to Remove the company's name from the approval list.

REFERENCE NO. 5.1

NAME OF LEASE COMPANY: _____

NAME OF REFERENCE: _____

REFERENCE ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE NO. (including area code) CONTACT PERSON:

_____/_____-_____ _____

PRIVATE SECTOR: YES NO

PUBLIC SECTOR: YES NO

HOW LONG HAVE YOU RENTED EQUIPMENT TO THIS
ORGANIZATION? _____ YEARS

LENGTH OF ACCOUNT: MONTHS _____ YEARS _____

REFERENCE NO. 5.2

NAME OF LEASE COMPANY: _____

NAME OF REFERENCE: _____

REFERENCE ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE NO. (including area code) CONTACT PERSON:

_____/_____-_____ _____

PRIVATE SECTOR: YES NO

PUBLIC SECTOR: YES NO

HOW LONG HAVE YOU RENTED EQUIPMENT TO THIS
ORGANIZATION? _____ YEARS

LENGTH OF ACCOUNT: MONTHS _____ YEARS _____

REFERENCE NO. 5.3

NAME OF LEASE COMPANY: _____

NAME OF REFERENCE: _____

REFERENCE ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE NO. (including area code) CONTACT PERSON:

_____/_____-_____ _____

PRIVATE SECTOR: YES NO

PUBLIC SECTOR: YES NO

HOW LONG HAVE YOU RENTED EQUIPMENT TO THIS
ORGANIZATION? _____ YEARS

LENGTH OF ACCOUNT: MONTHS _____ YEARS _____

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6. Inventory and Current Price List: Lease companies state firm fixed prices, including costs of setup and take down as of (date) ____/____/____.

| 1. | ITEM | RENTAL PRICE |
|----|------|--------------|
| A | | |
| B | | |
| C | | |
| D | | |
| E | | |
| F | | |
| G | | |
| H | | |
| I | | |
| J | | |
| K | | |
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| T | | |
| U | | |
| V | | |
| W | | |
| X | | |
| Y | | |
| Z | | |

❖ ATTACH ADDITIONAL SHEET IF MORE LINES ARE NEEDED.

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7. Price to provide an attendant for the event: _____ per hour or
_____ other labor charge.

8. Deposit and refund policy: _____

9. Provide your Certificates of Insurance for your liability coverage that shows Volusia County School Board as an additional insured or certificate holder. Also provide a copy of your motor vehicle insurance policy showing you carry at least the minimum coverage specified.

10. Provide your signed Debarment Form.

11. Provide your signed Drug Free Workplace Form.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions

This certification is required by the Department of Education regulations implementing Executive Order 12549, Debarment and Suspension, 34 CFR Part 85, for all lower tier transactions meeting the threshold and tier requirements stated at Section 85.110.

Instructions for Certification:

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification

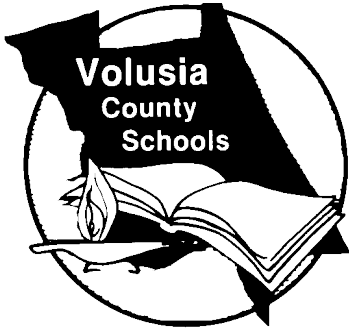
(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

| | |
|-------------------|-------------------------------------|
| Name of Applicant | PR/Award Number and/or Project Name |
| Printed Name | Title of Authorized Representative |
| Signature | Date |

ED 80-0014 9/90 (Replaces CCS-009 REV. 12/88), which is obsolete

**SCHOOL DISTRICT OF VOLUSIA COUNTY
PURCHASING DEPARTMENT**



DRUG-FREE WORKPLACE

CERTIFICATION FORM

In accordance with Florida Statute 287.087, whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

- (1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- (2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- (3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- (4) In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- (5) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community by any employee who is so convicted.
- (6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

BIDDER'S SIGNATURE

DATE

TYPE OR PRINT COMPANY NAME