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DEPARTMENT OF HUMAN SERVICES

Norristown State Hospital

Statement of Work

Kitchen Equipment Preventative Maintenance and Repair Service

IFB 6100065990

I. Objective

The Department of Human Services ("DHS") is seeking a Contractor to provide preventive maintenance and repair of kitchen equipment at the Norristown State Hospital ("NSH") at 1001 Sterigere Street, Norristown, Pennsylvania 19401.

II. Background

The selected Contractor shall provide monthly Preventive Maintenance ("PM") inspections and possess the qualifications necessary to repair various food service equipment in accordance with this Statement of Work.

III. Term of Service

The term of this service will commence upon issuance of a Purchase Order ("PO") to the selected Contractor ("Effective Date") and will expire one year after the Effective Date, unless it is terminated earlier pursuant to the terms of the PO. The Department, at its sole option, may renew the PO on the same terms and conditions for four additional one-year period.

At the time of each renewal the Department and Contractor shall negotiate the PO unit price not to exceed a maximum of three percent [3%] over the unit price in effect at the time of each renewal term.

The term may be further extended by the Department for up to three months upon the same terms and conditions where a continued need exists for the services of the selected Contractor and there has been no termination under the terms of the PO.

IV. Scope of Work

The selected Contractor shall provide the following services:

a. Monthly Preventative Maintenance services: The selected Contractor shall:

i. provide adjustments for proper combustion;

ii. provide inspection of electrical operations;

iii. inspect utility connections;

iv. inspect structural integrity;

v. conduct safety device checks;

vi. inspect overall operation;

vii. provide calibration of thermostatically controlled equipment;

viii. inspect and lubricate all moving and mechanical parts; and

ix. note date of inspection on paperwork and on the machine.

b. Repair Services: The Department may approve repairs, as needed, of the following equipment:

i. table-top mixer – Hobart;

ii. combi-oven (half stack) – Vulkan;

iii. two: combi-oven (full stack) – Rational;

iv. two: double stack steamer – Groen (HyPlus) (4 steamers total);

v. buffalo chopper – Hobart;

vi. two: floor mixer – Hobart;

vii. three: tilt grill – Groen;

viii. deli slicer – Hobart;

ix. four: large steam jacket kettles 150gl – Groen;

x. two: medium steam jacket kettles 100gl – Hubert;

xi. tray assembly line (trayline) – Aladdin;

xii. tray wash – Hobart;

xiii. pot wash – Stero;

xiv. four: cook chill units – Aladdin;

xv. approximately 20: food delivery carts – Aladdin;

xvi. four: walk-in freezers; and

xvii. nine: walk-in refrigerators.

c. General requirements:

i. A repair is defined as a machine that is broken, not regular service.

ii. The selected Contractor shall perform all labor services during normal working hours – Monday through Friday 7:00 a.m. to 3:30 p.m.

iii. The selected Contractor shall be available to perform maintenance during holiday hours, that occur during a regular working week, Monday through Friday. Holidays are defined as New Years Day, Martin Luther King Day, Presidents' Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Indigenous People's Day, Veteran's Day, Thanksgiving Day, Day After Thanksgiving and Christmas Day.

iv. The selected Contractor shall have service technicians available to start all worked requested under contract within 24 hours of the facility making a service call.

- **v.** The selected Contractor shall provide all labor, materials, equipment and testing necessary to maintain the equipment pursuant to the manufacturer's published specifications.
- **vi.** The selected Contractor shall furnish the Food Service Manager or designee with a cost estimate prior to performing any major repair on the equipment and shall obtain approval of the cost estimate, including parts and labor, prior to starting any repair work.
- **vii.** The selected Contractor shall provide repair parts at cost, which may include shipping and handling expenses.
- **viii.** The quantity of services and parts is an estimate. If services and parts usage exceed the original contract estimate during the effective time period of the contract, the selected Contractor shall provide the additional units of service needed at the original contract rates.

V. Specific Requirements and Qualifications

The selected Contractor shall:

- **a.** check in with dietary department upon arrival at facility;
- **b.** provide inspection summary worksheets at the conclusion of each visit. In the inspection summary worksheets, the selected Contractor shall identify additional repair work needed and obtain verification and signature of the worksheet from the NSH manager; and
- **c.** be certified to work on Rational ovens.

VI. Mandatory Site Visit

Contractors are required to participate in a site visit to survey the kitchen area and equipment and take photographs. The mandatory site visit will be conducted on Tuesday, May 19, 2026 at 9:30 a.m. (EST). Contractors should plan for the site visit to take at least one hour.

The point of contact for the site visit is Mr. William Bogari. Mr. Bogari can be reached at 267-831-2824 or via email at wbogari@pa.gov. Contractor shall contact Mr. Bogari at least three days prior to the site visit to indicate their intent to attend the site visit. Contractors must meet with Mr. Bogari promptly at 9:30 a.m. (EST) in the parking lot of Building 49 located at 1001 Sterigere Street, Norristown, Pennsylvania 19401.

During the site visit walk-through, DHS will clearly identify any specific kitchen equipment in the dietary department of building 22 that is not included in the scope of this statement of work.

At the time of the Mandatory Site Visit, the Contractor must provide **Attachment A**, Proof of Visit form and have the form signed by William Bogari. The Contractor must upload the completed and signed Proof of Visit form with the Contractor's electronically submitted bid. **Failure to include the signed Proof of Visit form will result in rejection of your quote as non-responsive.**

pennsylvania
DEPARTMENT OF HUMAN SERVICES

VII. Bid Requirements

Contractors' electronic submission must include the following as attachments. Failure to submit these items when they are needed may result in the rejection of the Contractor's submission.

a. Proof of Visit;

b. Certification to work on Rational ovens; and

c. Workers Protection and Investment Certification.

VIII. Questions and Answers

All questions regarding the IFB must be submitted via the RA-pwbidquestions@pa.gov email address. All questions must be received by May 27, 2026. Include the IFB bid number in the subject of the email.

All questions and answers are considered an addendum to the IFB. Answers will be posted by May 29, 2026.

IX. Contract Award

Award will be made based on lowest responsible and responsive bidder.

X. Estimated Quantities

The quantities are estimated only and may increase or decrease dependent upon the needs of the department.

XI. Contact Information

William Bogari, Chief Operating Officer

267-831-2824

wbogari@pa.gov

Jack Rosen, Food Service Manager

610-313-5254

jrosen@pa.gov

XII. Payment Provisions:

The selected Contractor will be reimbursed only for commodities/services performed and accepted by the Commonwealth of Pennsylvania.

Failure to submit invoices in compliance with the following instructions will result in the invoices being returned to the Contractor and will substantially delay processing of payments. The Contractor shall be paid upon satisfactory delivery/completion of work performed and submission of an invoice on the Contractor's letterhead.

pennsylvania
DEPARTMENT OF HUMAN SERVICES

The Contractor will be paid upon submission of invoices. Invoices shall contain the following information:

1. PO number;
2. description of services provided; and
3. net invoices amount due to the Contractor from the facility.

The Contractor shall be paid upon satisfactory completion of work performed, and submission of an invoice on the Contractor's letterhead.

The invoice is to be mailed to:

COMMONWEALTH OF PENNSYLVANIA – PO Invoice

P.O. Box 69180

Harrisburg, PA 17106

Or by email:

69180@pa.gov

A copy of the invoice is also to be mailed to:

DHS – Norristown State Hospital

Attn: Accounting Dept.

1001 Sterigere Street

Norristown, PA 19401

By Fax to: 610-313-5779

The invoice should contain at minimum the information listed on the sample invoice – ***Supplier Sample Invoice*** can be found at:

http://www.dgsweb.state.pa.us/comod/CurrentForms/SampleSupplierInvoice.doc