

BUTLER COUNTY COMMISSIONERS
T.C. Rogers Cindy Carpenter Donald L. Dixon

INVITATION TO BID

RFP NO. BCSO-2026-04-01

BUTLER COUNTY SHERIFF'S OFFICE
BUTLER COUNTY JAIL HVAC EQUIPMENT
REPLACEMENT

BID DATE AND TIME:
FRIDAY, JUNE 5, 2026
01:30 P.M. (EST)

BIDS MUST BE RETURNED TO:
BUTLER COUNTY COMMISSIONER'S OFFICE
ATTN: CLERK OF THE BOARD
315 HIGH STREET, 6TH FLOOR
HAMILTON, OH 45011

LEGAL AD AND NOTICE TO BIDDERS
RFP NO. BCSO-2026-04-01

Sealed proposals will be received at the office of the Butler County Commissioner's Office, 315 High Street, 6th Floor, Hamilton, Ohio 45011 until 01:30 p.m. EST on Friday, June 5, 2026 for the Butler County Jail HVAC Equipment Replacement, in accordance with specifications under RFP No. BCSO-2026-04-01.

Specifications may be obtained by query at <https://bids.bcoho.gov>. To access the RFP packet on the Butler County Board of Commissioners website, please scroll down until the project is found: Butler County Jail HVAC Equipment Replacement, RFP No. BCSO-2026-04-01, or by query at www.butlersheriff.org/category/request-for-bids/. To access the RFP packet on the Butler County Sheriff's Office, scroll down until the project is found.

The Board of Butler County Commissioners may, in their sole and absolute discretion, accept or reject, in whole or in part, for any reason whatsoever any or all proposals; re-advertise this Request for Proposals; postpone or cancel at any time the Request for Proposal process; waive any informalities of or irregularities in the process; negotiate with any party or request additional information if it so desires.

Proposals are to be SEALED and delivered to the office of the Butler County Commissioners, and each proposal shall bear on its face the name and address of the bidder and shall be plainly marked "Proposal for RFP No. BCSO-2026-04-01 Butler County Jail HVAC Equipment Replacement".

By order of the Board of Butler County Commissioners:

T. C. Rogers, President
Cindy Carpenter, Vice President
Donald Dixon, Member

Attest: Emily Appel, Clerk

Publish 1 time: Wednesday, April 29, 2026
Hamilton Journal-News

PLEASE NOTE

PROPOSAL MUST BE SEALED, DELIVERED TO, AND RECEIVED IN THE BUTLER COUNTY BOARD OF COMMISSIONERS OFFICE ON THE SIXTH FLOOR OF THE BUTLER COUNTY GOVERNMENT SERVICES CENTER, 315 HIGH STREET, HAMILTON, OHIO, BY

01:30 p.m. local time on

Friday, June 5, 2026

ANY PROPOSAL DELIVERED AFTER THE TIME SPECIFIED, ACCORDING TO THE CLOCK IN THE COMMISSIONER'S OFFICE, WILL NOT BE ACCEPTED FOR ANY REASON.

BOARD OF COUNTY COMMISSIONERS, BUTLER COUNTY, OHIO

315 High St., 6th Floor, Hamilton, OH 45011

REQUEST FOR PROPOSALS

R.C. §§ 307.86(M) & 307.862

Pursuant to R.C. § 307.86, The Board of Commissioners, Butler County, Ohio (the "County"), as the County contracting authority for the User designated herein has determined that the use of competitive sealed proposals would be advantageous to the County for the acquisition of the goods or services described in this Request for Proposals (the "RFP"). Therefore, pursuant to R.C. § 307.862, the County hereby solicits sealed competitive proposals as described in this RFP.

A. Submission of Proposal:

1. Deadline for Submission of Proposals: Friday, June 5, 2026. Proposals received prior to the deadline will be held and not be opened until the deadline.
2. Proposals to be Delivered to: Butler County Commissioner's Office, Attn: Clerk of the Board, 315 High Street, 6th Floor, Hamilton, OH 45011

B. Description of Project:

3. Project Name: Butler County Jail HVAC Equipment Replacement
4. Contract No.: RFP No. BCSO-2026-04-01
5. USER: The contract to which this RFP relates is intended to be awarded by the County for the use of the Butler County Sheriff's Office (the "Sheriff's Office").
6. County Contact Person: Kaitlyn Jarvis, Financial Specialist, Butler County Sheriff's Office, 705 Hanover Street, Hamilton, OH 45011, kjarvis@butlersheriff.org or Captain Kevin Grathwohl, kgrathwohl@butlersheriff.org.
7. Brief Description of Project: The Butler County Board of Commissioners, in coordination with the Butler County Sheriff's Office, is seeking proposals from qualified Contractors to provide comprehensive HVAC equipment replacement and installation services for the Butler County Correctional Facilities. The aging HVAC infrastructure across three (3) facility locations requires the removal, replacement, and installation of multiple heating, ventilation, and air conditioning systems including split systems, fan coil units, and rooftop units (RTUs). The intent of this RFP is to secure a Contractor capable of delivering high-quality, code-compliant, and cost-effective HVAC replacement services in accordance with all applicable federal, state, and local laws, codes, and regulations.
8. Please see Exhibit A for the detailed schedule of HVAC equipment to be replaced, including specifications and locations.
9. Potential Partial or Multiple Party Awards: The County reserves the right to award upon recommendation of the Sheriff's Office any, none, or part of the project to one or more Vendors for designated portions of the project. In the event that County elects to award multiple contracts concerning the project, the Sheriff's Office or its designee shall assume responsibility for coordination of the multiple contracts unless County expressly designates that the recipient of one of the awarded contracts shall be responsible to coordinate the multiple contracts.
10. Intended Contract Duration: The duration of work shall be determined at the time of contract award. Vendor shall propose a project completion timeline in their proposal.

11. Implementation Deadline: To be determined at time of contract award.

The Butler County Correctional Facilities have three (3) locations requiring HVAC equipment replacement:

- 705 Hanover Street, Hamilton, OH 45011 (Main Jail Facility)
- 123 Court Street, Hamilton, OH (Court Street Facility)
- 442 South Second Street, Hamilton, OH (Resolutions Facility)

C. The Request for Proposals:

12. A list of specifications for this project is contained in the Exhibit A attached hereto.

13. A full copy of this RFP, together with all documents incorporated by reference into the RFP, is available to the public and may be obtained by either: (a) Download from the County's website at <https://bids.bcoho.gov> or www.butlersheriff.org – Bid Opportunities; or (b) A written request directed to the County's Contact Person as designated in this RFP.

14. County reserves the right to issue one or more addendums modifying the requirements or terms of this RFP. A copy of each addendum will be posted on the County and Sheriff's websites. It will be the bidder's responsibility to monitor the websites for any addendum.

15. A mandatory pre-bid site visit may be required. Prospective bidders will be notified of the date, time, and location. Bidders will have the opportunity to inspect existing HVAC equipment and conditions at all three (3) facilities.

D. Prohibited Contacts:

To protect the integrity and fairness of the proposal process, unauthorized communications and other behavior by any prospective Vendor that violates or attempts to manipulate the competitive proposal process is strictly prohibited. From the time this RFP is issued until a contract is awarded, no prospective Vendor shall directly contact or attempt to influence any County employee, officer, or elected official involved in the evaluation, selection, or award process, except through the designated County Contact Person identified herein.

E. Proposal Requirements:

Each proposal submitted in response to this RFP shall:

16. Be submitted in a sealed envelope or container and clearly identified on the exterior of the envelope as a sealed proposal in response to this RFP. The proposal shall contain the signature of a person who is duly authorized to submit the proposal on behalf of the Vendor. Each page of the proposal must be numbered sequentially. All narrative information must contain a heading which clearly indicates the subject matter of the narrative. The proposal must be consistent with applicable federal regulations, State of Ohio policies, and County policies and procedures.

17. Contain the full legal name and mailing address of the principal place of business of the person/entity submitting a proposal (the "Vendor"). If a corporation, LLC, limited partnership, or other entity, the Vendor shall identify its form of business entity and whether it is licensed to do business in the State of Ohio.

18. Identify the name, postal mailing address, telephone number, and email address of the person(s) responsible for: (a) preparation and submission of the proposal; (b) responding to County's questions; (c) conducting negotiations; and (d) signing contract documents.

19. Fully respond to questions and requests for information including: (a) business information and duration of activity; (b) experience with HVAC installation and replacement in correctional or

institutional facilities; (c) references from comparable correctional or government facilities; (d) key personnel involved in the project, including Ohio HVAC license numbers; and (e) disclosure of litigation or known claims.

20. Disclose the name, address, phone number, and scope of services for each manufacturer, seller, subcontractor, and consultant who will assist the Vendor.
21. Fully complete the Attachments attached to this RFP.
22. If a proposal contains any trade secret or proprietary information, the Vendor has the sole responsibility to clearly identify and protect such information.
23. Include a detailed project timeline with milestones for equipment procurement, installation by location, testing, and final commissioning.
24. Include documentation of all required Ohio HVAC contractor licenses, EPA Section 608 certifications, and applicable trade credentials for personnel who will perform the work.

F. Units of Measurement:

25. All price or cost information contained in each proposal shall be stated in US dollars.
26. Unless otherwise expressly specified, all quantities shall be stated in English units of measurement.
27. Unless otherwise expressly stated, all time periods are expressed in terms of calendar days.

G. Proposal Evaluation Process:

28. Each proposal received by the submission deadline shall be promptly opened by County and reviewed for compliance with the RFP and Ohio law. County shall open all timely submitted proposals in a manner that prevents the disclosure of contents of competing proposals. Proposals shall not be available for public inspection until after contract award. Any proposal that fails in any material respect to comply shall be rejected and returned.
29. Each compliant proposal will be evaluated and ranked by County staff using the factors and criteria listed in Exhibit A. County may initiate discussions with Vendors for clarification, correction, or revision of proposals, conducted without disclosing competing proposals.

H. Rejection of Proposals:

County reserves the right to reject, in whole or in part, any proposal which County determines:

30. Contains material exception(s) to the terms and conditions of this RFP;
31. Fails to meet the terms, standards, specifications, and requirements of this RFP;
32. Submits prices that County considers excessive or exceed County's available funds; or
33. Would not be in the best interest of the County based upon the factors and criteria described in Exhibit A.

I. Negotiations:

34. County will negotiate with the Vendor whose proposal is determined most advantageous to the County based on rankings.
35. County reserves the right to require demonstrations, product samples, or on-site equipment inspections as part of negotiations.
36. All Vendor activities in connection with making a proposal and conducting negotiations shall be at the Vendor's sole cost and expense.

37. Termination of Negotiations: (a) A Vendor may terminate negotiations by providing written notice of withdrawal at any time prior to contract award. (b) County may terminate negotiations by providing written notice of the Vendor's failure to provide information or negotiate in good faith. Unless the Vendor cures deficiencies within five (5) business days, negotiations shall be terminated.

38. If either party terminates negotiations, County may commence negotiations with the next-ranked Vendor.

J. Contract Award:

39. County may award a contract to the Vendor whose proposal is most advantageous. The RFP shall be held firm for a minimum of ninety (90) days.

40. The Sheriff's Office shall send written notice of award and make it available to the public.

41. Contract Documents shall include the executed agreement, this RFP (including addenda), and the Vendor's proposal. In case of conflict, the executed agreement shall prevail, followed by this RFP.

42. The contract award will not be final until a mutually satisfactory agreement has been executed.

43. No contract performance may begin prior to execution of the agreement.

44. Butler County reserves the right to cancel an award immediately if new regulations or policy makes it necessary to change the service or prohibit such service.

45. County shall notify all other Vendors that the contract has been awarded.

Cancellation of the RFP: County may cancel or reissue this RFP if the proposals are not in compliance, prices are excessive, or award would not be in the best interest of the County.

K. Other Information:

46. Warranties: Vendor must warrant that all services, equipment, and goods comply with Contract Documents and will be free from defects for a minimum of one (1) year after County's acceptance. Vendor shall assign all manufacturer's warranties to the County. Vendor shall provide documentation of all manufacturer warranty terms for each piece of equipment installed.

47. Non-solicitation: During the agreement term and for one year thereafter, Vendor shall not employ nor solicit for employment any current County employee unless terminated without just cause.

48. Proprietary Information: Vendor shall maintain confidentiality of proprietary or non-public records disclosed during negotiations or performance.

49. Compliance with Laws: Vendor and its employees shall comply with all federal, state, and local laws, regulations, codes, and policies/procedures, including but not limited to the Ohio Mechanical Code, EPA Section 608 refrigerant handling regulations, OSHA safety standards, and all applicable building codes.

EXHIBIT "A" — Specifications for Project

The Butler County Board of Commissioners, in coordination with the Butler County Sheriff's Office, is seeking proposals from qualified Contractors to provide comprehensive HVAC equipment replacement and installation services for the Butler County Correctional Facilities. The existing HVAC infrastructure across three (3) facility locations has reached or exceeded its useful service life and requires complete replacement. The intent of this RFP is to secure a Contractor capable of delivering high-quality, code-compliant HVAC replacement and installation in accordance with all applicable federal, state, and local laws, codes, and regulations.

1. Scope of Services

The selected Contractor shall provide complete HVAC equipment replacement and installation services including, but not limited to:

- Removal and disposal of existing aging HVAC equipment in accordance with EPA 608 guidelines
- Procurement and installation of new HVAC split systems, fan coil units, and rooftop units (RTUs)
- Electrical disconnection, reconnection, and provision of new electrical disconnects as required
- Provision of crane services for necessary rigging where required
- Installation of new line sets, refrigerant, curb adapters, and economizers as specified
- Start-up, commissioning, and operational check-out of all new equipment
- Cleanup of all work areas upon completion

2. Facility Locations and Equipment Schedule

HVAC equipment replacement is required at the following three (3) Butler County Correctional Facility locations. Vendors shall provide pricing for each line item individually and as a total project cost.

FACILITY 1: 705 Hanover Street, Hamilton, OH 45011 (Main Jail)

705 Hanover Street — Equipment Schedule

Item #	Description	Equipment Age	Scope of Replacement
1	H-Pod Control Room Split System	25 Years	Remove existing unit per EPA 608. Provide and install one (1) new heat pump mini split system. Provide and install new line set, new electrical disconnect. Provide crane for necessary rigging. Perform start-up and operational check-out.
2	Fan Coil Units: FCU-3, FCU-4, FCU-5, FCU-7, FCU-9, FCU-10, FCU-12, FCU-13, FCU-14	25 Years	Disconnect control voltage and line voltage wiring. Remove and dispose of nine (9) failing fan coil units. Provide and install nine (9) new fan coil units. Reconnect line voltage and control voltage. Perform start-up and operational check-out on each unit.

FACILITY 2: 123 Court Street, Hamilton, OH (Court Street Facility)

123 Court Street — Equipment Schedule

Item #	Description	Equipment Age	Scope of Replacement
3	Nordyne Split System	18 Years	Remove existing unit per EPA 608. Provide and install one (1) new 2-ton 230-volt air conditioner and one (1) new 2-ton 230-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Perform start-up and operational check-out.
4	Trane Split System	27 Years	Remove existing unit per EPA 608. Provide and install one (1) new 3-ton 230-volt 3-phase air conditioner and one (1) new 3-ton 230-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Perform start-up and operational check-out.
5	Trane Split System #1	19 Years	Remove existing unit per EPA 608. Provide and install one (1) new 3-ton 230-volt 3-phase air conditioner and one (1) new 3-ton 120-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Provide crane for necessary rigging. Perform start-up and operational check-out.
6	Trane Split System #2	19 Years	Remove existing unit per EPA 608. Provide and install one (1) new 3-ton 230-volt 3-phase air conditioner and one (1) new 3-ton 120-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Provide crane for necessary rigging. Perform start-up and operational check-out.
7	Trane Split System #3	19 Years	Remove existing unit per EPA 608. Provide and install one (1) new 3-ton 230-volt 3-phase air conditioner and one (1) new 3-ton 120-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Provide crane for necessary rigging. Perform start-up and operational check-out.
8	Trane Split System #3	19 Years	Remove existing unit per EPA 608. Provide and install one (1) new 3-ton 230-volt 3-phase air conditioner and one (1) new 3-ton 120-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Provide crane for necessary rigging. Perform start-up and operational check-out.
9	Goodman Split System	17 Years	Remove existing unit per EPA 608. Provide and install one (1) new 3-ton 230-volt 3-phase air conditioner and one (1) new 3-ton 230-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Perform start-up and operational check-out.
10	Bryant Split System	35 Years	Remove existing unit per EPA 608. Provide and install one (1) new 2-ton 230-volt air conditioner and one (1) new 2-ton 230-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Perform start-up and operational check-out.

FACILITY 3: 442 South Second Street, Hamilton, OH (Resolutions Facility)

442 South Second Street — Equipment Schedule

Item #	Description	Equipment Age	Scope of Replacement
11	Carrier Split System	18 Years	Remove existing unit per EPA 608. Provide and install one (1) new 4-ton 230-volt 3-phase air conditioner and one (1) new 4-ton 230-volt fan coil. Provide new electrical disconnect and R-32 refrigerant. Provide crane for necessary rigging. Perform start-up and operational check-out.
12	Carrier RTU #1	19 Years	Remove existing RTU per EPA 608. Provide and install one (1) new 7.5-ton 230-volt 3-phase R-454B rooftop unit. Provide and install one (1) new economizer and new electrical disconnect. Provide crane for necessary rigging. Perform start-up and operational check-out.
13	Lennox RTU	29 Years	Remove existing RTU per EPA 608. Provide and install one (1) new 12.5-ton 230-volt 3-phase R-454B rooftop unit. Provide and install one (1) new economizer, new curb adapter, and new electrical disconnect. Provide crane for necessary rigging. Perform start-up and operational check-out.
14	Carrier RTU #2	20 Years	Remove existing RTU per EPA 608. Remove and dispose of current curb adapter. Provide and install one (1) new 4-ton 230-volt 3-phase R-454B rooftop unit. Provide and install one (1) new curb adapter and new electrical disconnect. Provide crane for necessary rigging. Perform start-up and operational check-out.
15	Carrier RTU #3	20 Years	Remove existing RTU per EPA 608. Remove and dispose of current curb adapter. Provide and install one (1) new 4-ton 230-volt 3-phase R-454B rooftop unit. Provide and install one (1) new curb adapter and new electrical disconnect. Provide crane for necessary rigging. Perform start-up and operational check-out.
16	Carrier RTU #4	20 Years	Remove existing RTU per EPA 608. Remove and dispose of current curb adapter. Provide and install one (1) new 4-ton 230-volt 3-phase R-454B rooftop unit. Provide and install one (1) new curb adapter and new electrical disconnect. Provide crane for necessary rigging. Perform start-up and operational check-out.
17	Carrier RTU #5	20 Years	Remove existing RTU per EPA 608. Remove and dispose of current curb adapter. Provide and install one (1) new 4-ton 230-volt 3-phase R-454B rooftop unit. Provide and install one (1) new curb adapter and new electrical disconnect. Provide crane for necessary rigging. Perform start-up and operational check-out.

3. General Requirements for All Work

A. Removal and Disposal

The Contractor shall:

- Perform proper Lock Out/Tag Out (LOTO) procedures on all electrical power supplies prior to commencing work.
- Remove and dispose of all existing HVAC equipment in full compliance with EPA Section 608 guidelines for refrigerant recovery and handling.
- Remove and properly dispose of all old curb adapters, line sets, and associated components as required.
- Provide documentation of proper refrigerant recovery and disposal for each unit removed.

B. Installation

The Contractor shall:

- Provide and install all new HVAC equipment as specified in the equipment schedule above or with approved equivalent equipment meeting or exceeding specified performance standards.
- Provide and install all new electrical disconnects, line sets, refrigerant, curb adapters, and economizers as specified for each unit.
- Provide crane services for all units requiring rigging as identified in the equipment schedule.
- Reconnect all control voltage and line voltage wiring as required.
- Ensure all installations comply with the Ohio Mechanical Code, the National Electrical Code (NEC), and all applicable local building codes.
- Obtain all necessary permits and inspections required by local jurisdictions.

C. Commissioning and Start-Up

The Contractor shall:

- Perform complete start-up and operational check-out of each new unit installed.
- Verify proper operation of all heating and cooling modes.
- Document all commissioning results and provide written reports to the County.
- Provide operating and maintenance manuals for all new equipment installed.
- Provide training to facility maintenance staff on the operation and basic maintenance of all new equipment.

D. Work Scheduling and Security

The Contractor shall:

- Coordinate all work schedules with the Butler County Sheriff's Office to minimize disruption to jail operations.
- All work shall be performed during normal working hours (7:30 a.m. to 4:00 p.m., Monday through Friday, excluding holidays) unless otherwise approved by the Sheriff's Office.
- Comply with all jail security policies and procedures. All contractor personnel must submit to background checks as required by the Sheriff's Office.
- Ensure all deliveries of equipment and materials are inspected and controlled in accordance with facility security requirements.
- Maintain clean and safe work areas at all times. All work areas shall be cleaned up daily and upon completion of each scope item.

4. Financial Requirements

A. Pricing

- Vendor shall provide individual line-item pricing for each of the seventeen (17) equipment items listed in the equipment schedule.
- Vendor shall also provide a total project cost for all items combined.
- Pricing shall include all labor, materials, equipment, crane services, permits, disposal fees, refrigerant, and any other costs necessary to complete the work.
- Pricing shall be valid for a minimum of ninety (90) days from the proposal submission deadline.
- The County reserves the right to award all items, selected items by facility, or individual line items.

B. Tariff and Material Cost Provisions

The quoted prices shall include all known material costs as of the proposal date. To the extent the cost of any materials or equipment procured in furtherance of this contract is impacted by the imposition of any tariffs, taxes, or embargos imposed after the proposal date by the United States or any of its trading partners, the Vendor shall provide documentation of any such cost impacts for County review and approval prior to any price adjustment.

C. Payment Terms

- Invoices will be rendered as work progresses and upon completion of each line item.
- All invoices are payable within thirty (30) days of receipt and approval by the County.
- The County will retain ten percent (10%) of each progress payment until final completion and acceptance of all work.

5. Security Requirements

The Contractor shall:

- Comply with all Butler County Jail security policies and procedures.
- Submit a list of all personnel who will be on-site. All personnel are subject to background checks by the Sheriff's Office.
- Ensure all tools and equipment are accounted for at all times while on facility grounds.
- Prevent introduction of contraband into the facility.
- Follow all directions of corrections staff regarding movement within the facility.
- Contractor personnel may be subject to search upon entry and exit of the facility.

6. Legal and Regulatory Compliance

The Contractor shall comply with all applicable laws and regulations, including but not limited to:

- Ohio Mechanical Code and all applicable building codes.
- EPA Section 608 regulations for refrigerant recovery and handling.
- OSHA safety standards and regulations.
- National Electrical Code (NEC) for all electrical work.
- Ohio Administrative Code 5120:1-8-01 through 5120:1-8-19 (Ohio Minimum Jail Standards) as applicable to facility operations during construction.
- All applicable provisions of the Ohio Revised Code governing county contracts and procurement.
- Local health, safety, and environmental regulations.

7. Warranty Requirements

- Vendor shall provide a minimum one (1) year warranty on all labor and workmanship from the date of County acceptance.
- Vendor shall assign all manufacturer equipment warranties to the County.
- Vendor shall provide documentation of all manufacturer warranty terms, coverage periods, and warranty claim procedures for each piece of equipment installed.
- Vendor shall respond to warranty service calls within twenty-four (24) hours of notification.

8. Proposal Submission Requirements

Proposals shall include:

- Company qualifications and experience in HVAC installation and replacement in correctional or institutional facilities.
- Detailed line-item pricing for each of the seventeen (17) equipment items and a total project cost.
- Proposed project timeline and schedule, including equipment lead times.
- Documentation of all required Ohio HVAC contractor licenses and EPA Section 608 certifications.
- Identification of all equipment manufacturers, models, and specifications proposed.
- References from a minimum of three (3) comparable correctional or government facility HVAC projects completed within the last five (5) years.
- Proof of insurance meeting the requirements specified herein.
- Proposed warranty terms.

9. Evaluation Criteria

Proposals will be evaluated based on:

- Experience and qualifications in correctional/institutional HVAC work.
- Quality, reliability, and energy efficiency of proposed equipment.
- Total cost to the County (line-item and overall pricing).
- Proposed project timeline and ability to minimize disruption to facility operations.
- Security compliance and experience working in secure environments.
- Warranty terms and post-installation service capabilities.
- References and past performance.

10. Reservation of Rights

The County reserves the right to:

- Reject any or all proposals.
- Waive informalities or irregularities.
- Accept the proposal deemed in the best interest of the County.
- Award the contract in whole or in part, by individual line item, by facility, or in any combination thereof.

Insurance Requirements

The contractor shall carry appropriate insurance on its employees, products and property, including Worker Compensation and general liability, in the minimum coverage amount of \$1,000,000.00 with an Umbrella policy of \$2,000,000.00.

The contractor shall provide the County, not later than the date of commencement of service under the contract, with certificates of insurance for the foregoing coverages that designate Butler County, Ohio as an additional insured with respect to the Contractor's participation in the contract and which include a provision that the coverage shall not be cancelled, terminated or otherwise modified without a 30-day prior written notice provided to the County. Cancellation of insurance will be cause for immediate cancellation of the contract.

The County requires reimbursement by the successful bidder for any expenses paid to County employees, by way of Worker's Compensation, when that injury has been caused by the negligence of the provider of the services or goods required by the contract.

Contact Information

All questions regarding this RFP shall be directed to:

Butler County Purchasing Department, Butler County Sheriff's Office Kaitlyn Jarvis, Financial Specialist, 705 Hanover Street, Hamilton, OH 45011, (513)-785-1014, kjarvis@butlersheriff.org.

END OF RFP

**BUTLER COUNTY SHERIFF'S OFFICE
BUTLER COUNTY JAIL HVAC EQUIPMENT
REPLACEMENT**

RFP NO. BCSO-2026-04-01

BUTLER COUNTY SHERIFF'S OFFICE
Deadline for Proposal Submission: 01:30 p.m., June 5, 2026

COMPANY NAME: _____

ADDRESS: _____

I.R.S. EMPLOYER IDENTIFICATION NO.: _____

WORKERS' COMPENSATION NO.: _____

YEAR COMPANY FOUNDED: _____ NUMBER OF EMPLOYEES: _____

CONTACT PERSON FOR BID: _____

CONTACT PHONE: _____ CONTACT FAX: _____

CERTIFICATION: This bid has been completed in accordance with the Specifications for RFP No. BCSO-2026-04-01. I hereby certify that, to the best of my knowledge, the information contained herein, is accurate, complete, and current as of this date. I also certify that I have the authority to submit this proposal and to negotiate, sign, modify, and terminate contracts on behalf of the above-named organization.

SIGNATURE: _____

TYPED/PRINTED NAME: _____

TITLE: _____ DATE: _____



Dear New Butler County Vendor:

In addition to the information provided on the IRS W-9, the Butler County Auditor's Office must collect certain data to satisfy the requirements of the Ohio Public Employees Retirement System (OPERS). Please complete the IRS W-9 AND either the Non-Member Acknowledgement Form (PEDACKN) OR complete the section below that provides the reason why you are exempt from the PEDACKN form.

CRITICAL INFORMATION: IF YOU ARE RECEIVING A PENSION BENEFIT FROM OPERS OR ANOTHER OHIO PENSION SYSTEM YOUR BENEFITS MAY BE IMPACTED IF YOU PERFORM SERVICES FOR BUTLER COUNTY AS A VENDOR. CONTACT OPERS BEFORE YOU START PROVIDING SERVICES AT 1-800-222-7377. IF YOU CHOSE TO PROVIDE SERVICES, YOU MUST COMPLETE THE SR-6 FORM AND INCLUDE THAT WITH YOUR NEW VENDOR PAPERWORK. PLEASE KEEP IN MIND THE SR-6 MUST BE COMPLETED AND RETURNED TO THE COUNTY BEFORE THE END OF THE MONTH YOUR SERVICES START.

The Non-Member Acknowledgement Form (PEDACKN) is to be completed if you are an individual who begins providing personal services to a public employer on or after January 7, 2013, but are not considered by the public employer to be a public employee and will not have contributions made to OPERS. (If you're a vendor with less than five employees, and even if you have been assigned a Federal Tax Identification Number or Employer Identification Number, you must complete the Non-Member Acknowledgement Form (PEDACKN) per Ohio Revised Code 145.036-145.038. All fields on the PEDACKN form must be completed. We will be unable to accept incomplete forms. If the services performed do not have a definitive end date you may write "on going" in that field.

If you meet one of the following criteria, you are exempt from completing the OPERS Non-Member Acknowledgement Form (PEDACKN). Please indicate the reason you are exempt below and return this signed letter to the County Agency you are working with for services along with your W-9. Please do not send any of the vendor forms to the Auditor's Office directly unless you are contracting with our office.

- A Company performing services through a business entity (paid using an IRS FID#) with five or more employees including corporations, associations, firms, limited liability companies and partnerships.
- Federal, State or Local Government
- Individuals or businesses that supply goods only and do not offer options for services
- Easement or Mortgage/Tax foreclosure Payments
- Foster/Adoptive Parent Payments
- Rental Assistance Payments (Rent payments that are not for County occupied buildings)

Vendor Name

Date

Signature

Name Printed

Please note we will not be able to set you up as a vendor to process purchase orders or checks for goods or services until these forms have been completed and returned. These forms should be completed before any services start with Butler County.

Butler County does offer electronic payment options for vendors. If you would like to sign up for this opportunity, please complete the attached payment authorization form. If you prefer to be paid via a paper check, please provide the remittance address on the payment authorization form if it is different than the address on the IRS W-9.

Thank you for your prompt attention to this matter.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	2	Business name/disregarded entity name, if different from above.		
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>		
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	
	6	City, state, and ZIP code		
	7	List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
				-					
or									
Employer identification number									

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
------------------	--------------------------	------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



Nancy NIX
Butler County Auditor CPA

Butler County Auditor's Office
130 High Street / 3rd-4th Floors
Hamilton, Ohio 45011
Phone: 513-887-3154

Payment Authorization/Change Form

Butler County provides two payment options for vendors. In addition to paper checks, we provide ACH payments. ACH (electronic) payments can be deposited into a checking or savings account of your choice. If you choose ACH payments, you will be notified of any payment by e-mail, or we can provide addenda information in a specific format to meet your company's needs. The e-mail option will provide a PDF image of the electronic check stub. To receive payments electronically, you must complete this form and return it with your W-9 to the agency you are working with along with a voided check or bank letter containing routing/account information. The first payment processed after we receive new ACH documentation will be a paper check. Once we can verify the banking information provided, all future payments will be sent electronically.

Remittance Address

Please provide your remittance address information below **if the address is different than the address on the W-9 provided. This will ensure the correct mailing address is set up in our vendor master for payments.**

Vendor Name _____

Street/PO Box _____

City, State, Zip _____

ACH Payment Detail (Optional)

Action: Add Change/Update Inactivate

Vendor Name _____

SSN _____ OR FEIN _____

Email Address (Required if you want a check stub sent) _____

Bank Name: _____

Bank Routing Number: _____ Checking Savings

Account Number: _____

ACH Authorization: This authorizes the Butler County Auditor's Office to send payment electronically to my (our) account indicated above and to other accounts I (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries. This authorization will be in effect until the Butler County Auditor's Office receives this form inactivating the ACH payments from myself and has a reasonable opportunity to act on it.

Please attach a voided check or bank letter containing account and routing information. If you are making updates to an existing ACH account, please be aware your payments will be changed to a paper check until our fraud validation process is complete.

Print Name:	Title:
Signature:	Date:



The Butler County Auditor's Office offers the ability for vendors to receive payments from the County electronically, rather than by check. Payments can be deposited into a checking or savings account of your choice. In addition, you will be notified of the deposit by e-mail. The e-mail will provide all the information that would normally print on the check stub. To receive payments electronically, you must complete this form and return to the address above with a voided check or bank letter containing routing/account information. The first payment processed after we receive all documentation will continue to be a paper check. Once we are able to verify the banking information provided, via the prenote process, all future payments will be sent electronically.

Action:	<input type="checkbox"/> ADD	<input type="checkbox"/> CHANGE/UPDATE	<input type="checkbox"/> INACTIVATE
Payee Name:			Phone No:
Taxpayer ID:	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Butler County Employee:	YES <input type="checkbox"/> NO <input type="checkbox"/>
SSN:	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Address:			
E-mail (Required):			
Bank Name:			
Bank Routing Number:	<input type="checkbox"/> Savings Acct No:		
	<input type="checkbox"/> Checking Account No:		

ATTACH VOIDED CHECK OR A BANK LETTER CONTAINING ACCOUNT AND ROUTING INFORMATION

Authorization: This authorizes the Butler County Auditor's Office to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account indicated above and to other accounts I (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries.

I agree that the ACH transactions authorized herein shall comply with all applicable U.S. Law. I understand and accept the conditions of participation in the direct deposit program.

This authorization will be in effect until the Butler County Auditor's Office receives a written termination notice from myself and has a reasonable opportunity to act on it.

Print Name	Title:
Signature:	Date:



NON-MEMBER ACKNOWLEDGMENT

Ohio Public Employees Retirement System
277 East Town Street, Columbus, Ohio 43215-4642

Employer Services: 1-888-400-0965
www.opers.org

This form is to be completed if you are an individual who begins providing personal services to a public employer on or after Jan. 7, 2013 but are not considered by the public employer to be a public employee (e.g., you are an independent contractor) and will not have contributions made to OPERS.

Employer: Please complete Step 2. The form must be completed and returned to the retirement system no later than 30 days after the individual begins providing personal services to the public employer. You may fax the completed form to 614-857-1152 or email to employeroutreach@opers.org.

If the individual providing this service is receiving a benefit from OPERS, you must submit the Notice of Re-employment or Contract Services of an OPERS Benefit Recipient, form SR-6, in addition to the Non-Member Acknowledgement, form PEDACKN, for the service listed below. Failure to submit the SR-6 form timely may result in an overpayment of pension billed to the employer.

STEP 1: Personal Information

First Name

MI

Last Name

J I L L M C O L E

Date of Birth:

Month

Day

Year

0 1 / 0 1 / 1 9 8 2

STEP 2: Public Employer Information (To be completed by the Public Employer)

Name of Public Employer for which individual is providing personal services

B U T L E R C O U N T Y

Employer Contact

First Name

MI

Last Name

J I L L M C O L E

Employer Code

Employer Contact Phone Number

2 0 2 5 5 1 3 - 8 8 7 - 3 1 5 5

Service Provided to Public Employer

Start Date of Service

End Date of Service

Month

Day

Year

Month

Day

Year

0 1 / 0 1 / 1 9 8 2 0 1 / 0 1 / 1 9 8 2

CIVIL RIGHTS COMPLIANCE

Vendor agrees that in the performance of this agreement there shall be no discrimination against an employee because of race, color, sex, religion, national origin, or any other factor as specified in the Civil Rights Act of 1964 and subsequent amendments.

Signature of Representative of Vendor

Name of Company

Date

Attachment A

STEP 3: Acknowledgment

The public employer identified in Step 2 has classified you as an independent contractor or another classification other than a public employee. Ohio law requires that you acknowledge in writing that you have been informed that the public employer identified in Step 2 has classified you as an independent contractor or another classification other than a public employee for the services described in Step 2 and that you have been advised that contributions to OPERS will not be made on your behalf for these services.

If you disagree with the public employer's classification, you may contact OPERS to request a determination as to whether you are a public employee eligible for OPERS contributions for this service. Ohio law provides that a request for a determination must be made within five years after you begin providing personal services to the public employer, unless you are able to demonstrate through medical records to the Board's satisfaction that at the time the five-year period ended, you were physically or mentally incapacitated and unable to request a determination.

By signing this form, you are acknowledging that the public employer for whom you are providing personal services has informed you that you have been classified as an independent contractor or another classification other than a public employee and that no contributions will be remitted to OPERS for the personal services you provide to the public employer. This acknowledgment will remain valid as long as you continue to provide the same services to the same employer with no break in service regardless of whether the initial contract period is extended by any additional agreement of the parties. You also acknowledge that you understand you have the right to request a determination of your eligibility for OPERS membership if you disagree with the public employer's classification. **A copy of this form must be sent to OPERS.**

Signature _____ Today's Date ____/____/____
Do not print or type name

