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|  |  **State of South Carolina** **Request for Proposal****Amendment Number One** | Solicitation Number: Date Issued: Procurement Officer: Phone: E-Mail Address: | PEBA0202018RFP8/14/2019 David H. Quiat803.737.0562dquiat@mmo.sc.gov |

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| DESCRIPTION: **Benefits Administration System** USING GOVERNMENTAL UNIT: **South Carolina Public Employee Benefit Authority** |

 SUBMIT OFFER BY (Opening Date/Time):   **9/16/2019 11:00 AM**

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| *The Term “Offer” Means Your “Proposal”. Your offer must be submitted in a sealed package. The Solicitation Number & Opening Date should appear on the package exterior. See the clause entitled “Submitting Your Offer or Modification.”* |

 SUBMIT YOUR SEALED OFFER TO EITHER OF THE FOLLOWING ADDRESSES:

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| MAILING ADDRESS:SFAA, Div. of Procurement Services, MMOPO Box 101103Columbia SC 29211  | PHYSICAL ADDRESS:SFAA, Div. of Procurement Services, MMO1201 Main Street, Suite 600Columbia SC 29201 |

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|  AWARD & AMENDMENTS | Award will be posted on **11/1/2019.**  The award, this solicitation, any amendments, and any related notices will be posted at the following web address: <https://procurement.sc.gov/vendor/contract-opps/other-solicitations/peba>  |

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| You must submit a signed copy of this form with Your Offer. By submitting a proposal, You agree to be bound by the terms of the Solicitation. You agree to hold Your Offer open for a minimum of one hundred twenty (120) calendar days after the Opening Date.    (See the clause entitled “Signing Your Offer.”) |
|  NAME OF OFFEROR   (Full legal name of business submitting the offer) | 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 entity, i.e., a separate corporation, partnership, sole proprietorship, etc. |
|  AUTHORIZED SIGNATURE  (Person must be authorized to submit binding offer to contract on behalf of Offeror.) |  |
|  TITLE  (Business title of person signing above) |  STATE VENDOR NO.  (Register to obtain S.C. Vendor No. at www.procurement.sc.gov) |
|  PRINTED NAME  (Printed name of person signing above) |  DATE SIGNED |  STATE OF INCORPORATION  (If you are a corporation, identify the state of incorporation.) |

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|  OFFEROR’S TYPE OF ENTITY:   (Check one)                                                                   (See “Signing Your Offer” provision.)     \_\_\_ Sole Proprietorship                                  \_\_\_ Partnership                                  \_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_ Corporate entity (not tax-exempt)          \_\_\_ Corporation (tax-exempt)            \_\_\_ Government entity (federal, state, or local) |

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| 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.)          \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Area Code  -  Number  -  Extension                    Facsimile  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address |

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| PAYMENT ADDRESS (Address to which payments will be sent.)           \_\_\_\_Payment Address same as Home Office Address\_\_\_\_Payment Address same as Notice Address   **(check only one)** | ORDER ADDRESS (Address to which purchase orders will be sent)          \_\_\_\_Order Address same as Home Office Address\_\_\_\_Order Address same as Notice Address   **(check only one)** |

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| ACKNOWLEDGMENT OF AMENDMENTSOfferors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See the clause entitled “Amendments to Solicitation”) |
| Amendment No. | Amendment Issue Date | Amendment No. | Amendment Issue Date | Amendment No. | Amendment Issue Date | Amendment No. | Amendment Issue Date |
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| DISCOUNT FOR PROMPT PAYMENT(See the clause entitled “Discount for Prompt Payment”) | 10 Calendar Days (%) | 20 Calendar Days (%) | 30 Calendar Days (%) | \_\_\_\_\_Calendar Days (%) |

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**Amendment Number One (1)**

**Amendments to the Request for Proposal**

 **Benefits Administration System**

**PEBA0202018RFP**

**Amend the Schedule of Key Dates in the Proposal Process, Item 4. Final Deadline for Questions on the RFP, by deleting it in its entirety and replacing it with the following:**

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| 1. Final Deadline for Questions on the RFP (4:00pm)
 | 8/30/2019 |

Note: All subsequent dates will be amended in a forthcoming amendment which will include responses to questions.

**Amend Part 1, General Contracting Information, Requirements, And Instructions to Offerors, 1.3 Communications Regarding the Solicitation, 1.3.3 Submission of Questions, by deleting 1.3.3 in its entirety and replacing it with the following:**

**1.3.3 Submission of Questions:** Any questions, comments, requests for information or clarifications regarding the RFP must be submitted in writing. Do NOT wait to assert deviations, exceptions, etc. to anything in this RFP until (or in) the submission of your proposal.

All questions must be received by the Procurement Officer no later than August 30, 2019 at 4:00 pm local time. No further questions regarding the RFP will be accepted after the final deadline for submission of questions, August 30, 2019 at 4:00 pm local time.

Prospective Offerors are encouraged to email their questions on the RFP prior to the Pre-Proposal Conference. The South Carolina Public Employee Benefit Authority will attempt to provide responses to those questions submitted by August 6, 2019, during the Pre-Proposal Conference on August 12, 2019.

Any written questions, requests for information or request for clarifications will be responded to in the form of a written amendment to the RFP and e-mailed to all prospective Offerors. The amendment will also be posted at the following web address: [https://procurement.sc.gov/Contractor/contract-opps/other-solicitations/peba](https://procurement.sc.gov/vendor/contract-opps/other-solicitations/peba)

All questions, comments, requests for information or clarifications should, to the highest degree possible, cite the specific RFP section and paragraph number(s) to which the question refers. All questions, comments, requests for information or clarifications regarding this RFP should include the identity of the sender, firm name, mailing address, telephone number, and e-mail address. Email is the method for submitting questions to the Procurement Officer with “Questions: Benefits Administration System RFP” as the subject of the email. Email Address: dquiat@mmo.sc.gov Submit questions in an easily copied format such as MS Word. Please do not insert your questions into tables.