

PUBLIC FORUM WORK SESSION AND REGULAR BCC MEETING MINUTES – Continued

COUNTY ADMINISTRATOR'S REPORT – Continued

II. BUDGET/FINANCE CONSENT AGENDA – Continued

1-10. Approval of Various Consent Agenda Items – Continued

3. Dropping the recommendation that the Board take the following action concerning the State of Florida VISA Purchasing Card Services Contract Number 973-120-97-1:

A. Terminate the utilization of the State of Florida VISA Purchasing Card Services Contract Number 973-120-97-1, with Bank of America; and

B. Authorize the County to piggyback off of the City of Port St. Lucie Procurement Card Program Linking Authorization Contract #20070062, in accordance with the Escambia County Code of Ordinances, Chapter 46, Article II, Section 46-44, Applications and exemptions; and Section 46-64, Board Approval, and award a Contract to FIA Card Services, N.A., a Bank of America Company, for use of the Purchasing Card Program and rebate with Bank of America, at no cost to the County, PD 08-09.053, for a period of 36 months, contingent on approval by the County Attorney's office.

4. See Page 33.

5. Approving the extension of the Contract with Horton Emergency Vehicles for "Purchase of Ambulances," PD 05-06.048, through June 15, 2011, in accordance with the terms and conditions of the solicitation and annual appropriation of funds (Funding Source: Fund 352 [Local Option Sales Tax III], Cost Center 330435).

6. Taking the following action concerning the surplus and sale of real property located at 1608 West DeSoto Street:

A. Declaring surplus the Board's real property, Account Number 15-0980-100, Reference Number 00-0S-00-9060-024-093, acquired by tax deed; a legal notice will be posted in the Pensacola News Journal for two weeks stating that the County will be accepting offers by sealed bid;

B. Authorizing the sale of this property to the bidder with the highest offer received from sealed bids above the minimum bid of \$6,034, in accordance with Section 46.134 of the Escambia County Code of Ordinances, without further action of the Board; and

C. Authorizing the Chairman to sign all documents related to the sale.



BOARD OF COUNTY COMMISSIONERS
Escambia County, Florida

ORGANIZATION: Public Safety Bureau

FROM: Michael L. Hardin, Bureau Chief 

DATE: May 18, 2009

ISSUE: Extension of Contract for Purchase of Ambulances, PD 05-06.048

RECOMMENDATION:

That the Board approve the extension of the contract with Horton Emergency Vehicles for "Purchase of Ambulances", PD 05-06.048, through June 15, 2011, in accordance with the terms and conditions of the solicitation and annual appropriation of funds.
[Funding Source: Fund 352 (LOST III), Cost Center 330435]

BACKGROUND:

The contract extension requested is in accordance with the terms and conditions of the current contract, the initial three-year term of which became effective June 15, 2006.

BUDGETARY IMPACT:

Funding is budgeted in Fund 352 (LOST III), Cost Center 330435.

LEGAL CONSIDERATIONS/SIGN-OFF:

N/A (Standard Cover Sheet Contract)

PERSONNEL: N/A

POLICY/REQUIREMENT FOR BOARD ACTION/DISCUSSION:

This recommendation is consistent with the Board's policy and procedures for purchasing.

IMPLEMENTATION REQUIREMENTS: N/A

COORDINATION WITH OTHER AGENCIES/PERSONS: N/A

CONCUR:


Robert R. McLaughlin
County Administrator

Attachment: Original Board Action

PUBLIC FORUM WORK SESSION AND REGULAR BCC MEETING MINUTES – Continued

COUNTY ADMINISTRATOR'S REPORT – Continued

II. BUDGET/FINANCE CONSENT AGENDA – Continued

1-27. Approval of Various Consent Agenda Items – Continued

22. Amending the Board's action taken at the April 6, 2006, Regular Board Meeting, concerning Drainage Pipes, PD 05-06.052 (*County Administrator's Report, Item II-25*), to correct the unit price in Category 4, (*Category*) Item Number 16, from \$24.72 to \$74.72, due to a scrivener's error. 1820
23. Amending the Board's action taken at the May 18, 2006, Regular Board Meeting, concerning Underwriting Services, PD 05-06.068 (*County Administrator's Report, Item II-14*), to correct the name from Bank of America Securities, to Banc of America Securities, LLC, due to a scrivener's error. 1820
24. Approving the extension of the Contract with Riker Irrigation, Inc., for "Irrigation Installation and Maintenance," PD 02-03.59, through January 23, 2007, contingent upon annual appropriations of funds, and in accordance with the terms and conditions of the solicitation; the Contract amount is approximately \$35,000, and is funded in Fund 001 (General Fund), Cost Center 350226 and Fund 351 (Local Option Sales Tax II Fund), Cost Center 350213. 1820
25. Approving a price increase to Cougar Oil, Inc., for "Lubrication Products, Anti-Freeze & Brake Fluid," for various County Departments, PD 03-04.28, in accordance with the terms and conditions of the Contract; funding is available from various funds and cost centers. 1820
26. Taking the following action concerning the purchase of ambulances for Public Safety: 1820
- A. Awarding a three-year Contract, with two one-year options, to Horton Emergency Vehicles, as recommended by the Selection and Negotiation Committee, for PD 05-06.048, "Purchase of Ambulances," in accordance with the terms and conditions of the solicitation, the proposal, the Final and Best Offer and annual appropriation of funds, with funding available from Fund 351 (Local Option Sales Tax II [LOST II] Fund), Cost Center 330314, Project Number 05PS0038 and Fund 408 (Emergency Medical Services Fund), Cost Center 330302;

(Continued on Page 30)

PUBLIC FORUM WORK SESSION AND REGULAR BCC MEETING MINUTES – Continued

COUNTY ADMINISTRATOR'S REPORT – Continued

II. BUDGET/FINANCE CONSENT AGENDA – Continued

1-27. Approval of Various Consent Agenda Items – Continued

26. Continued...

B. Approving a Purchase Order to Horton Emergency Vehicles for four ambulances, in the amount of \$169,000 each, for a total of \$676,000, in accordance with the terms and conditions of Contract PD 05-06.048, "Purchase of Ambulances," with funding from Fund 351 (LOST II Fund), Cost Center 330314, Project Number 05PS0038 and Fund 408 (Emergency Medical Services Fund), Cost Center 330302;

C. Approving a Purchase Order to Horton Emergency Vehicles to refurbish Unit 16, an ambulance that was damaged in an accident, for a not-to-exceed amount of \$75,000, to include replacing the chassis with a 2007 Ford F-350, in accordance with the terms and conditions of Contract PD 05-06.048, "Purchase of Ambulances"; funding is available in Fund 408 (Emergency Medical Services Fund), Cost Center 330302; and

D. Authorizing the County Administrator to sign the Contracts and the Purchase Orders relating to this recommendation.

27. Awarding a Contract, Design Crocket Road and Blue Pit Drainage Project, PD 05-06.004, to Hatch Mott MacDonald Florida, LLC, in the amount of \$188,260 (funds are available from: Object Code 56301, Cost Center 210105, Project Code Number 06EN0735). 1820



BOARD OF COUNTY COMMISSIONERS
Escambia County, Florida

DEPARTMENT: Purchasing
FROM: Claudia Simmons, Chief, Purchasing
DATE: June 1, 2006
ISSUE: Purchase of Ambulances, PD 05-06.048

RECOMMENDATION:

That the Board take the following action concerning the purchase of ambulances for Public Safety:

- A. Award a three-year contract with two one-year options, to Horton Emergency Vehicles as recommended by the Selection and Negotiation Committee, for PD 05-06.048, Purchase of Ambulances, in accordance with the terms and conditions of the solicitation, the proposal, the Final and Best Offer and annual appropriation of funds, with funding available from Fund 351 (LOST II Fund), Cost Center 330314, Project 05PS0038 and Fund 408 (Emergency Medical Services Fund), Cost Center 330302;
- B. Approve a purchase order to Horton Emergency Vehicles for four ambulances, in the amount of \$169,000 each for a total of \$676,000, in accordance with the terms and conditions of contract PD 05-06.048, Purchase of Ambulances, with funding from Fund 351 (LOST II Fund), Cost Center 330314, Project 05PS0038 and Fund 408 (Emergency Medical Services Fund), Cost Center 330302;
- C. Approve a purchase order to Horton Emergency Vehicles to refurbish Unit 16, an ambulance that was damaged in an accident, for a not to exceed amount of \$75,000, to include replacing the chassis with a 2007 Ford F-350, in accordance with the terms and conditions of contract PD 05-06.048, Purchase of Ambulances. Funding is available in Fund 408 (Emergency Medical Services Fund), Cost Center 330302.
- D. Authorize the County Administrator to sign the contracts and the purchase orders relating to this recommendation.

BACKGROUND:

A Request for Proposals was advertised in the Pensacola News Journal on February 26, 2006 and mailed out on February 27, 2006 for "PD 05-06.048, Purchase of Ambulances". The solicitation was sent to seven vendors and two proposals were received and opened on April 3, 2006.

BCC: 06-15-2006
RE: Purchase of Ambulances, PD 05-06.048
June 1, 2006
Page 2 of 2

BUDGETARY IMPACT:

Funding is available in Fund 351 (LOST II Fund), Cost Center 330314, Project 05PS0038 and Fund 408 (Emergency Medical Services Fund), Cost Center 330302.

LEGAL CONSIDERATIONS/SIGN-OFF:

N/A - per County Attorney – Coversheet Contract

PERSONNEL:

Public Safety Department will be administering this contract.

POLICY/REQUIREMENT FOR BOARD ACTION/DISCUSSION:

This recommendation is consistent with the Board's policy and procedures for Purchasing.

IMPLEMENTATION REQUIREMENTS:

Purchasing will be responsible for obtaining the signed contract, insurance and issuance of the purchase orders.

COORDINATION WITH OTHER AGENCIES/PERSONS:

The contract will be posted on the Purchasing web page as a continuing contract.

CONCUR: _____
George Touart, County Administrator

Attachments: Register of Proposers
Final and Best Offer from Horton Emergency Vehicles

REGISTER OF PROPOSERS

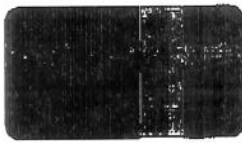
DESCRIPTION: PURCHASE OF AMBULANCES RFP # PD 05-06.048									
Opening Time: 2:00 p.m. CDT Opening Date: April 3, 2006 Opening Location: Rm 11.407	Solicitation Offer & Award Form.	Proposal Form	Sworn Statement on Entity Crimes	Drug-Free Workplace Form	Information Sheet for Transactions & Conveyances Corporation ID	Acknowledge-ment of Addendums	Certificate of Authority to do Business in the State of Florida	Certificate of Insurance	
NAME OF PROPOSERS									
Cindy Morgan, Sales Manager Ten-8 Fire Equipment, Inc. 2904 59 th Avenue, Dr. E. Bradenton, FL 34203	X	X	X	X	X	X	X	X	
Jason Cavallo, Sales Rep. Horton Emergency Vehicles 3800 McDowell Road Grove City, Ohio 43123	X	X	X	X	X	X	X	X	
PROPOSALS OPENED BY:	Bessie Bradshaw		DATE: 04/03/2006						
PROPOSALS TABULATED BY:	Cynthia Smith		DATE: 04/03/2006						
PROPOSALS WITNESSED BY:	Cynthia Smith		DATE: 04/03/2006						

CAR
Date: 06/15/2006

BCC
Date: 06/15/2006

The Selection/Negotiation Committee recommends to the BCC: That the Board of County Commissioners award a contract to Horton Emergency Vehicles for PD 05-06.048, Purchase of Ambulances.

Pursuant to Section 19.07 (3)(M), F.S., all documents relating to this tabulation are available for public inspection and copying at the Office of Purchasing.



Horton

EMERGENCY VEHICLES

June 1, 2006

Kathy Spencer
 Purchasing Agent III
 Office of Purchasing
 2nd Floor, Matt Langley Bell, III Building
 213 Palafox Place
 Pensacola, FL 32502

Mrs. Spencer,

This letter represents our final and best offer regarding your purchase of ambulances, Specification PD 05-06-048.

Horton Emergency Vehicles will provide a total of four (4) ambulances meeting the specification provided under Addendum #2, on International 4300LP chassis, complete and delivered for the total sum of \$169,000.00 per unit. Should Escambia County wish to take delivery of the units at the manufacturing location, then a \$1,000.00 discount shall be provided. In such a case Escambia County assumes all expenses associated with transport of the units.

The units will be delivered within 210 calendar days of the date of the purchase order. There will be a \$250.00 per unit per day liquidated damages penalty for late delivery. As has always been the case in past dealings with Escambia County payment for the units in full is due upon delivery. Should the chassis price from the chassis OEM increase at any time, then that increase will be added to future orders provided that Horton can provide documentation from the chassis OEM showing the amount and effective date of the increase.

We also agree to perform a standard refurbishment of unit #16 for an amount not to exceed \$75,000.00. The chassis to be used will be a 2007 Ford F-350. The cost on this chassis is \$31,413.00. The term 'standard refurbishment' is defined in our response to the original RFP. In addition to the standard refurbishment we will also replace any broken chassis-mounted lights or siren speakers at no additional cost. Because this vehicle has been involved in an accident Horton Emergency Vehicles will perform a thorough inspection of the vehicle upon arrival at our facility. If further structural damage is found at that time and it is determined that this damage will cause the cost of the refurbishment to rise above the \$75,000.00 amount, then Horton will immediately notify the county prior to performing any work. This unit will be delivered in approximately 210 days from



Horton

EMERGENCY VEHICLES

the date of the purchase order. The cost of transporting the unit from Escambia County to Horton Emergency Vehicles is the responsibility of the county.

Thank you for your continued interest in Horton. We look forward to working with Escambia County further. Please let me know if any questions or issues arise and I will do my best to assist you.

Thank you,

Jason Cavallo
Horton Emergency Vehicles

**ESCAMBIA COUNTY FLORIDA
REQUEST FOR PROPOSAL
PROPOSER'S CHECKLIST
PURCHASE OF AMBULANCES
SPECIFICATION PD 05-06.048**

- HOW TO SUBMIT YOUR BID

PLEASE REVIEW THIS DOCUMENT CAREFULLY. OFFERS THAT ARE ACCEPTED BY THE COUNTY ARE BINDING CONTRACTS. **INCOMPLETE BIDS ARE NOT ACCEPTABLE.** ALL DOCUMENTS AND SUBMITTALS SHALL BE RECEIVED BY THE OFFICE OF PURCHASING ON OR BEFORE DATE AND HOUR FOR SPECIFIED FOR RECEIPT. LATE BIDS WILL BE RETURNED UNOPENED.

** Documents submitted with Proposals are to be on the forms provided in the Request For Proposal and photocopies of other required documents*

THE FOLLOWING DOCUMENTS SHALL BE RETURNED WITH BID:

- SOLICITATION, OFFER AND AWARD FORM (IN DUPLICATE WITH ORIGINAL SIGNATURE)
- BID FORMS (IN DUPLICATE WITH ORIGINAL SIGNATURE)
- BID SURETY (BOND, CHECK, ETC.)

THE FOLLOWING DOCUMENTS SHOULD BE RETURNED WITH BID

- LETTER FROM INSURANCE CARRIER AS SPECIFIED IN THE "INSURANCE REQUIREMENTS" (Paragraph 60)
- SWORN STATEMENT PURSUANT TO SECTION 287.133(3)(A), FLORIDA STATUTES, ON ENTITY CRIMES
- DRUG-FREE WORKPLACE FORM
- INFORMATION SHEET FOR TRANSACTIONS AND CONVEYANCES CORPORATE IDENTIFICATION
- CERTIFICATE OF AUTHORITY TO DO BUSINESS FROM THE STATE OF FLORIDA
- OCCUPATIONAL LICENSE
- FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION – LICENSE(S), CERTIFICATION(S) AND/OR REGISTRATION(S)
- WRITTEN OPINION OF AN ATTORNEY FROM A FOREIGN STATE AS TO BID PREFERENCES
- WARRANTY COVERAGE INFORMATION AND ETC. (SEE PAGE 27&28 OF SPECIFICATIONS)
- SAFETY TEST CERTIFICATION (SEE PAGE 29 OF SPECIFICATIONS)
- REFERENCES (SEE PAGE 30 OF SPECIFICATIONS)
- CHECKLIST ON SPECIFICATIONS (PAGES 33-57)
- BEFORE YOU SUBMIT YOUR BID, HAVE YOU:

PLACED YOUR BID WITH ALL REQUIRED SUBMITTAL ITEMS IN A SEALED ENVELOPE CLEARLY MARKED FOR SPECIFICATION NUMBER, PROJECT NAME, NAME OF BIDDER, AND DUE DATE AND TIME OF BID RECEIPT?

- THE FOLLOWING SUBMITTALS ARE REQUIRED UPON NOTICE OF AWARD:
CERTIFICATE OF INSURANCE
PAYMENT AND PERFORMANCE BONDS, IF REQUIRED

- HOW TO SUBMIT A NO BID

IF YOU DO NOT WISH TO BID AT THIS TIME, PLEASE REMOVE THE BIDDER SOLICITATION, OFFER AND AWARD FORM FROM THE BID SOLICITATION PACKAGE AND ENTER NO BID IN THE "**REASON FOR NO BID**" BLOCK, YOUR COMPANY'S NAME, ADDRESS, SIGNATURE, AND RETURN THE BIDDER SOLICITATION, OFFER AND AWARD FORM IN A SEALED ENVELOPE. THIS WILL ENSURE YOUR COMPANY'S ACTIVE STATUS IN OUR BIDDER'S LIST.

**THIS FORM IS FOR YOUR CONVENIENCE TO ASSIST IN FILLING OUT YOUR
BID ONLY.**

DO NOT RETURN WITH YOUR BID

**ESCAMBIA COUNTY
FLORIDA**

REQUEST FOR PROPOSAL

PURCHASE OF AMBULANCES

SPECIFICATION NUMBER PD 05-06.048

BIDS WILL BE RECEIVED UNTIL: 1:00 p.m., CST, Friday, March 24, 2006

**Office of Purchasing, Room 11.407
213 Palafox Place, Pensacola, FL 32502
Matt Langley Bell III Building
Post Office Box 1591
Pensacola, FL 32597-1591**

Board of County Commissioners

D.M. "Mike" Whitehead, Chairman
J.W. "Bill" Dickson, Vice Chairman
Marie Young
Thomas G. Banjanin
Kevin White

Procurement Assistance:

Kathy Spencer
Purchasing Agent III
Office of Purchasing
2nd Floor, Matt Langley Bell, III Building
213 Palafox Place
Pensacola, FL 32502
Tel: (850) 595-4983
Fax: (850) 595-4805

Technical Assistance:

Gary Straughn
EMS Operations Chief
Public Safety
6575 North W. Street
Pensacola, FL 32505
Tel: (850) 471-6724
Fax: (850) 471-6455

SPECIAL ACCOMMODATIONS:

Any person requiring special accommodations to attend or participate, pursuant to the Americans with Disabilities Act, should call the Office of Purchasing, (850) 595-4980 at least five (5) working days prior to the solicitation opening. If you are hearing or speech impaired, please contact the Office of Purchasing at (850) 595-4684 (TTY).

NOTICE

It is the specific legislative intent of the Board of County Commissioners that NO CONTRACT under this solicitation shall be formed between Escambia County and the awardee vendor until such time as the contract is executed by the last party to the transaction.

**PROJECT NAME
PD 05-06.048**

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**Forms marked with an (* Asterisk) must be returned with Offer.
Forms marked with a (** Double Asterisk) should be returned with Offer.**

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SOLICITATION, OFFER AND AWARD FORM ESCAMBIA COUNTY FLORIDA

SUBMIT OFFERS TO:

Kathy Spencer

Purchasing Agent III

Office of Purchasing, 2nd Floor, Room 11.101

213 Palafox Place, Pensacola, FL 32502

Post Office Box 1591, Pensacola, FL 32597-1591

Phone No: (850)595-4980 Fax No: (850) 595-4805

Request for Proposal

PURCHASE OF AMBULANCES

SOLICITATION NUMBER:

PD 05-06.048

SOLICITATION

MAILING DATE: February 27, 2006

OFFERS WILL BE RECEIVED UNTIL: 1:00 p.m., CST, Friday March 24, 2006 and may not be withdrawn within 90 days after such date and time.

POSTING OF SOLICITATION TABULATIONS

Solicitation tabulations with recommended awards will be posted for review by interested parties at the County Office of Purchasing and will remain posted for a period of two (2) business days. Failure to file a protest in writing within two (2) business days after posting of the solicitation tabulation shall constitute a waiver of any protest relating to this solicitation. All protests must be filed with the Office of Purchasing. They will be handled according to the Escambia County Purchasing Ordinance.

OFFER (SHALL BE COMPLETED BY OFFEROR)

FEDERAL EMPLOYER IDENTIFICATION NUMBER OR S.S. NUMBER: _____

TERMS OF PAYMENT: _____

DELIVERY DATE WILL BE _____ DAYS AFTER RECEIPT OF PURCHASE ORDER.

VENDOR NAME: _____

REASON FOR NO OFFER: _____

ADDRESS: _____

CITY, ST. & ZIP: _____

PHONE NO.: (____) _____

BID BOND ATTACHED \$ _____

TOLL FREE NO.: (____) _____

FAX NO.: (____) _____

I certify that this offer is made without prior understanding, agreement, or connection, with any Corporation, firm or person submitting an offer for the same materials, supplies, or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this offer and certify that I am authorized to sign this offer for the offeror and that the offeror is in compliance with all requirements of the solicitation, including but not limited to certification requirements. In submitting an offer to Escambia County Florida, the offeror agrees that if the offer is accepted, the offeror will convey, sell, assign or transfer to Escambia County Florida all rights title and interest in and to all causes of action it may now or hereafter acquire under the Anti-trust laws of the United States and the State of Florida for price fixing relating to the particular commodities or services purchased or acquired by Escambia County Florida. At the County's discretion such assignment shall be made and become effective at the time the County tenders final payment to the offeror

NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER

(TYPED OR PRINTED)

** _____

SIGNATURE OF PERSON AUTHORIZED TO SIGN OFFER
(MANUAL)

****Failure to execute this Form binding the bidder/proposer's offer shall result in this bid/proposal being rejected as non-responsive.**

AWARD

Upon certification of award the contract shall be signed by the President or Vice-President. Any other officer shall have permission to sign via a resolution approved by the Board of Directors on behalf of the company. Awarded contractor shall submit a copy of the resolution together with the executed contract to the Office of Purchasing. The terms and conditions of this solicitation and the bid response of the awarded contractor is incorporated by reference herein and made a part of this contract.

CONTRACTOR

ESCAMBIA COUNTY FLORIDA

Name and Title of Signer (Type or Print)

Name and Title of Signer (Type or Print)

Name of Contractor

By

County Administrator

Date

By

Signature of Person Authorized to Sign

Date

WITNESS

Date

ATTEST:

Corporate Secretary

Date

WITNESS

Date

[CORPORATE SEAL]

ATTEST:

Witness

Date

Awarded Date

ATTEST:

Witness

Date

Effective Date

PROPOSAL FORM
Purchase of Ambulances
Specification Number PD 05-06.048

Board of County Commissioners
 Escambia County, Florida
 Pensacola, Florida 32502

Date: _____

Commissioners:

In accordance with your "Request for Proposal" and "Instructions to Offerors for **Purchase of Ambulances** as described and listed in this Invitation for Bids, and subject to all conditions thereof, I, undersigned, hereby propose to provide at the following price: Request For Proposal

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
Three	Ambulance Manuf. & Model _____	\$ _____	\$ _____

Deduct: If Escambia county picks units up at vendor's locations: \$(_____) Performance and/or Payment Bond, if required \$ _____ cost per \$1000

Delivery _____ days after receipt of purchase order (Required delivery 180 days from date of PO).

CONTRACTOR REQUIREMENTS

Acknowledgment is hereby made of receipt of the following addenda issued during the bidding period:

Addendum No. _____ Date _____ Addendum No. _____ Date _____
 Addendum No. _____ Date _____ Addendum No. _____ Date _____

(PLEASE TYPE INFORMATION BELOW)

SEAL IF OFFER IS BY CORPORATION

State of Florida Department of State Certificate of Authority

Document Number _____

Occupational License No. _____

Bidder: _____

By: _____

Signature: _____

Title: _____

Address: _____

Type of Contractor's License, Certification and/or Registration _____

Expiration Date: _____

Person to contact concerning this bid

Phone/Toll Free/Fax # _____

Terms of Payment

(Check one) Net 30 Days ___ 2% 10th Prox ___

E-Mail Address: _____

Home Page Address: _____

Will your company accept Escambia County Purchasing Cards? Yes ___ No ___.

Person to contact for emergency service:

Phone/Cell/Pager #: _____

Will your company accept Escambia County Direct Payment Vouchers? Yes ___ No ___.

Person to contact for disaster service:

Home Address: _____

County Permits/Fees required for this project:

Permit _____ Cost _____
 _____ NONE KNOWN _____

Home Phone/Cell/Pager #: _____

PD 05-06.048

Purchase of Ambulances

Attached to Proposal you shall find a bid bond, cashiers check or certified check (circle one that applies) in the amount of Five (5%) of the offer.

The Offeror agrees to deliver the ambulance(s) within **180 consecutive calendar days** from the date of the purchase order. **Liquidated damages of \$250.00 each day will be assessed for each day that the ambulance(s) are not delivered starting with the 181st day.** All work to be accomplished under this proposal shall be responsibility of Offeror and failure of subcontractors to perform shall not relieve Offeror of any liquidated damages. A Bid Bond in the amount of 5% of base offer is to be furnished by each Offeror. Offeror further acknowledges that all of the work outlined above may not be required at the discretion of Escambia County. The total will be subject to total funds available during the course of the work. However, it is the intent of Escambia County at this time to substantially complete the listed work.

Names and addresses of proposed Subcontractors to be utilized for work on this project:

- 1.
- 2.
- 3.
- 4.

**SWORN STATEMENT PURSUANT TO SECTION 287.133(3)(a),
FLORIDA STATUTES, ON ENTITY CRIMES**

1. This sworn statement is submitted to _____
(print name of the public entity)
- by _____
(print individual's name and title)
- for _____
(print name of entity submitting sworn statement)

whose business address is

and (if applicable) its Federal Employer Identification Number (FEIN) is:

(If the entity has no FEIN, include the Social Security Number of the Individual signing this sworn statement: _____)

2. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), **Florida Statutes**, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision or any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), **Florida Statutes**, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
4. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), **Florida Statutes**, means:
- a. A predecessor or successor of a person convicted of a public entity crime; or
 - b. An entity under the control any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

- c. I understand that a "person" as defined in Paragraph 287.133(1)(e), **Florida Statutes**, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
- d. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **(indicate which statement applies.)**

_____ Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. **(attach a copy of the final order)**

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT HIS FORM IS VALID THOROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

(signature)

Sworn to and subscribed before me this _____ day of _____, 19_____

Personally known _____

OR produced identification _____

(Type of identification)

Notary Public - State of _____

My commission expires _____

(Printed typed or stamped commissioned name of notary public)

Drug-Free Workplace Form

The undersigned vendor, in accordance with Florida Statute 287.087 hereby certifies that _____ does:

Name of Business

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, 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 Paragraph 1.
4. In the statement specified in Paragraph 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 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 Paragraphs 1 through 5.

Check one:

- _____ As the person authorized to sign this statement, I certify that this firm complies fully with above requirements.
- _____ As the person authorized to sign this statement, this firm **does not** comply fully with the above requirements.

Offeror's Signature

Date

**Information Sheet
for Transactions and Conveyances
Corporation Identification**

The following information will be provided to the Escambia County Legal Department for incorporation in legal documents. It is, therefore, vital all information is accurate and complete. Please be certain all spelling, capitalization, etc. is exactly as registered with the state or federal government.

Is this a Florida Corporation (Please Circle One)
Yes or No

If not a Florida Corporation,

In what state was it created: _____
Name as spelled in that State: _____

What kind of corporation is it: "For Profit" or "Not for Profit"

Is it in good standing: Yes or No

**Authorized to transact business
in Florida:** Yes or No

State of Florida Department of State Certificate of Authority Document No.: _____

Does it use a registered fictitious name: Yes or No

Names of Officers:

President: _____ Secretary: _____
Vice President: _____ Treasurer: _____
Director: _____ Director: _____
Other: _____ Other: _____

Name of Corporation (As used in Florida):

(Spelled exactly as it is registered with the state or federal government)

Corporate Address:

Post Office Box: _____
City, State Zip: _____
Street Address: _____
City, State, Zip: _____

(Please provide post office box and street address for mail and/or express delivery; also for recorded instruments involving land)

(Please continue and complete page 2)

Federal Identification Number: _____
(For all instruments to be recorded, taxpayer's identification is needed)

Contact person for company: _____
Telephone Number: _____ Facsimile Number: _____

Name of individual who will sign the instrument on behalf of the company:

(Upon Certification of Award, Contract shall be signed by the President or Vice-President. Any other officer shall have permission to sign via a resolution approved by the Board of Directors on behalf of the company. Awarded contractor shall submit a copy of the resolution together with the executed contract to the Office of Purchasing)

(Spelled exactly as it would appear on the instrument)

Title of the individual named above who will sign on behalf of the company:

END

(850) 488-9000

Verified by: _____ Date: _____

ESCAMBIA COUNTY , FLORIDA GENERAL TERMS and CONDITIONS

The following General Terms and Conditions are incorporated by reference and have the same legal effect as if printed in its entirety.

A full textual copy of these conditions may be obtained by visiting the Office of Purchasing Home Page (see Bid Information), by telephoning the Office of Purchasing at (850) 595-4980 or by Fax at (850)595-4805.

NOTE: Any and all Special Terms and Conditions and specifications referenced within the solicitation which vary from these General Terms and Conditions shall have precedence. Submission of the Bidder/Proposal Solicitation, Offer and Award Form and Bid/Proposal Form(s) in accordance with these General Terms and Conditions and Special Terms and Conditions constitutes an offer from the offeror. If any or all parts of the offer are accepted by Escambia County Florida, an authorized representative of the county shall affix his signature hereto, and this shall then constitute a written agreement between parties. The conditions incorporated herein become a part of the written agreement between the parties.

Bid Information See Home Page URL: <http://www.co.escambia.fl.us/purchasing>
Click on **ON-LINE SOLICITATIONS**

1. **Sealed Solicitations**
2. **Execution of Solicitation**
3. **No Offer**
4. **Solicitation Opening**
5. **Prices, Terms and Payment**
 - 5.01 **Taxes**
 - 5.02 **Discounts**
 - 5.03 **Mistakes**
 - 5.04 **Condition and Packaging**
 - 5.05 **Safety Standards**
 - 5.06 **Invoicing and Payment**
 - 5.07 **Annual Appropriations**
6. **Additional Terms and Conditions**
7. **Manufacturers= Name and Approved Equivalents**
8. **Interpretations/Disputes**
9. **Conflict of Interest**
 - 9.01 **County Procedure on Acceptance of Gifts**
 - 9.02 **Contractors Required to Disclose any Gift Giving**
 - 9.03 **Gratuities**
10. **Awards**
11. **Nonconformance to Contract Conditions**
12. **Inspection, Acceptance and Title**
13. **Governmental Restrictions**
14. **Legal Requirements**
15. **Patents and Royalties**
16. **Price Adjustments**
17. **Cancellation**
18. **Abnormal Quantities**
19. **Advertising**
20. **Assignment**
21. **Liability**
22. **Facilities**
23. **Distribution of Certification of Contract**

ESCAMBIA COUNTY , FLORIDA GENERAL TERMS and CONDITIONS
The following General Terms and Conditions are incorporated by reference (continued).

24. **The Successful Bidder(s) must Provide**
25. **Addition/deletion of Items**
26. **Ordering Instructions**
27. **Public Records**
28. **Delivery**
29. **Samples**
30. **Additional Quantities**
31. **Service and Warranty**
32. **Default**
33. **Equal Employment Opportunity**
34. **Florida Preference**
35. **Contractor Personnel**
36. **Award**
37. **Uniform Commercial Code**
38. **Contractual Agreement**
39. **Payment Terms/Discounts**
40. **Improper Invoice; Resolution of Disputes**
41. **Public Entity Crimes**
42. **Suspended and Debarred Vendors**
43. **Drug-Free Workplace Form**
44. **Information Sheet for Transactions and Conveyances**
45. **Copies**
46. **License and Certifications** - For access to Certification/Registration Form for doing Business in Florida go to the Department of State, Division of Corporations,
URL:<http://ccfcorp.dos.state.fl.us/corpweb/inquiry/search.html>
47. **Execution of Contract**
48. **Purchase Order**
49. **No Contingent Fees**
50. **Solicitation Expenses**
51. **On-Line Auction Services**

SPECIAL TERMS AND CONDITIONS

The Board of County Commissioners, Escambia County, Florida, invites your company to submit a sealed offer on the item(s) as listed in this solicitation request.

All terms and conditions below are a part of this request, and no offer will be accepted unless all these conditions have been complied with. The County reserves the right to waive informalities in any offer; to reject any or all offers, in whole or in part, and/or to accept the offer(s) that in its judgment is from the lowest and most responsible and responsive offeror(s).

Instructions to Offerors

1. **General Information**

All offers to be considered shall be in the possession of the Office of Purchasing prior to the time of the solicitation closing. Offers may be mailed to 213 Palafox Place, Room 11.101, Pensacola, Florida 32502 or delivered to the Office of Purchasing, 2nd floor, Room 11.101, Matt Langley Bell, III Bldg., 213 Palafox Place, Pensacola, Florida 32502, in a sealed envelope clearly marked:

Specification Number PD 05-06.048, "Purchase of Ambulances", Public Safety Department, 1:00 p.m., CST, Friday, March 24, 2006.

Note: If you are using a courier service; Federal Express, Airborne, UPS, etc., you must mark airbill and envelope or box with Specification Number and Project Name.

Regardless of the method of delivery, each offeror shall be responsible for his offer(s) being delivered on time as the County assumes no responsibility for same. Offers offered or received after the time set for solicitation closing will be rejected and returned unopened to the offeror(s).

SCOPE OF WORK The Board of County Commissioners of Escambia County is seeking the Professional Services of a qualified contractor to provide ambulances that comply with the current and effective KKK, Federal Specifications for Ambulances.

2. **Bid Surety**

Each offer shall be accompanied by a bid bond, cashier's check or certified check in the amount of **5%** of the total offer.

Checks or bonds are to be made payable to Escambia County, Florida. The amount of the bond or check is the amount of liquidated damages agreed upon should the offeror fail or refuse to enter into a contract with the County.

A County warrant in the amount of the bid check(s) of the successful offeror(s) will be returned immediately after the offeror and the County are mutually bound by contract as evidenced by signatures thereto by an authorized representative of both the offeror and the County, and/or the offeror accepts the purchase order by signing the solicitation, offer and award form/acceptance copy of same and returning to the County Purchasing department. Any unsuccessful offeror(s) will have the amounts of his cashier's or certified check returned via county warrant promptly after award.

All offerors agree that any interest earned on any bid surety while in possession of the County, or its agents, shall be retained by the County.

3. **Bonds**

Performance and Payment Bonds

The County **may** require the successful offeror(s) to furnish **separate performance and payment bonds**, under pledge of adequate surety and covering up to **100% of the dollar value of award** on the forms provided by the County. Such bonds shall be issued by sureties authorized to act as a surety by the State of Florida. Bonds of the successful offeror(s) shall be reviewed by the Office of Purchasing to assure compliance, then recorded in the Office of the Clerk of the Circuit Court Recording Office, 1st Floor, 223 Palafox Place, Pensacola, Florida, by the successful offeror at his expense before the contract is executed. The cost of recording is \$10.00 for the first page and \$8.50 for each additional page.

4. **Procurement Questions**

Procurement questions may be directed to Kathy Spencer, Purchasing Agent III, (850) 595-4983 Telephone, (850) 595-4805 (Fax). Technical questions may be directed to Gary Straughn, EMS Operations Chief, (850) 471-6724 (Telephone), (850) 471-6455 (Fax).

5. **Proposal Forms**

This Solicitation contains a Solicitation, Offer and Award Form and Proposal Form which shall be submitted in a sealed envelope, in duplicate with Original signatures in indelible ink signed in the proper spaces. Responses on vendor forms will not be accepted.

The Offerors Checklist included in this solicitation provides instructions to the offeror on the documentation to be submitted during the procurement process.

6. **F.O.B. Point**

The F.O.B. point shall be destination within Escambia County. The prices offered shall include all costs of packaging, transporting, delivery and unloading (**this includes inside delivery if requested**) to designated point within Escambia County.

OR

The F.O.B. point shall be the awarded vendor's plant or business. Items shall be picked up by county employees.

7. **Delivery**

Delivery is requested within 180 calendar days from date of purchase order.

8. **Liquidated Damages**

Should the awarded vendor fail to complete the required services or make delivery of the commodities or equipment within the time(s) specified in the contract, or within such additional time(s) as may be granted by Escambia County, the County will suffer damage, the amount of which is difficult, if not impossible to ascertain therefore, the vendor shall pay to the County, as liquidated damages, the sum of \$250.00 for each calendar day of delay that actual completion extends beyond the time limit specified until such reasonable time as may be required for final completion of the work. Such sum is mutually agreed upon as a reasonable and proper amount of damages the County will sustain per diem by failure of the vendor to complete the services or make delivery within the specified time. The costs for liquidated damages shall not be construed as a penalty on the vendor.

9. **Compliance with Occupational Safety and Health**

Offeror certifies that all material, equipment, etc., contained in his offer meets all Occupational Safety and Health Administration (OSHA) requirements.

Offeror further certifies that, if he is the awarded vendor, and the material, equipment, etc., delivered is subsequently found to be deficient in any OSHA requirement in effect on date of delivery, all costs necessary to bring the material, equipment, etc., into compliance with the aforementioned requirements shall be borne by the vendor.

In compliance with Chapter 442, Florida Statutes, any item delivered under a contract resulting from this solicitation shall be accompanied by a Material Safety Data Sheet (MSDS) The MSDS shall include the following information.

- A. The chemical name and the common name of the toxic substance.
- B. The hazards or other risks in the use of the toxic substance, including:
 - 1. The potential for fire, explosion, corrosiveness and reactivity;
 - 2. The known acute and chronic health effects of risks from exposure, including the medical conditions which are generally recognized as being aggravated by the exposure to the toxic substance; and
 - 3. The primary route of entry and symptoms of over exposure.
- C. The proper precautions, handling practices, necessary personal protective equipment and other safety precautions in the use of or exposure to the toxic substances, including appropriate emergency treatment in case of over exposure.
- D. The emergency procedure for spills, fire, disposal and first aid.
- E. A description in lay terms of the known specified potential health risks posed by the toxic substance intended to alert any person reading this information.
- F. The year and month, if available, that the information was compiled and the name, address and emergency telephone number of the manufacturer responsible for preparing the information.

10. **Safety Regulations**

Equipment shall meet all state and federal safety regulations for grounding of electrical equipment.

11. **Payment**

Partial payments in the full amount for the value of items received and accepted may be requested by the submission of a properly executed **original** invoice, with supporting documents if required. Payment for accepted equipment/supplies/services will be accomplished by submission of an **original** invoice, in duplicate, to:

Clerk of the Circuit Court
Attention: Accounts Payable
223 Palafox Place, Room 204
Pensacola, FL 32502

12. **Information and Descriptive Literature**

Offerors shall furnish all information requested and in the space provided on the bid/proposal form, if any. Furthermore, each offeror offering an alternate other than the brand(s) specified shall submit with his offer, descriptive literature and/or complete specifications covering the products offered. Reference to literature submitted with a previous offer will not satisfy this provision. Offers which do not comply with these requirements shall be subject to rejection.

13. **Brand/Manufacturer Referenced**

Reference manufacturer indicated. Products similar in design and equal in function and performance may also be considered. Alternate offers shall include detailed specifications and/or descriptive literature. Failure to include such specifications or literature may be cause for disqualification of the offer.

14. **Samples/Demonstrations**

Samples of any product or demonstrations shall be furnished upon request for a quality test or comparison without cost to the County. **All samples shall be identified by vendor name and solicitation number.**

15. **Equipment/Service**

The scope of these specifications is to insure the delivery of a complete unit ready for operation. Omission of any essential detail from these specifications does not relieve the awarded vendor from furnishing a complete unit.

All equipment shall be new, of current manufacturer in production at the time of solicitation opening and carry standard warranties. The awarded vendor shall service all equipment prior to delivery.

Offers will be considered only on equipment which can, on short notice, be serviced and maintained by the successful offeror. At the time of solicitation opening, the offeror shall be an authorized dealer, distributor, and/or representative of the manufacturer for the brand/model being offered. For the purposes of this solicitation, dealer, distributor, and/or representative means a firm or person that owns, operates, or maintains a store, warehouse, or other establishment in which materials, supplies, parts, articles, or equipment of the general character described in the specifications are bought, kept in stock and sold commercially or to the public in the usual course of business. The offeror shall maintain a normal supply of repair parts and be equipped with personnel and facilities to provide such service as necessary to keep the equipment in operation with a minimum delay. Failure to meet these requirements, in the County's sole opinion, may be cause for rejection.

16. **Manuals**

The following manuals, in the quantities indicated, shall be delivered with each piece of equipment:

Operation manual	2 copies
Parts manual	2 copies
Repair manual	2 copies

In addition to the above, the equipment shall be delivered with the following documents as applicable:

1. Statement of origin
2. Warranty certifications
3. Copy of pre-delivery service report
4. DHSMV-82040, Application for certificate of title/registration.
 5. Check for title - Payable to Janet Holley, Escambia County Tax Collector.
Title vehicle to:
ESCAMBIA COUNTY, FLORIDA.
 6. Temporary tag
 7. Sales tax exemption form (if required).
 8. Forward all title work to:
Administrative Services
Property Management - Attn: Cleo Crane
100 E Blount Street
Pensacola, Florida 32501
 9. Check for excess mileage (when applicable) - Payable to, Clerk of the Circuit Court.

17. **Emergency Services**

The contractor resulting from this solicitation is for services that are required during **EMERGENCY** situations such as hurricanes, major fires, etc. Time is of the essence during these situations and the vendor awarded this contract should be able to be contacted at any time, day or night. The Bid Form provides for the emergency information to be supplied. Please be sure to include **all** this information when returning your bid.

18. **Contract Term/Renewal/Termination**

- A. The contract resulting from this Solicitation shall commence effective upon execution by both parties and extend for a period of three (3) years. The contract may be renewed for two (2) additional periods, up to a maximum five (5) years upon mutual agreement of both parties. If any such renewal results in changes in the terms or conditions, such changes shall be reduced to writing as an addendum to this contract and such addendum shall be executed by both parties.

Renewal of the contract shall be subject to appropriation of funds by the Board of County Commissioners.

- B. The initiation County department(s) shall issue release (purchase) orders against the term contract on an "as needed" basis.
- C. The contract may be canceled by the awarded vendor, for good cause, upon ninety (90) days prior written notice.
- D. The County retains the right to terminate the contract, with or without good cause, upon thirty (30) days prior written notice.
- E. In the event of termination by either party as provided herein, the awarded vendor shall be paid for services performed through the date of termination.

19. **Interim Extension of Performance**

After all options have been exercised, and it is determined that interim performance is required to allow for the solicitation and award of a new contract, the County may unilaterally extend the contract for a maximum period of six months. Pricing, delivery and all other terms and conditions of the contract shall apply during this period.

20. **Price Adjustment**

The contract resulting from this Solicitation will remain firm and unchanged for the first twelve months. Written request for price adjustment may be made every (12) months, no less than 30 days prior to the requested effective date. Any increase price adjustment(s) shall be accompanied by written justification attesting that the request is a bonafide cost increase to the vendor. All price adjustments shall be accepted by the County's designated representative. Adjustment in price shall be accomplished by written amendment to this contract.

21. **Purchasing Agreements with other Government Agencies**

The submission of any offer in response to this Solicitation constitutes an offer made under the same terms and conditions, for the same contract price, to other governmental agencies, unless otherwise stipulated by the offeror on the bid/proposal form.

Each governmental agency desiring to accept these offers, and make an award thereof, shall do so independently of any other governmental agency. Each agency shall be responsible for its own purchases and each shall be liable only for materials ordered and received by it, and no agency assumes any liability by virtue of this solicitation.

22. **Ordering**

The County will issue release (purchase) orders against the contract on an as needed basis for the supplies or services listed on the bid/proposal form.

The County has adopted the Visa Purchasing Card Program. The Visa Purchasing Card may be used for purchases on an as needed basis, for the supplies or sources listed on the bid/proposal form, for less than \$1000.00 per individual transaction.

The County can issue vouchers for less than \$1000.00 against the contract, on an as needed basis, for the supplies or services listed on the proposal form.

23. **Term of Offer**

An offer shall constitute an irrevocable offer for a period of ninety (90) days from the solicitation opening date or until the date of award, whichever is earlier, without forfeiting bid bond or check. In the event that an award is not made by the county within ninety (90) days from the solicitation opening date, the offeror may withdraw his offer or provide a written extension of his offer.

24. **Award**

Award shall be made on an "all-or-none total" basis.

25. **Termination**

The purchase order or contract will be subject to immediate termination if either product or service does not comply with specifications as stated herein or fails to meet the county's performance standards. In the event that any of the provisions of the contract are violated by awarded vendor, Escambia County may serve written notice upon the awarded vendor of its intention to terminate the contract. Such notice is to state the reason(s) for such intention to terminate contract. The liability of the vendor for any and all such violation(s) shall not be affected by any such termination and his surety, if any, shall be forfeited.

26. **Termination (Public Records Request)**

If the contractor refuses to allow public access to all documents, papers, letters, or other material subject to the provisions of Chapter 119, Florida Statutes, and made or received by the contractor in conjunction with this agreement then the county may, without prejudice to any right or remedy and after giving the contractor and his surety, if any, seven (7) days written notice, during which period contractor still fails to allow access, terminate the employment of the contractor and take possession of the site and of all materials, equipment, tools, construction equipment and machinery thereon, owned by the contractor, and may finish the project by whatever method it may deem expedient. In such case, the contractor shall not be entitled to receive any further payment until the project is finished. Reasonable terminal expenses incurred by the county may be deducted from any payments left owing the contractor (excluding monies owed the contractor for subcontract work.)

27. **Quantity**

Escambia County reserves the right to increase or decrease estimated quantities as required.

It is understood by all offeror's that the county is not obligated to purchase any minimum or maximum amount during the life of this contract.

Insurance Requirements

28. **Standard Insurance Requirements and Certificates**

This offer contains an extensive insurance requirement. Offerors are encouraged to review these requirements with their insurance agents before submitting offers.

It is not necessary to have this level of insurance in effect at the time of submitting the offer.

A letter from the offeror's insurance carrier will be required as evidence that the offeror will be able to obtain the levels of insurance as required by the contract and indicated on the Sample Certificate of Insurance should your firm be awarded the contract.

County Insurance Required

The contractor shall procure and maintain the following described insurance, except for coverages specifically waived by the County. Such policies shall be from insurers with a minimum financial size of VII according to the latest edition of the AM Best Rating Guide. An A or better Best Rating is "preferred"; however, other ratings if "Secure Best Ratings" may be considered. Such policies shall provide coverages for any or all claims which may arise out of, or result from, the services, work and operations carried out pursuant to and under the requirements of the contract documents, whether such services, work and operations be by the contractor, its employees, or by subcontractor(s), or anyone employed by or under the supervision of any of them, or for whose acts any of them may be legally liable.

The contractor shall require, and shall be responsible for assuring throughout the time the agreement is in effect, that any and all of its subcontractors obtain and maintain until the completion of that subcontractors work, such of the insurance coverages described herein as are required by law to be provided on behalf of their employees and others.

The required insurance shall be obtained and written for not less than the limits of liability specified hereinafter, or as required by law, whichever is greater.
These insurance requirements shall not limit the liability of the contractor.

The County does not represent these types or amounts of insurance to be sufficient or adequate to protect the contractor=s interests or liabilities, but are merely minimums.

Except for workers compensation and professional liability, the contractor=s insurance policies shall be endorsed to name Escambia County as an additional insured to the extent of its interests arising from this agreement, contract or lease.

The contractor waives its right of recovery against the County, to the extent permitted by its insurance policies.

The contractor=s deductibles/self-insured retentions shall be disclosed to the County and may be disapproved by the County. They shall be reduced or eliminated at the option of the County. The contractor is responsible for the amount of any deductible or self-insured retention.

Insurance required of the contractor or any other insurance of the contractor shall be considered primary, and insurance of the county, if any, shall be considered excess, as may be applicable to claims obligations which arise out of this agreement, contract or lease.

Workers Compensation Coverage

The contractor shall purchase and maintain workers compensation insurance for all workers compensation obligations imposed by state law and with employers liability limits of at least \$100,000 each accident and \$100,000 each employee/\$500,000 policy limit for disease, or a valid certificate of exemption issued by the state of Florida, or an affidavit in accordance with the provisions of Florida Workers Compensation law.

Contractor shall also purchase any other coverages required by law for the benefit of employees.

General, Automobile and Excess or Umbrella Liability Coverage

The contractor shall purchase and maintain coverage on forms no more restrictive than the latest editions of the commercial general liability and business auto policies of the insurance services office.

Minimum limits of \$1,000,000 per occurrence for all liability must be provided, with excess or umbrella insurance making up the difference, if any, between the policy limits of underlying policies (including employers liability required in the workers compensation coverage section) and the total amount of coverage required.

General Liability Coverage - Occurrence Form Required

Coverage A shall include bodily injury and property damage liability for premises, operations, products and completed operations, independent contractors, contractual liability covering this agreement, contract or lease, broad form property damage coverages, and property damage resulting from explosion, collapse or underground (x,c,u) exposures.

Coverage B shall include personal injury.

Coverage C, medical payments, is not required.

The contractor is required to continue to purchase products and completed operations

coverage, at least to satisfy this agreement, contract or lease, for a minimum of three years beyond the County's acceptance of renovation or construction projects.

Business Auto Liability Coverage

Business auto liability coverage is to include bodily injury and property damage arising out of ownership, maintenance or use of any auto, including owned, nonowned and hired automobiles and employee nonownership use.

Excess or Umbrella Liability Coverage

Umbrella liability insurance is preferred, but an excess liability equivalent may be allowed. Whichever type of coverage is provided, it shall not be more restrictive than the underlying insurance policy coverages. Umbrella coverage shall drop down to provide coverage where the underlying limits are exhausted.

Evidence/Certificates of Insurance

Required insurance shall be documented in certificates of insurance. If and when required by the County, certificates of insurance shall be accompanied by documentation that is acceptable to the County establishing that the insurance agent and/or agency issuing the certificate of insurance has been duly authorized, in writing, to do so by and on behalf of each insurance company underwriting the insurance coverage(s) indicated on each certificate of insurance.

New certificates of insurance are to be provided to the County at least 30 days prior to coverage renewals. Failure of the contractor to provide the County with such renewal certificates may be considered justification for the County to terminate this agreement, contract or lease.

Certificates should contain the following additional information:

1. Indicate that Escambia County is an additional insured on the general liability policy.
2. Include a reference to the project and the Office of Purchasing number.
3. Disclose any self-insured retentions in excess of \$1,000.
4. Designate Escambia County as the certificate holder as follows:
Escambia County
Attention: Kathy Spencer, Purchasing Agent III
Office of Purchasing, Room 11.101
P.O. Box 1591
Pensacola, FL 32597-1591
Fax (850) 595-4805
5. Indicate that the County shall be notified at least 30 days in advance of cancellation.

Receipt of certificates or other documentation of insurance or policies or copies of policies by the county, or by any of its representatives, which indicate less coverage than required does not constitute a waiver of the contractor's obligation to fulfill the insurance requirements herein.

If requested by the County, the contractor shall furnish complete copies of the contractor's insurance policies, forms and endorsements, and/or such additional information with respect to its insurance as may be requested.

For commercial general liability coverage the contractor shall, at the option of the County, provide an indication of the amount of claims payments or reserves chargeable to the aggregate amount of liability coverage.

Motor Truck Cargo Coverage (or Equivalent)

Motor truck cargo or transportation insurance is to be provided for materials or equipment transported in the contractor's or other vehicles to and from the County. All risks coverage is preferred.

Garage Liability Coverage

Garage Liability insurance is to be purchased to cover the Other Party and its employees for its garage and related operations while in the care, custody and control of the County's vehicles.

Garagekeepers Coverage (Direct-Excess Form)

Garagekeepers Liability insurance is to be purchased to cover damage or other loss, including comprehensive and collision risks, to the County's vehicles while in the care custody and control of the Other Party. This form of coverage responds on all legal liability basis, and also without regard to legal liability on an excess basis over any other collectible insurance.

29. **Indemnification**

Contractor agrees to save harmless, indemnify, and defend County and Architect/Engineer and their, agents, officers and employees from any and all claims, losses, penalties, interest, demands, judgments, and costs of suit, including attorneys' fees and paralegals' fees, for any expense, damage or liability incurred by any of them, whether for personal injury, death, property damage, direct or consequential damages, or economic loss, including environmental impairment, arising directly or indirectly on account of or in connection with the Work done by Contractor under this Agreement or by any person, firm or corporation to whom any portion of the Work is subcontracted by Contractor or resulting from the use by Contractor, or by any one for whom Contractor is legally liable, of any materials, tools, machinery or other property of County. County and Contractor agree the first \$100.00 of the Contract Amount paid by County to Contractor shall be given as separate consideration for this indemnification, and any other indemnification of County by Contractor provided for within the Contract Documents, the sufficiency of such separate consideration being acknowledged by Contractor by Contractor's acceptance and execution of the Agreement. The Contractor's obligation shall not be limited by, or in any way to, any insurance coverage or by any provision in or exclusion or omission from any policy of insurance. The Contractor agrees to pay on behalf of Escambia County, as well as provide a legal defense for the County, both of which will be done only if and when requested by the County, for all claims made. Such payment on the behalf of the County shall be in addition to any and all other legal remedies available to the County and shall not be considered to be the County's exclusive remedy.

REQUEST FOR PROPOSAL UNIFORM CONTRACT FORMAT

- Proposers Checklist
- Request for Proposals - Title Page
- Table of Contents
- Solicitation, Offer and Award Form
- Proposal Form(s)
- Sworn Statement Pursuant to Section 287.133 (3)(a), Florida Statutes, on Entity Crimes
- Drug-Free Workplace Form
- Information Sheet for Transactions and Conveyances and Corporate Identification
- General Terms and Conditions (By Reference)
- Special Terms and Conditions (Include Indemnification, Safety and Insurance)
- Request for Proposals Response Format.

Part A	Summary
Part I	General Information
1-1	Purpose
1-2	Objective
1-3	Issuing Officer
1-4	Contract Consideration
1-5	Rejection
1-6	Inquiries
1-7	Addenda
1-8	Schedule
1-9	Proposal Content and Signature
1-10	Negotiations
1-11	Recommended Proposal Preparation Guidelines
1-12	Prime Contract Responsibilities
1-13	Disclosures
1-14	Delays
1-15	Work Plan Control
1-16	Method of Payment
Part II	Information Required from Contractors
2-1	Proposal Format and Content
2-2	Introduction
2-3	Understanding the Project
2-4	Experience and Qualifications
2-5	Cost Proposal
Part III	Criteria for Selection
Part IV	Specifications
Part V	Drawings
PART A	SUMMARY

Escambia County is seeking a company to provide state of the art ambulances. The specifications are for chassis and the module body. Manufacturers that utilize prototype equipment or manufacturing

processes will NOT be considered.

PART I GENERAL INFORMATION

1-1 PURPOSE

The Board of County Commissioners of Escambia County is seeking the Professional Services of a qualified contractor to provide ambulances that comply with the current and effective KKK, Federal Specifications for Ambulances.

1-2 OBJECTIVE

The Primary objective of The RFP is the selection of the most qualified and experienced Contractor to provide ambulances to the County.

1-3 ISSUING OFFICER

The project Director shall be George Touart, County Administrator. The liaison officer shall be Janis Kilgore, Director, Public Safety. The contracting agency shall be the Escambia County Board of Commissioners, c/o the Office of Purchasing, P.O. Box 1591, Pensacola, Florida, 32597-1591.

1-4 CONTRACT CONSIDERATION

It is expected that the contract shall be a fixed price contract after negotiation.

1-5 REJECTION

The right is reserved by the Board of County Commissioners to accept or reject any or all proposals or to waive any informality, existing in any proposal, or to accept the proposal which best serves the interest and intent of this project and is from the most responsive and responsible proposer.

1-6 INQUIRIES

Technical questions regarding this Request for Proposal shall be directed to Gary Straughn, EMS Operations Chief, Public Safety, Telephone (850) 471-6424, fax (850) 471-6455, and procurement questions may be directed to Kathy Spencer, Purchasing Agent III, Telephone (850) 595-4983, Fax (850) 595-4805.

1-7 ADDENDA

Any changes made in the Request for Proposal shall be brought to the attention of all of those who have provided the proper notices of interest in performing the services.

1-8 SCHEDULE

The following schedule shall be adhered to in so far as practical in all actions related to this procurement:

A. Mailing date of proposals..**Monday, February 27, 2006**

- B. Receipt of proposals.....**Friday, March 24, 2006**
- D. Review of proposals.....**Friday, March 31, 2006**
- E. Board of County Commissioners
approval.....**Thursday, April 20, 2006**

1-9 PROPOSAL CONTENT AND SIGNATURE

Seven (7) copies and two (2) originals of the proposal shall be required with all copies having been signed by a company official with the power to bind the company in its proposal, and shall be completely responsive to the RFP for consideration.

1-10 NEGOTIATIONS

The contents of the proposal of the successful firm shall become a basis for contractual negotiations.

1-11 RECOMMENDED PROPOSAL PREPARATION GUIDELINES

All contractors shall provide a straight forward and concise description of their ability to meet the RFP requirements. There shall be avoidance of fancy bindings and promotional material within. The proposal shall clearly show the technical approach to include work tasks, estimated time phasing and the proposed approach rational. The County discourages overly lengthy or costly proposals, all proposals shall be in spiral binding or AGBC@ type binder with all pages 8.5" x 11" format.

1-12 PRIME CONTRACT RESPONSIBILITIES

The selected contractor shall be required to assume responsibility for all services offered in his proposal. The selected contractor shall be the sole point of contact with regard to contractual matters including payments of any and all changes resulting from the contract.

1-13 DISCLOSURE

All information submitted in response to this RFP shall become a matter of public record, subject to Florida Statutes regarding public disclosure.

1-14 DELAYS

The Project Director reserves the right to delay scheduled due dates if it is to the advantage of the project.

1-15 WORK PLAN CONTROL

Control of the work plan to be developed under the RFP shall remain totally with the Escambia County Board of Commissioners.

1-16 METHOD OF PAYMENT

Payment schedule and basis of payment shall be negotiated. Escambia County's standard payment terms are net 30.

PART II INFORMATION REQUIRED FROM CONTRACTORS

ALL PROPOSALS SHALL INCLUDE THE FOLLOWING: TECHNICAL AND COST PROPOSAL

2-1 PROPOSAL FORMAT AND CONTENT

The County discourages overly lengthy and costly proposals, however, in order for the County to evaluate proposals fairly and completely, proposers should follow the format set out herein and provide all of the information requested.

2-2 INTRODUCTION

Proposals shall include the complete name and address of their firm and the name, mailing address, and telephone number of the person the County should contact regarding the proposal.

Proposals shall confirm that the firm will comply with all of the provisions in this RFP; and, if applicable, provide notice that the firm qualifies as a County proposer. Proposals shall be signed by a company officer empowered to bind the company. A proposer's failure to include these items in their proposals may cause their proposal to be determined to be non-responsive and the proposal may be rejected.

2-3 UNDERSTANDING OF THE PROJECT

Proposers shall provide a comprehensive narrative statement that illustrates their understanding of the requirements of the project and the project schedule.

2-4 EXPERIENCE AND QUALIFICATIONS

Provide a personnel roster that identifies each person who will be directly involved with this contract, what their participation will be and their experience in this position.

Provide reference names and phone numbers of companies/agencies your firm has supplied similar units to.

2-5 COST PROPOSAL

Proposer's cost proposals shall include an itemized list of all direct and indirect costs associated with the performance of this contract, including, but not limited to, total number of hours at various hourly rates, direct expenses, payroll, supplies, overhead assigned to each person working on the project, percentage of each person's time devoted to the project, and profit.

PART III CRITERIA FOR SELECTION

1. Level of Experience

➤ **PROPOSAL COMPLETION PROCESS:**

Various areas in the following specifications require a response from the bidder. In order to evaluate all proposals the responses must be consistent and most importantly legible. Therefore, the areas that are to be completed by the bidder must be legibly handwritten or typed. Bids that are not legible or incomplete shall be considered non-responsive and shall be automatically rejected.

➤ **SINGLE SOURCE MANUFACTURER:**

A contractor is desired that manufactures the major components for the ambulance (excluding the chassis). Major components are defined as the module shell, interior cabinets, electrical system (other than the primary module wiring harness), and chassis modifications.

The purpose is to simplify responsibility of warranty coverage for the finished product. Contractors who out-source either the module body construction or the interior cabinets or the electrical system as defined in the ELECTRICAL SYSTEM ACCESSORY requirements that proceed in this specification, will be considered as non-responsive, and will therefore be rejected.

ABOVE REQUIREMENTS MET:

Yes _____ No _____

➤ **COMPONENT MANUFACTURER (by company name):**

Modular Body: _____

Interior Cabinets: _____

Converter Added Electrical System: _____

➤ **QUOTATION:**

The overall quotation shall include a firm price for these specifications. The quotation shall also include a specific number of calendar days to manufacture an ambulance for Escambia County, starting from the date of contract/purchase order issuance to the delivery date of a completed ambulance. The model year of both chassis and conversion shall be designated.

➤ **WARRANTY:**

The proposal packet shall include all warranties that are required in the following detailed specification.

'LIFETIME WARRANTIES' will be unacceptable because of their unclear nature of duration.

All warranties must have specific time durations and shall define warranties on specific components. The minimum acceptable warranty period required is noted below. In the blank line, the bidder shall note the term of warranty that applies to the manufacturer being proposed.

The manufacturer shall also provide a detailed explanation of how their warranty work will be handled (unrelated to Chassis Warranty). In many cases it is not practical or efficient to send a unit back to the manufacturer for warranty work due to their geographic location. The manufacturer shall describe warranty service options that will be available to the County to maximize service efficiencies and minimize ambulance downtime.

Manufacturer Warranty Service Options:

MODULAR BODY STRUCTURAL WARRANTY: (Minimum Acceptable 15 Years)

Proposed Warranty Term: _____ Year(s), _____ Miles

ELECTRICAL WARRANTY: (Minimum Acceptable 6 Years)
Proposed Warranty Term: _____ Year(s), _____ Miles

CONVERSION WARRANTY: (Minimum Acceptable 2 Years)
Proposed Warranty Term: _____ Year(s), _____ Miles

Bidder Warranties Included With Proposal: Yes _____ No _____

➤ **ENGINEERING SUPPORT:**

Due to the complexity of design of the vehicle, proposals will only be accepted from manufacturers that utilize well-defined engineering techniques. Computer Aided Design (CAD) of both the interior of the patient area and the overall layout of the module shell will be mandatory. The reason is to assure that proposals for this vehicle will indeed meet and exceed the requirements of Escambia County.

To ensure this engineering support, each bidder must present with their proposal, full scale CAD drawings of both the interior and exterior of the unit on minimum dimension paper, 2' x 3' in size, in addition to a compact disc (in PDF format) for visualization on a computer using Adobe software.

As verification of this request, the bidder must respond to the question "Are CAD drawings and a computer compact disc" submitted per the proposal request and once answered the response must be initialed. Failure to provide the above-specified drawings will result in the rejection of the bidder's proposal.

Proposal Drawings and Compact Disc Submitted: Yes ___ No ___ Initialed By: _____

➤ **SAFETY CERTIFICATION:**

The verification of construction techniques used throughout the building process must be furnished by the manufacturer/bidder. The installation methods and construction techniques associated with seat belt retention, cabinet construction and installation, oxygen cylinder retention and module to chassis mounting systems must be verified through a controlled sled test that simulates an actual impact condition. This test must be performed from a minimum frontal impact condition of at least 20 g's. All testing must be performed by a testing agency, independent of the manufacturer.

As proof of this verification process being performed, the bidder must provide the following information:

Testing Facility Name: _____

Date Tested: _____

'G' Force Tested To: _____ G's

In addition to the above information, a sign-off letter from the testing facility must be provided with the bid documentation. A video of the testing shall also be furnished upon request by this purchaser.

Documentation Furnished with Proposal: _____ Yes _____ No

➤ **REFERENCES:**

The proven durability and reliability of this product is of utmost concern. Each bidder submitting a proposal must furnish at least six (6) references consisting of in-service units of similar chassis make and conversion processes being proposed. In addition, the electrical design on the unit being proposed must be field proven. Prototype equipment or processes will not be considered. Therefore, all references listed below must include an electrical system that has been installed for a minimum of three (3) years.

All references shall include owner, address, point of contact with phone number, and model owned. A minimum of six (6) references shall be furnished:

1. Reference: _____
Location: _____
Contact: _____
Phone #: 1-(____) _____ - _____
Model Owned: _____ Year: _____

2. Reference: _____
Location: _____
Contact: _____
Phone #: 1-(____) _____ - _____
Model Owned: _____ Year: _____

3. Reference: _____
Location: _____
Contact: _____
Phone #: 1-(____) _____ - _____
Model Owned: _____ Year: _____

4. Reference: _____
Location: _____
Contact: _____
Phone #: 1-(____) _____ - _____
Model Owned: _____ Year: _____

5. Reference: _____
Location: _____
Contact: _____
Phone #: 1-(____) _____ - _____
Model Owned: _____ Year: _____

6. Reference: _____
Location: _____
Contact: _____
Phone #: 1-(____) _____ - _____
Model Owned: _____ Year: _____

-DIRECTIONS FOR COMPLETING 'YES' and 'NO' LINES-

A question labeled 'WILL FURNISH SECTION AS WRITTEN' follows each numbered section throughout the specification document.

A YES ___ NO ___ response then follows each question.

If the bidder can meet the following condition, the 'YES' column must be checked with an X and so marked represents that the bidder will furnish the exact material or fabrication process specified in the section.

If the bidder cannot furnish the material or fabrication process specified in the section, the 'NO' column should be marked with an X and so marked represents that the bidder will furnish a substitute process or material. This column shall be marked, whether the substitution exceeds or takes exception to the specified requirement. If the 'NO' column is marked, engineering data must be provided showing that the substitution is as good or superior to the item requested.

At the end of the specification, a 'YES/NO EVALUATION SHEET' has been provided. If any 'NO' lines have been marked with an X, a complete explanation must be provided in this section. Grouping of deviations will not be acceptable. Each and every deviation must be documented and must include:

-SECTION NUMBER-
-SECTION HEADER NAME-
-EXPLANATION OF DEVIATION-

NOTE: As required above, all responses must be in a typed, or legible hand-written format and must be located in the space provided within the following specifications. BIDS FAILING TO MEET THIS REQUIREMENT WILL BE REJECTED

---- AMBULANCE SPECIFICATIONS----

CHASSIS:

CHASSIS, 2007 GMC 4500, MEDIUM DUTY:

The vehicle converter shall supply a 2007 152" wheelbase GMC 4500 chassis for the ambulance conversion. This chassis shall have an 84" cab-to-axle dimension.

ENGINE AND RELATED EQUIPMENT:

- Duramax 6600 diesel with 300 HP @ 3,000 RPM, and 520 ft. lbs. torque @ 1,800 RPM.
- Air cleaner restriction gauge installed in dash.
- 40 gallon fuel tank mounted aft of the rear axle.
- 1,000 watt engine block heater with receptacle.
- Engine exhaust brake
- Electronic exhaust restrictor

TRANSMISSION:

- Allison 1000 5-speed automatic transmission with park pawl.
- Transmission oil cooler and temperature gauge.

REAR AXLE:

- Ratio: 4.78:1
- Limited slip differential

OVERALL WEIGHT RATINGS:

- GVW: 17,500 lbs.
- Front Axle: 7,000 lbs.-I-Beam
- Rear Axle: 13,500 lbs.-Full floating
- Front Springs: 7,000 lbs.-Parabolic style
- Rear Suspension: 13,500 lbs.-Air suspension with air reservoir, dump control, and self contained 12V air compressor.
- Manual dump control switches are to be installed at both the rear doors and in the cab. Automatic dumping will occur when the rear doors are opened. The air dump system will inflate when either the rear doors are closed, or, if the air dump override has been activated, when the vehicle is placed into gear and starting to move.

-A dash-mounted air gauge shall be installed.

TIRES AND WHEELS:

Quantity: Seven (7) tires with spare shipped loose
Tire Style: Michelin with premium highway tread
Tire Size: 225/70R19.5F
Wheels: (4) 19.5" X 6.75" steel wheels painted white
(front and outside rear).

BRAKES:

Brake system: Power hydraulic disk with ABS.
Front: 4-piston, 4 channel ABS
Rear: 2-piston, 4 channel ABS
Parking Brake: Floor mounted manually activated lever

INTERIOR APPOINTMENT STANDARDS:

- Molded vinyl floor covering.
- Vinyl door trim panels with storage pockets, beverage holders, and reflectors.
- Headlamp warning buzzer.
- Simulated leather steering wheel.
- Vinyl covered sun visors.
- Seat belt warning indicator.
- Cloth headliner.
- Driver and passenger seats to be fixed height high back bucket seats with manual adjustment. -Seats to have cloth trim.
- Driver and passenger air bags with passenger side on-off switch.
- Air conditioning with integral heater and defroster.
- Power windows.
- Power door locks.
- Delco AM/FM/CD player installed in dash with two (2) speakers in cab.
- Tinted glass.
- Power steering.
- Tilt steering.
- Courtesy lights.
- Cruise control.
- Two (2) 12V power points in cab in addition to cigarette lighter outlet.
- Cigar lighter and ashtray.
- Low washer fluid warning light
- Factory gauges for oil pressure, oil temperature, fuel capacity, coolant temperature, air pressure, hour meter, transmission temperature, coolant level, and tachometer with converter-added digital display for ammeter and voltmeter.
- Audible warning tones for headlamps and key-in-ignition.
- Warning light and audible tone for "Check Gauges."

ADDITIONAL APPOINTMENT STANDARDS:

- Ambulance option package.
- Tilting fiberglass hood and fenders.
- Frame-mounted front tow hooks.
- Chrome plated front bumper.
- Deluxe front appearance package.
- Dual-note electric horn.
- Manual reset circuit breakers.
- Halogen headlamps.
- Intermittent windshield wipers with pulse washers.
- Required ICC lights.
- Parking/Hazard/Turn Signal Lamps.

- Exterior grab handles near cab doors.
- Deluxe insulation package.
- Heated/motorized/lighted integral arm mirrors. Mirrors are to be a minimum of 12" x 7" with a 6" x 7" convex section.
- Front license plate mounting provision.
- Exterior roof drip moldings.

BATTERIES:

The vehicle shall be equipped with three (3) 700 cca batteries located beneath the passenger side of the cab. (2) identical batteries shall also be installed in the lower curbside forward compartment. The total cca rating for this vehicle shall be 3,500 cca.

ALTERNATORS:

Remove one of the OEM alternators and install a Vans 210 amp alternator in its place. Vehicle to have (1) OEM alternator and (1) Vans

WARRANTY:

The chassis manufacturer's standard vehicle warranty policies shall apply. Escambia County will not accept any decrements in the chassis manufacturer's warranty due to unapproved modifications by the ambulance manufacturer.

CHASSIS INTERIOR COLOR SHALL BE GRAY

Note: It is understood that the chassis specifications may vary in subsequent years and it is expected that the contractor will provide chassis updates/modifications as manufacturer changes are implemented/published.

Will furnish section as written: Yes ___ No ___

CHASSIS MODIFICATIONS, HARDWARE, AND ACCESSORIES:

STAINLESS STEEL WHEEL COVERS

Stainless steel hub and lug nut covers

Will furnish section as written: Yes ___ No ___

REAR DOCK BUMPERS

Two rubber dock bumpers shall be bolted to the rear step end caps for protection when backing.

Will furnish section as written: Yes ___ No ___

REINFORCE REAR BUMPER END CAPS

Reinforce end caps of rear bumper for greater impact resistance.

Will furnish section as written: Yes ___ No ___

RUNNING BOARDS: W/GRIP STRUT

Install heavy-duty aluminum diamond plate running boards and splash shields. Install grip strut inserts for enhanced drain and foot grip.

Will furnish section as written: Yes ___ No ___

REAR STEP/STEP BUMPER ASSEMBLY

The center section of the rear step bumper shall be constructed of aluminum grip strut and be hinged to assist in patient handling.

Note: This step to be installed 3.00" from the rear diamond plate riser to the back of the step. Install a custom lift up center section with a 1.00" high notch in the lower edge of the rear vertical diamond plate edge to prevent cot runners from dragging on edge of step when it is in the up position.

Will furnish section as written: Yes ___ No ___

BUG SHIELD:

Install hood mounted bug shield. To be "smoke" tinted.
(if available for model year)

Will furnish section as written: Yes ___ No ___

AIR SUSPENSION SWITCH: dump override

A switch will be installed where specified, to override the automatic dump feature activated by the left rear patient compartment entry door.

Switch Location: Header above rear doors.

Will furnish section as written: Yes ___ No ___

BATTERIES, STANDARD GM OEM

The vehicle will have a total of (5), 700 cca batteries. (3) in standard location under the cab and (2) in lower portion of curbside forward compartment.

Will furnish section as written: Yes ___ No ___

BATTERY HEAT SHIELDS

Battery heat shields will be provided for any battery located under the hood, which is not protected by the OEM manufacturer.

Will furnish section as written: Yes ___ No ___

ENGINE HOUR METER

An engine hour meter will be installed in the driver's side of the cab radio console.

Will furnish section as written: Yes ___ No ___

BACKUP ALARM RESET

Backup alarm will automatically reset to on, if alarm was canceled during previous use.

Will furnish section as written: Yes ___ No ___

OEM AM/FM/CD PLAYER SHALL BE PROVIDED BY THE OEM MANUFACTURER

The standard OEM AM/FM/CD player shall be installed in the cab area of the vehicle.

Will furnish section as written: Yes ___ No ___

MODULAR BODY STRUCTURAL DESIGN REQUIREMENTS:

The construction of the module body shall be designed and fabricated to provide a minimum 15 Year Body Life, the greatest load carrying capabilities that are safely possible and the most up to date patient safety features that are economically available. In addition, the body shall be constructed so that it can be easily retrofitted to a new chassis if the occasion ever arises. The ability of this retrofit process shall be demonstrated per the RFP requirements. All module body frame and skin materials, unless otherwise specified, shall be fabricated from aluminum metal so that weight

reduction will be enhanced and material life increased. To support the 15 Year Body Life, the converter shall warranty the material and workmanship in the construction of the module body for 15 years or more. The coverage shall apply to structural deterioration. The following areas shall also be specifically warranted per the manufacturer's standard structural warranty policy:

- o The continued and correct alignment of compartment and access doors for 15 years
- o Seam or joint separation in the compartment or access door construction for 15 years
- o Transferability of the warranty to a new owner if the vehicle is ever sold

MODULAR BODY TO CHASSIS MOUNTING:

The mounting system must provide a stable and durable attachment of the module body to the chassis frame. To accomplish this requirement the following body attachment method shall be used:

Outriggers, constructed of .25" thick steel and reinforced with two .25" thick steel gussets, shall be bolted to the chassis frame rails at a minimum of four (4) locations per rail for a total of eight (8) outriggers. Each outrigger shall attach to the chassis frame rail with a minimum of three (3) .625" grade 8 bolts. An O.E.M. rubber-mounting device shall bolt through the top of the outrigger using a .75" grade 8 bolt.

Two .5" thick x 3" wide aluminum plates shall be welded into the module body understructure. These plates will sit on top of the rubber mounting devices. A hole is to be drilled through the plates at each mounting location. The .75" grade 8 bolt shall run through the plate and mounting device at each location to secure the body to the chassis. Under no circumstances will designs be accepted wherein the individual mounting devices bolt directly through the chassis frame rails. Likewise, designs that require slotted holes or "keyholes" to be cut into the body understructure will not be acceptable as they may allow the body to move on the frame rails.

CONVERSIONS:

CONVERSION MODEL: GMC PASS-THROUGH:

MINIMUM BODY DIMENSIONS:

(Exterior)

-Height: 92"

-Width: 96"

-Length: 145"

(Interior)

-Height: 72"

-Aisle 20"

-Width: 20"(from edge of cot in wall position to squad bench riser)

-Length: 141"

OVERALL DIMENSIONS (Including Chassis, Module and Step):

-Height: 115.75" (to top of vent)

-Width: 100"

-Length: 263.5"

Will furnish section as written:

Yes ___ No ___

STREET SIDE, FRONT:

Clear Door Opening: 16.7" wide x 75" high

Actual Dimension: 21.5" wide x 78" high x 20" deep

This area shall be accessed through a single outside hinged door.

The compartment shall house the vehicle's primary O2 cylinder.

The compartment shall be vented to the outside.

Louvers to be stamped facing down

Will furnish section as written:

Yes ___ No ___

SHELF, FOR VERTICAL EXTERIOR COMPARTMENT

Install a diamond plate adjustable shelf as noted below. Includes a compartment light.

Locate: Above O2 system, approximately 60" above floor

Will furnish section as written:

Yes ___ No ___

STREET SIDE, INTERMEDIATE:

Clear Door Opening: 26" wide x 41.5" high
Actual Dimension: 32" wide x 44.68" high x 20" deep
This area shall be accessed through a single, outside hinged door.

Louvers to be stamped facing down

Install all electrical equipment on ceiling of compartment and cover with an expanded metal guard.

Will furnish section as written:

Yes ___ No ___

SHELF FOR SINGLE DOOR HORIZONTAL EXTERIOR COMPARTMENT

Install a diamond plate adjustable shelf as noted below. Includes a compartment light.

Will furnish section as written:

Yes ___ No ___

STREET SIDE, REAR:

Clear Door Opening: 18.5" wide x 53.5" high
Actual Dimension: 23.42" wide x 56.68" high x 20" deep
This area shall be accessed through a single outside hinged door.

Louvers to be stamped facing down

Will furnish section as written:

Yes ___ No ___

SHELF FOR SINGLE DOOR HORIZONTAL EXTERIOR COMPARTMENT

Install a diamond plate adjustable shelf as noted below. Includes a compartment light.

Will furnish section as written:

Yes ___ No ___

CURB SIDE, REAR:

Clear Door Opening: 9.9" wide x 75" high
Actual Dimension: 10.8" wide x 78" high x 19" deep
This area shall be accessed through a single outside hinged door.

The unit's primary backboard storage shall be located in this area.

Add an aluminum angle at the top of backboard compartment to prevent 72" backboards from falling out of the compartment if vehicle would be parked on an incline. Cover this angle with the same gray stick on rubber matting as the walls of the compartment.

It will be necessary to load backboards top first, in behind this bracket.

Louvers to be stamped facing down

Will furnish section as written:

Yes ___ No ___

CURB SIDE, INTERMEDIATE:

Clear Door Opening: 24.6" wide x 16.6" high
Actual Dimension: 32" wide x 19.7" high
This area shall be accessed through a single outside hinged door.

Louvers to be stamped facing down

Will furnish section as written:

Yes ___ No ___

CURB SIDE, FRONT:

Clear Door Opening: 16.5" wide x 75" high
Actual Dimension: 21" wide x 78" high x 30" deep

This area shall be accessed through a single outside hinged door and from an opening located on the curbside forward wall. The area shall be primarily used for storage of customer furnished jump kits.

Note: Install curbside forward lower battery storage compartment for (2) chassis batteries installed on roll out tray below floor of front wall cabinet. Reinforce compartment frame where gas hold open attaches.

Louvers to be stamped facing down

Will furnish section as written:

Yes ___ No ___

BODY MODIFICATIONS/OPTIONS:

SOUNDPROOFING

The understructure of the module floor shall include the standard soundproofing package.

Will furnish section as written:

Yes ___ No ___

STREET SIDE WHEEL WELL COMPARTMENT W/HINGED DOOR & PULL OUT TRAY

A diamond plate compartment shall be constructed above the street side wheelhouse. This compartment shall be accessed through a hinge-down door and shall include a slide-out tray.

*Compartment dimensions to be 63.13"(58.56") W x 8.25" (6.13") H.
Compartment and tray are to be made of diamond plate aluminum.*

Will furnish section as written:

Yes ___ No ___

MODULE BODY HARDWARE:

WINDOWS, MODULE BODY ENTRY DOORS

The rear module entry doors shall have solid windows. The side entry door shall have a sliding window.

Side door window to be solid in lieu of sliding.

Will furnish section as written:

Yes ___ No ___

PRIVACY GLASS:

All patient windows shall have dark privacy glass. The windows shall meet FMVSS glazing standards. No films are to be used.

Will furnish section as written:

Yes ___ No ___

STAINLESS STEEL SPLASH SHIELDS

Install brushed stainless splash shields on the lower front face of the body just behind the cab access doors. These splash shields are to be the same height as the diamond plate front corner guards.

Will furnish section as written:

Yes ___ No ___

MODULE BODY FENDERS: stainless steel

Rear wheel housings shall have stainless steel flare skirts to protect the wheelhouse opening and side body finish.

Will furnish section as written: Yes ___ No ___

DIAMOND PLATE LOWER BODY RUB RAILS

Aluminum diamond plate lower body rub rails are to be along the bottom of the body on each side.

Will furnish section as written: Yes ___ No ___

REAR DOOR HOLD OPENS, GRABBER

Install Cast Products "Grabber" style rear door hold opens.

Will furnish section as written: Yes ___ No ___

ELECTRIC DOOR LOCKS: compartment

Power activated door locks shall be installed on all exterior compartment doors. Locks shall be activated by a switch at each patient area access door, a switch in the front radio console and controlled with the access door locks. Locks may be overridden by a door key.

Will furnish section as written: Yes ___ No ___

ELECTRIC DOOR LOCKS: access doors

Power activated door locks shall be installed on patient area access doors. Locks shall be activated by a switch at each patient area door, a switch in the front radio console and controlled with the access door locks. Locks may be overridden by a manual slide lever or by the door key.

Install an additional door lock switch in the inhalation panel. This additional switch will operate all locks.

Will furnish section as written: Yes ___ No ___

ELECTRIC DOOR SWITCH: programmable touch pad

The patient area power door locks will include an exterior programmable touch pad system located near the body side access door.

Locate: (1) on each side of module and one next to the rear doors per drawing.

Will furnish section as written: Yes ___ No ___

ELECTRIC DOOR LOCKS WIRED TO OEM SWITCHES

The module door locks and compartment locks (if ordered) are to be wired to the chassis door lock switches.

Will furnish section as written: Yes ___ No ___

RECESSED LICENSE PLATE BRACKET

A Cast Products #LP0002 recessed license plate bracket shall be installed per the attached drawing. The bracket will include lighting in the top to illuminate the license plate.

Will furnish section as written: Yes ___ No ___

REFLECTORS:

All patient compartment entry doors shall have red reflectors in the lower corner.

Will furnish section as written: Yes ___ No ___

MATEFLEX IN EXTERIOR COMPARTMENTS

Mateflex will be installed on the floor and shelves of all exterior compartments.

Color: Black

Will furnish section as written:

Yes ___ No ___

RUBBER COVERED WALLS IN BACKBOARD COMPARTMENT

The interior of the backboard compartment is to be covered with rubber matting to protect equipment stored in this area.

Color: Gray

Will furnish section as written:

Yes ___ No ___

PAINT STANDARDS

PAINT, FINISH AND STRIPE REQUIREMENTS:

An acrylic urethane paint process is required on the module body. This process shall extend to the chassis if the vehicle converter must perform paint or body work to the chassis. The acrylic urethane process is required so that the highest possible gloss will be provided. Acrylic urethane possesses superior color and luster retention characteristics when compared to other types of paint. In addition, an acrylic urethane process provides a higher resistance to chemical sprays, salt sprays, humidity, and temperature changes. Lastly, this process, given the expected life of the vehicle and its heavy-duty cycle, will best resist chipping. The final paint application shall be free of material application imperfections such as orange peel, streaking, or a dull finish. Once painted, the vehicle shall be inspected under a black light to bring any small imperfections, not seen with the naked eye, to attention. Any such imperfections shall be repaired prior to the conclusion of the paint inspection process. The final application shall provide a high gloss on all body surfaces including the roof and excluding the underside.

Will furnish section as written:

Yes ___ No ___

PREPARATION:

To produce an acceptable paint finish, the following paint process must be used:

All body doors and hardware must be removed prior to any wash, prime, or final paint application. All material impurities and oils must be removed from the bare aluminum body. The entire module body, excluding the underside, will have all visible welds ground down and all material imperfections filled. All holes (e.g. for hinge mounting, etc.) shall be plugged at this stage to prevent any cleaning agents from entering the module body framework. The body shall be prepared for paint by spraying with a phosphoric acid-based cleaner to remove dirt and oil and to etch the body for superior paint adhesion. The application of the cleaner shall be followed with a water rinse. Next, a chromium-free titanium composite coating shall be applied to the body to enhance paint adhesion and to prevent corrosion. The body shall be rinsed with de-ionized water to prevent salts from accumulating on the surface. The body will, then, be baked dry prior to the application of three (3) coats of Sikkens Colorbuild primer. The primed body shall be finish sanded and made ready for the final paint application. All module doors, though handled separately from the body, shall undergo the same process as described above.

PAINT MANUFACTURER'S INSPECTIONS:

The manufacturer shall maintain an outside paint audit system. As part of that audit, the paint manufacturer shall regularly receive and test sample paint panels that are painted along with module bodies. The paint manufacturer shall also provide regular onsite inspections of the vehicle manufacturers paint process to assure a consistent level of quality. Audit reports from these inspections shall be provided to Escambia County upon request.

Will furnish section as written:

Yes ___ No ___

PAINT AND STRIPING:

CHASSIS PAINT: standard white

Chassis color to be standard white.

Will furnish section as written:

Yes ___ No ___

MODULE PAINT: standard white

Paint module standard white Sikkens #FLNA4002.

Will furnish section as written:

Yes ___ No ___

STRIPE: custom

Special paint stripe
(location to be specified by customer)

Paint color: Red

Paint number: Sikkens FLNA3042

Paint an 8" beltline with 1.125" Sapphire Blue vinyl spaced .250" above and below with "QRS" going into top of stripe. (location to be specified by customer)

Add lower skirtline stripe with 1.125" sapphire blue vinyl starting at top of rear corner guard, a .250" gap, and then paint the stripe and extend it down to bottom of module.

Sapphire blue vinyl listed above is gerber #220-37

Will furnish section as written:

Yes ___ No ___

INTERIOR CABINET DOORS, HANDLES & HARDWARE:

FULL HEIGHT PULL HANDLES ON SLIDING PLEXIGLAS DOORS

All sliding cabinet doors to have full length pull handles.

Will furnish section as written:

Yes ___ No ___

LATCH, HINGED DOOR: Southco flush ring pull style

Install flush mounted stainless steel latches.

Will furnish section as written:

Yes ___ No ___

LATCH, HINGED DOOR: Southco flush stainless steel pull style

Install stainless flush mount Southco pull latches on the hinged interior cabinet doors.

Will furnish section as written:

Yes ___ No ___

PLEXIGLAS COLOR: light tint

All Plexiglas doors to be light tint.

Will furnish section as written:

Yes ___ No ___

AVONITE COUNTER TOP WITH COVED INTERIOR EDGES

An Avonite counter top shall be installed made from the material listed below. The inside vertical and horizontal shall have a smooth rounded radius instead of a 90 degree mated surface.

Color: Royal Sapphire G3-1660

Will furnish section as written:

Yes ___ No ___

INHALATION PANEL (STANDARD):

The inhalation panel is to be fabricated from a composite material and covered with Formica to match to color selected.

Will furnish section as written:

Yes ___ No ___

SPECIAL INSTRUCTION, CABINET DOORS, HANDLES & HARDWARE

All interior hinged cabinet doors are to be installed using stainless continuous hinge.

NOTE:

This vehicle is to be constructed without the use of wood or wood products of any kind. All cabinetry is to be aluminum. The subfloor and all trim pieces and closeouts are to be constructed of a composite type material. The bidder will be required to elaborate on materials proposed and to provide samples upon request.

Will furnish section as written:

Yes ___ No ___

INTERIOR COLORS, UPHOLSTERY AND SEATING:

INTERIOR COLOR SCHEME: Custom

Custom selection

Floor: Loncoin Fleckstone Sapphire #152

Riser: Nevamar Deep Blue Glossie S-3-22g with Sangaree Burgundy accent

Wall: Nevamar Studio Gray Glossie S-6-37g

Cabinet: Studio Gray paint

Upholstery: Dove Gray I-100

Cushions to be waterfall style.

Will furnish section as written:

Yes ___ No ___

INSIDE CABINET FINISH: paint

The interior of all aluminum cabinets shall have a durable paint finish. The painted surface shall be washable and non-absorbent. **Color: Studio Gray**

Will furnish section as written:

Yes ___ No ___

RISERS:

To prevent contamination, no wood or wood products shall be used for anything fabricated in this vehicle. The material used shall be a .5" thick synthetic polyurethane foam with layers of continuous strand fiberglass and woven roving fiberglass sanded on both sides. The material shall have a minimum composite density of 20 pounds per square foot. The material shall not absorb liquids and shall not attract bacteria, molds or fungi. The material is to be covered with Formica material in a color matching that required within this document.

Will furnish section as written:

Yes ___ No ___

HIGH BACK CHILD SAFETY SEAT

Delete the standard attendant seat cushion. Install a high back bucket seat with built in child seat restraints. The seat to be adjustable front to rear.

Will furnish section as written:

Yes ___ No ___

INTERIOR CABINETS, STREET SIDE:

LINEN CLOSET

A vertical storage cabinet shall be located behind the attendant seat. The upper storage area shall house the primary electrical distribution area. The lower section shall be used for miscellaneous storage. Each area shall be accessed through hinged doors. The electrical distribution area shall include a Southco key lock/latching device. The entire cabinet shall be fabricated from aluminum and shall then be painted, unless otherwise specified.

Install a vent in the lower door - per drawing.

The area below the electronics cabinet to have a drug insert cabinet.

Will furnish section as written:

Yes ___ No ___

STREETSIDE WALL WITHOUT CPR SEAT

Street side cabinet wall to be per drawing.

Special wall - see drawing

Install the inhalation panel straight in lieu of angled and set back 8" for clearance of radio heads etc. Install a fluorescent light over the panel. Install lift-up frames for the (2) 29" wide center cabinets.

Will furnish section as written: Yes ___ No ___

DRUG BOX: enclosed

A separate drug storage box shall be fabricated and installed within the cabinet as designated in the cabinet wall diagram.

Locate: Vertical cabinet behind attendant seat with aluminum door.

Box is to be 10"W ID x 13"H ID x 15" deep ID made of painted aluminum with an aluminum door. Install a national key lock in aluminum door. Door to be installed using stainless steel continuous hinge. The safe door will open from left to right and the hinges will be located on the right side of the fabricated storage box.

Will furnish section as written: Yes ___ No ___

LOCKING DOOR: single

Install a single lockable door.

Locate: Under electronics per drawing.

Will furnish section as written: Yes ___ No ___

LIFEPAK 12 SWIVEL BRACKET

A swivel bracket for a Lifepak 12 shall be installed as designated.

Bracket to be "National Custom Enterprises Incorporated" #H7000.

Install Avonite spacers under bracket to allow for swivel.

Will furnish section as written: Yes ___ No ___

INTERIOR CABINETS AND SQUAD BENCH, CURB SIDE:

SQUAD BENCH STORAGE:

Storage shall be provided under the bench cushions. The area shall be approximately 6" deep and shall run where possible under the bench. The storage pan shall be fabricated from aluminum and shall be accessed by raising the split cushions.

Will furnish section as written: Yes ___ No ___

SQUAD BENCH:

A 22" wide x 72" long bench cushion shall be provided on the curbside of the patient area. The cushion shall be split. No provisions for stretcher cups and wells are provided. Cushions to have 1.5" overhang.

Will furnish section as written: Yes ___ No ___

BENCH RESTRAINT: ManSaver bar

Install safety- man drop down arm at head of squad bench.

Will furnish section as written: Yes ___ No ___

BENCH HOLD OPENS: gas

Install gas spring hold opens on squad bench lid.

Will furnish section as written: Yes ___ No ___

BENCH HOLD-DOWN: paddle latches (Pair)

Install recessed paddle latch into the squad bench riser to retain the squad bench lids in the closed position. The latch shall be both passive and positive.

Will furnish section as written: Yes ___ No ___

BENCH CUSHION EDGE TRIM:

Install a stainless steel plate on bottom of cushion.

Will furnish section as written: Yes ___ No ___

SHARPS/WASTE STORAGE IN A PULL OUT DRAWER IN SQUAD BENCH

Install a drawer in the face of the squad bench in the specific location noted below. This drawer will house both sharps and waste containers.

Locate: Mid point of bench per drawing

Drawer to have gas hold open to hold drawer out when in use.

Install close out over drawer inside bench pan. The drawer face is to be formica covered aluminum. Drawer will be empty when vehicle leaves vendor.

Will furnish section as written: Yes ___ No ___

INTERIOR CABINETS, FRONT:

FRONT WALL CABINET:

The front wall cabinet shall be arranged per drawing. Additional configuration information may follow.
Cabinet wall finish: Paint

Will furnish section as written: Yes ___ No ___

ROBINSON ROLL UP DOOR, FULL HEIGHT

A full height Robinson roll-up door shall be provided. The door is to include a lift bar latch with key lock.

Will furnish section as written: Yes ___ No ___

MODULE INTERIOR ACCESSORIES AND TRIM:

IV HANGER, CAST PRODUCTS WITH RUBBER ARM (Qty 2)

Cast products recessed IV hangers with rubber arms for attaching solution bags shall be installed in the designated locations.

Locate: Per overhead drawing

Will furnish section as written: Yes ___ No ___

HANGING HARDWARE:

Ferno Washington hanging stretcher brackets shall be installed on the ceiling as noted below.

Locate: Curbside

Use Special "Cast Products" hanging hardware.

(2) Ceiling hangers #STH2005-23" long.

(2) Positive retention wall hooks #STH2019.

Lower the center backrest on bench wall to clear the post and wheels of a #11 cot.

Will furnish section as written: Yes ___ No ___

CEILING GRAB RAIL: (2) 2ft rails or (1) 6ft rail

Cabinet wall "A" will have (1) 6' rail over cot.
Cabinet wall "B" will have (2) 2' rails, 1-forward and 1-to rear of CPR seat.

Will furnish section as written: Yes ___ No ___

GRAB RAIL: additional 6ft

Additional (6)ft long ceiling mounted stainless steel grab rail.
Locate: Per overhead drawing

Will furnish section as written: Yes ___ No ___

PATIENT DOOR GRAB RAILS: angled

All patient access doors to have heavy-duty angled stainless steel grab rails with smooth radius corners and flange mounting.

Will furnish section as written: Yes ___ No ___

FLOOR TRIM

Trim floor with aluminum cove molding at non-rolled areas of floor.

Will furnish section as written: Yes ___ No ___

CABINET TRIM

Trim all vertical and horizontal edges.

Will furnish section as written: Yes ___ No ___

CEILING MATERIAL, DIBOND PLATINUM WHITE ALUMINUM COMPOSITE

The standard module ceiling material shall be Dibond platinum white aluminum composite.

Will furnish section as written: Yes ___ No ___

REAR RADIO SPEAKERS

Install two rear speakers in patient compartment.
Volume control to be integral to the rear switch panel and controlled by individual up/down momentary switches.
Locate: Over rear doors

Will furnish section as written: Yes ___ No ___

SPECIAL INSTRUCTION, INTERIOR ACCESSORIES & TRIM

Ship loose (2) 10 lb. ABC, Dry Chemical Fire extinguishers with brackets. Fire Extinguishers shall be UL listed and approved for safe usage in an emergency vehicle.

Will furnish section as written: Yes ___ No ___

COT MOUNT STYLE: must support a Ferno Proflexx 93-P with hard lower tray

Mounts to be in dual positions, one in a center location and another one immediately parallel to the cabinet wall.
*Cot model: Ferno Proflexx 93-P with hard lower tray
Center mount is 17.75" center to center forward of the rear mount of the Ferno Proflexx 93-P, to hold an isolette mount.*

Will furnish section as written: Yes ___ No ___

LIGHTBARS

LIGHTBAR FRONT, 4500 CUSTOM 88"

Configure:

Whelen 4500, 88" custom front lightbar. Designate all light components and lens colors for each of the (7) sections.

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Body will be 96" wide. . Lightbar to be 88" wide

Will furnish section as written:

Yes ___ No ___

LIGHT BAR MOUNT: front face of body

Mount selected light bar to front face of module body. Vertical surface mount bars, are mounted flush to face. Traditional light bars mount to Cast product brackets on the face of the module body.

Model: selected above

Will furnish section as written:

Yes ___ No ___

ELECTRICAL EMERGENCY VISUAL WARNING SYSTEMS:

WIG WAG HEADLIGHTS:

Install wig wag headlight flasher.

Will furnish section as written:

Yes ___ No ___

RED L.E.D. LIGHT, 900 SERIES (Qty 6)

Whelen 900 series red L.E.D. lights shall be installed in the designated locations.

Locate: (2) street side

Locate: (2) curbside

Locate: (2) rear face upper outboard corners

Will furnish section as written:

Yes ___ No ___

AMBER L.E.D. KKK REAR LIGHT, 900 SERIES (Qty 2)

(1) AMBER series 900 L.E.D. light to be mounted centered on rear face of modular body.

Locate: Rear window level

Will furnish section as written:

Yes ___ No ___

AMBER L.E.D. KKK REAR LIGHT, 700 SERIES

(1) AMBER series 700 L.E.D. light to be mounted centered on rear face of modular body.

Will furnish section as written:

Yes ___ No ___

INTERSECTION LIGHTS, WHELEN L.E.D. 400 SERIES RED WITH FLANGE

Intersection lights shall be Whelen 400 series L.E.D. style.

Will furnish section as written:

Yes ___ No ___

GRILLE LIGHTS, WHELEN L.E.D. 700 SERIES RED

Grille lights will be Whelen L.E.D. style.

Will furnish section as written:

Yes ___ No ___

AUDIBLE EMERGENCY WARNING SYSTEMS:

SIREN: WS295HFS1

Specified siren to be:
WHELEN WS295HFS1

Will furnish section as written: Yes ___ No ___

SIREN: Undercover

Specified siren to be: Code 3 #3000 Undercover

Install right next to the Whelen 295 siren, with both sirens installed above the radios.

This siren to be wired to the SA-40 Lo Pro speaker located below the front bumper as a back up siren.

Will furnish section as written: Yes ___ No ___

SIREN INSTALL: (Qty 2)

The sirens shall be supplied and mounted as defined.

Will furnish section as written: Yes ___ No ___

SPEAKERS, BUMPER MOUNTED SPEAKERS (PAIR)

Install CPI 4308 speakers.

Will furnish section as written: Yes ___ No ___

ADDITIONAL SPEAKER:

The following selected speaker shall be used.

Make: Whelen

Model: SA40 Lo Pro
Locate: Below front bumper

Wire to undercover siren

NOTE: *Installation in this location will require the manufacturer to design and install a bracket to hold the speaker in place.*

Will furnish section as written: Yes ___ No ___

SPEAKER INSTALL: bumper (Qty 3)

Speaker Selections (Bumper Installed)

Install the speakers noted above.

Will furnish section as written: Yes ___ No ___

AIR HORNS:

Install (2) Buell #1062 12" trumpets in the front bumper per drawing. Manufacturer to design and install brackets for installation at this location. Note: Solid steel brackets supporting rear of air horns must be rigid, stable and sturdy. Brackets designed to simply hold the horns up will not withstand the rigors of the vibrating engine and are susceptible to being broken off during repairs.

Install a compressor, tank, and valve, trumpet x (2)

Install chrome push button switch on console for activation.

Will furnish section as written: Yes ___ No ___

ELECTRICAL, NON-EMERGENCY LIGHTING:

KKK SIDE BODY MARKER LIGHTS, L.E.D. (PAIR)

Install red Whelen L.E.D. 700 series turn/marker lights on each rear side of the module body. Lights provide module body nighttime side lighting visibility and turning signal indication.

Will furnish section as written: Yes ___ No ___

ICC MARKER LIGHTS

LED ICC marker lights shall be installed.

Will furnish section as written: Yes ___ No ___

SIDE SCENE LIGHTS, 900 SERIES (Qty 4)

Install Whelen 900 series 13 degree angled side scene lights.

Locate: (2) PER SIDE PER DRAWING

Will furnish section as written: Yes ___ No ___

LOAD LIGHTS WHELEN 900 SERIES (Qty 2)

Rear load lights to be (2) Whelen 900 series 26 degree angled scene lights.

Locate: Over rear doors.

Will furnish section as written: Yes ___ No ___

TAIL LIGHTS, 600 SERIES L.E.D.

(1) set of Whelen 600 series L.E.D. lights shall be installed on the rear of the vehicle as designated. They shall include L.E.D. stop/tail and turn signals. The backup lights shall be halogen.

Locate: Stacked on rear per drawing

Will furnish section as written: Yes ___ No ___

ELECTRICAL POWER GROUP:

MULTIPLEX ELECTRICAL SYSTEM:

Install a Multiplex electrical system. Bidder will be required to provide additional information on the system provided. Please note that generic systems are not acceptable and that the bidder may be asked to provide documentation that the manufacturer being bid has designed the proposed electrical system specifically for use in emergency medical vehicles and that the manufacturer being bid owns all rights to the system proposed.

Will furnish section as written: Yes ___ No ___

BATTERY SWITCH: std. operation

The "Master" battery switch shall switch battery power "on" and "off" to the ambulance body and conversion added electrical circuits only.

All OEM chassis electric's, (headlights, ignition, keep alive) shall remain wired "hot" and have no ability to be switched "off", and provide circuit function as provided by the chassis manufacturer.

The 'Module Disconnect' switch shall be programmed to be come on when the battery switch is activated.

Will furnish section as written: Yes ___ No ___

INVERTER: 20-1000TUL interface

A Vanner #20-1000TUL inverter shall be installed in the vehicle's designated electrical equipment location. Included will be a Vanner Interface Module, Inverter Status Panel, and Control Switch. The switch will be installed in the inhalation panel for inverter activation.

*Locate: #2 electrical compartment.
Install switch in the inhalation panel.*

Will furnish section as written: Yes ___ No ___

CHARGER/POWER SUPPLY: 45 AMP

Install a 45-amp battery conditioner with ground fault protection shall be installed in the designated electrical equipment area. The Conditioner will be wired to the batteries through the standard shoreline inlet.

Will furnish section as written: Yes ___ No ___

110V INTERIOR OUTLET (Qty 4)

Two 110V interior outlets are provided as standard on all models. The standard locations are in the inhalation area and the wall over the squad bench. Additional outlets are to be specified as to their location.

*Locate: Inhalation area
Wall over bench
Front wall cabinet
Cabinet below rear of inhalation area*

Will furnish section as written: Yes ___ No ___

INTERIOR 12VDC OUTLETS: cigarette lighter type (Qty 3)

12-volt outlets to use cigarette lighter style connectors.

*Locate: Inhalation area
Front wall cabinet
Passenger side of console
Configure: Hot at all times*

Will furnish section as written: Yes ___ No ___

SHORELINE: 20 amp eject (Qty 2)

Install a 20-amp Kussmaul auto ejection shoreline receptacle. Include a dynamic disconnect.

*Locate: Street side module body
Locate: Streetside module body (both)
Wire (1) to block heater and 110 patient area heater
Wire (1) to all other 110 systems*

Will furnish section as written: Yes ___ No ___

WIRE ENGINE BLOCK HEATER:

Wire engine block heater to shoreline. Make provisions to disable engine block heater when desired.

Will furnish section as written: Yes ___ No ___

EXTRA 12VDC CIRCUIT BREAKER:

An extra circuit breaker shall be installed.

Will furnish section as written: Yes ___ No ___

SWITCH PANEL MOUNT:

Switch panel to be flush mounted in upper face of console.

Will furnish section as written: Yes ___ No ___

LIGHT PROGRAMMING: right side scene

The right side scene lights shall come "on" when the side patient door is opened.

Will furnish section as written: Yes ___ No ___

LIGHT PROGRAMMING: load light

The rear load lights shall be wired to transmission reverse, plus the standard mode of operation.

Will furnish section as written: Yes ___ No ___

LIGHT PROGRAMMING: modular disconnect timer

The module disconnect shall be wired to automatically shut-down when inadvertently left in the on position, with the engine turned OFF and the battery switch in the ON position.

Time out: 5 min.

Configure: Do not time out if shoreline is plugged in

Will furnish section as written: Yes ___ No ___

LIGHT PROGRAMMING: park brake

A warning shall display on the front console readout, advising to set the Parking Brake, should the modular disconnect switch be "ON" and the transmission placed in "PARK" or "NEUTRAL". It will also advise to Disengage the Parking Brake should the vehicle be placed into gear.

Configure: Wire alarm to activate with red flasher circuit

Will furnish section as written: Yes ___ No ___

REPORT LIGHT:

A report light shall be located at the action wall to light the counter area

To be a fluorescent light. 12" Thinlight #112 16W W/2 F8T5/CW fluorescent tubes.

Will furnish section as written: Yes ___ No ___

CLOCK: aircraft

An aircraft style back lighted clock with sweep second hand shall be installed. The clock shall include a hinge for easy access to changing the time or battery.

Locate: Over rear doors

Will furnish section as written: Yes ___ No ___

STEP WELL LIGHT:

Install one step well light for the right side patient door. Light to come on when door is opened.

Install on right hand side.

Will furnish section as written: Yes ___ No ___

FLUORESCENT LIGHTS: (Qty 3)

Install 24 inch 12 volt fluorescent ceiling light fixtures. Wire to charger/conditioner in addition to standard mode of operation.

Locate: Front, center and rear of patient ceiling

Will furnish section as written: Yes ___ No ___

PATIENT CEILING DOME LIGHTS: Weldon (Qty 6)

Rear patient compartment lights to be Weldon halogen lamps and to be operated by individual cot and bench switches. Lamps to be infinitely adjustable and come on with the doors open.

Will furnish section as written: Yes ___ No ___

GOOSE NECK PANEL LIGHT

Install a flexible goose neck panel light in the following area.

*Locate: Passenger side of console
Install a Federal Little Lite.*

Will furnish section as written: Yes ___ No ___

SPOT LIGHT: hand held

Install an Optronics 400,000 CP hand held spotlight with momentary switch in the location noted below.

Locate: In carpet covered aluminum pocket on the forward side of the cab console. Pocket is 3" high x 5.50" x 13" - see console drawing.

Will furnish section as written: Yes ___ No ___

SPECIAL INSTRUCTION, ELECTRICAL POWER, PROGRAMMING

Remove one of the OEM alternators and install a Vans 210 amp alternator in its place. Vehicle to have (1) OEM alternator and (1) Vans alternator.

Will furnish section as written: Yes ___ No ___

HEATING, AIR CONDITIONING AND INTERIOR ENVIRONMENT:

HEAT/AC SYSTEM GM TYPE 1 SERIES CHASSIS

Install a ProAir 12V heat/AC system below the attendant seat. Unit is to include a replaceable carbon filter at the air intake point.

Install auxillary condensor on converter-fabricated wall brackets on the _____ face of the body. Paint brackets white to match vehicle. Note location in drawing.

All hoses to have "quick-click" fittings and be installed in loom.

A/C hoses to run from lower left corner of the #2 compartment, up and over the vertical cabinet behind the attendant's seat to front condensor.

Install an access panel on front wall of vehicle for service to fittings.

Reduce the use of bulkhead fittings as much as possible.

Install an auxiliary receiver-dryer in this system.

Install a second compressor in this system.

Will furnish section as written: Yes ___ No ___

POWER VENT: roof mount

Install roof mounted power vent.

Interior ceiling vent cover to be painted gloss white ILO chrome.

Will furnish section as written: Yes ___ No ___

STATIC VENT: roof mount

Install roof mounted static vent.

Interior ceiling vent cover to be painted gloss white in lieu of chrome.

Will furnish section as written:

Yes ___ No ___

ELECTRIC HEATER:

A Dayton 110 volt electrical heater shall be installed in the patient area and shall be wired to the vehicle shoreline.

Install in rear face of bench pan. Install a closeout over the back of heater inside bench.

Will furnish section as written:

Yes ___ No ___

CAB CONSOLE AND COMMUNICATIONS:

ANTENNA COAX 1:

An RG 58U coax shall be installed so that the ambulance conversion need not be disassembled.

Exterior termination: Front center of mod roof

Interior termination: Linen cabinet

Install customer supplied cable, mount and 'VHF' antenna.

Will furnish section as written:

Yes ___ No ___

ANTENNA COAX 2:

Install additional antenna coax and accesses.

Exterior termination: Center of mod roof

Interior termination: Linen cabinet

Install customer supplied 'UHF' antenna and coax.

Will furnish section as written:

Yes ___ No ___

ANTENNA COAX 3:

Install additional antenna coax and accesses.

Exterior termination: Rear center of mod roof

Interior termination: Linen cabinet

Will furnish section as written:

Yes ___ No ___

RADIO CABLE PULL WIRE

A standard pull wire for radio installation shall be installed from behind the driver's seat to behind the inhalation panel.

Will furnish section as written:

Yes ___ No ___

FRONT CONSOLE:

A console shall be fabricated to coordinate with the interior cab color. Room shall be provided on the face of the console for installation of radio and siren controls.

To be open with no dividers or slots. See drawing

Seal the bottom of the cup holders.

Line the open area with carpet like the rest of console.

On passenger side of console attach a carpet covered panel extending back to the rear wall of the cab creating additional storage area behind the console extension.

See drawing.

Will furnish section as written: Yes ___ No ___

RADIO HEAD PRE-CUT: front (Qty 2)

Cut out control console for radio head(s).

Model #: Customer supplied

Will furnish section as written: Yes ___ No ___

RADIO HEAD PRE-CUT: rear (Qty 2)

Cut out rear action panel for radio head(s).

Model #: Customer supplied

Install radio handsets on back wall of inhalation area per drawing.

Route the handset wires through a 7/8" grommet beside each radio head where handset plugs in.

Will furnish section as written: Yes ___ No ___

RADIO CABLE INSTALL: customer supplied (Qty 5)

Customer supplied radio cables will be installed during the vehicle construction. Cables to be tagged and marked at each end to identify their installed location. All cables shipped will have the vehicle production number clearly marked on the shipping package, and delivered prior to or at time of modular pre-wire.

Locate: (2) from bottom section of left front interior cabinet-to cab console - (2) from bottom section of left front-to inhalation cabinet - (1) customer supplied back-up camera cable from over center of rear doors-to front console.

Notes: Install (2) in-line filter boxes between radio bases and power studs. Power will be hooked up to radios and filters at a later date by customer. Leave at least 2 feet service loop at each end.

Install protective loom on customer cables and route to prevent damage from chaffing on metal edges.

Will furnish section as written: Yes ___ No ___

RADIO POWER/GROUND: (Qty 2)

Install heavy gauge cable to positive and ground studs for radio power.

Locate: Linen cabinet

Configure: Battery switched, battery hot

Will furnish section as written: Yes ___ No ___

SPECIAL INSTRUCTION, CAB CONSOLE & COMMUNICATIONS

Install customer supplied "VHF" and "UHF" transmitters in the lower portion of the vertical cabinet and run cables to heads. Do not hook up final power to these units. Install an in-line noise filter box for each radio.

Install (2) customer supplied speakers on back wall of cab below the rear window.

Will furnish section as written: Yes ___ No ___

OXYGEN & SUCTION SYSTEM STANDARDS:

Providing a safe and responsive oxygen and vacuum system is essential to this purchaser in providing proper patient care. The oxygen system shall be responsive, in that the flow to the outlets must be activated without hesitation. The oxygen system must be safe, in that all oxygen lines must be protected against sudden, unexpected high pressures due to defective regulators. When bottle pressures drop below certain levels, reflecting that it's time to change the cylinder, operations personnel must be quickly advised. If an oxygen regulator falls out of calibration, causing pressures that are too high or low for proper and safe treatment, personnel should also be quickly advised. To reduce the levels of occurrence for improper oxygen delivery, the system shall be designed as follows:

OXYGEN DELIVERY SYSTEM:

The oxygen delivery system shall be designed around a single piece manifold assembly. The manifold assembly shall incorporate ports for installation of delivery lines to all specified outlets, installation of an electrically activated oxygen delivery solenoid and installation of a manual override valve for the electrical activation. The manifold shall be located behind the patient area switch panel for ease of access.

NOTE: Connectors used in any line between the O2 regulator located on the bottle and O2 manifold assembly located behind in the O2 inhalation area will not be acceptable as they represent areas for potential leakage. Systems utilizing fittings on the low-pressure O2 hose, other than at the bottle and at the manifold, shall not be acceptable.

Will furnish section as written: Yes ___ No ___

OXYGEN AND SUCTION:

OXYGEN BOTTLE MOUNT, VERTICAL TRACK FOR QRM-V

Vertical track for mounting of a QRM-V O2 bottle mount shall be welded on the back wall of the compartment in the right hand corner. The O2 bottle mount is adjustable for "M" or "H" size tanks.

Will furnish section as written: Yes ___ No ___

CYLINDER BRACKET: Zico

Zico QRM-V oxygen bracket shall be installed.

Locate: standard location
Tank Size: "M" OR 'H'

Will furnish section as written: Yes ___ No ___

OXYGEN ACCESS:

A clear Plexiglas door shall be provided in the patient area wall for access to the oxygen cylinder valve. The door shall be hinged so that it swings into the oxygen cylinder storage compartment. The opening shall be trimmed with anodized aluminum edging.

Locate for use with 'M' cylinder

Will furnish section as written: Yes ___ No ___

OXYGEN OUTLETS, STANDARD (Qty 2)

Two oxygen outlets shall be provided as standard and shall be located in the inhalation panel.

Will furnish section as written: Yes ___ No ___

OXYGEN OUTLET: additional

Install additional oxygen outlet(s).

Locate: Wall at head of bench

Will furnish section as written: Yes ___ No ___

ADAPTER TYPE: Ohio Diamond II

Oxygen outlets to be Ohio Diamond II.

Will furnish section as written: Yes ___ No ___

FLOWMETER: (Qty 2)

Supply Thorpe tube style flowmeter.

Will furnish section as written: Yes ___ No ___

OXYGEN WRENCH:

Install oxygen wrench in oxygen compartment. Mount secure so not left hanging. Mount with length of chain or cable so not removable.

Will furnish section as written: Yes ___ No ___

HUMIDIFIER:

Supply (1) disposable oxygen humidifier.

Will furnish section as written: Yes ___ No ___

D BOTTLE STORAGE: squad bench

Provision for 3 "D" bottles shall be provided at the step well end of the squad bench. The cabinet door shall be hinged and include a Tri Mark handle. Reduce the wheel house to the top of the wheel well radius and extend to the side entry door.

Will furnish section as written: Yes ___ No ___

VACUUM OUTLET: inhalation wall

A single vacuum panel shall be installed in the inhalation area. The outlet shall be of the same style as the oxygen system and hooked to the onboard vacuum pump.

Will furnish section as written: Yes ___ No ___

ASPIRATOR: RS-4X disposable

Install Rico RS-4X aspirator.

Will furnish section as written: Yes ___ No ___

VACUUM PUMP:

Install 12vdc electric suction pump.

Will furnish section as written: Yes ___ No ___

KKK SUCTION KIT:

A suction kit shall be included and shall incorporate a suction rinsing bottle, (1) pharyngeal tip, and (1) yoke connector.

Will furnish section as written: Yes ___ No ___

LETTERING:

LETTERING:

Lettering to be included.

Color: 4" gold Scotchlite with black shade and outline.

Font to be Helvetica

Will furnish section as written: Yes ___ No ___

LETTERING REQUIRED ON CURBSIDE OF BODY

Lettering shall be installed on the curbside of the body. This lettering shall meet the requirements listed below.

- "ESCAMBIA COUNTY" (ARCHED OVER Star of Life (SOL))*
- "EMS" (STRAIGHT BELOW SOL)*
- "EMS" (UPPER PART OF FORWARD COMPARTMENT)*
- "Unit # (provided by customer) (ON DOORS PER DRAWING)*

Will furnish section as written: Yes ___ No ___

LETTERING REQUIRED ON FRONT OF VEHICLE

Lettering shall be installed on the front of the vehicle. This lettering shall meet the requirements listed below.

- "AMBULANCE" (MIRROR IMAGE ON BUG SHIELD IF AVAILABLE)*
- If bug shield is not available, this will be located at the front of the hood, centered

Will furnish section as written: Yes ___ No ___

LETTERING REQUIRED ON REAR OF VEHICLE

Lettering shall be installed on the rear of the vehicle. This lettering shall meet the requirements listed below.

- DIAL 911" (ON REAR DOORS OVER REAR WINDOWS)*
- "BUCKLE UP" (ON REAR DOORS UNDER REAR WINDOWS)*
- "KEEP BACK" (BOTTOM OF REAR DOORS UNDER STRIPE)*
- "300 FEET" (SIZED TO FIT)*
- "EMS"*

Unit # (to be provided by customer) (IN UPPER LEFT REAR CORNER OF MODULE)

Will furnish section as written: Yes ___ No ___

LETTERING REQUIRED ON STREET SIDE OF BODY

Lettering shall be installed on the street side of the body. This lettering shall meet the requirements listed below.

- "ESCAMBIA COUNTY" (ARCHED OVER SOL)*
- "EMS" (STRAIGHT BELOW SOL)*
- "EMS" (UPPER PART OF FORWARD COMPARTMENT)*
- Unit # (to be provided by customer) (DOORS PER DRAWING)*

Will furnish section as written: Yes ___ No ___

STAR OF LIFE 12: (Qty 2 each)

Install 12" star of life.
Locate: PER DRAWING

Will furnish section as written: Yes ___ No ___

STAR OF LIFE 18: (Qty 2 each)

Install 18" star of life.

Locate: Per drawing

Will furnish section as written: Yes ___ No ___

STAR OF LIFE 36: (each)

Install 36" star of life.

Locate: Roof (centered top of ambulance box)

Will furnish section as written: Yes ___ No ___

REFURBISHMENTS:

Successful bidder is able to replace chassis and refurbish ambulance units per customer requirements.

Will furnish section as written: Yes ___ No ___

Successful bidder can refurbish their manufactured units and ambulances presently owned by Escambia County that were manufactured by Horton Emergency Vehicles, providing nationally recognized warranties for these type vehicles. Note: Minimally, the refurbishment will include replacement of the chassis, chassis modification per requirements in above specifications, new paint/stripping, replacement of flooring in modular box, A/C & Heating Unit replacement in Modular Box, and recovering (new upholstery) of the seats in the modular box. Bidder will outline warranties provided on refurbished units.

Will furnish section as written: Yes ___ No ___

Cost to Refurbish Ambulance in first year of contract, based on the following requirements:

Total Refurbishment Cost: _____

Display Itemized Cost for each Category (individual expenses will equal total shown above).

Replacement of Chassis (includes expenses associated with removal of old chassis, purchase, modification, and installation of a new chassis per contract specifications).

1. Chassis Replacement:

a. GMC 4500 Chassis

Cost: _____

Note: The above chassis replacements will specifically replace those brands/models and will replace ambulances that are currently constructed with a Ford F350 Chassis. Advise if there will be a price difference relative to utilization of a Chevy/GMC chassis in lieu of the Ford F350 chassis being replaced. Comment if unable to replace a Ford F350 chassis with a GMCChassis.

Will furnish section as written: Yes ___ No ___

2. Painting and Striping of Chassis/Module per contract specifications.

Cost: _____

Will furnish section as written: Yes ___ No ___

3. Upholstery to be replaced for all seat coverings in Modular Box per specifications noted above.

Cost: _____

Will furnish section as written: Yes ___ No ___

4. Replace Modular Box Flooring per specifications noted above.

Cost: _____

Will furnish section as written: Yes ___ No ___

5. Replace Air Conditioning/Heating system in Module.

Cost: _____

Will furnish section as written: Yes ___ No ___

Chassis Credit (credit for scrap associated with old chassis)

Amount: _____

Will furnish section as written: Yes ___ No ___

Manufacturer has a tiered refurbishment program schedule available that delineates standard refurbishment packages ranging from a very basic refurbishment to an extensive refurbishment. This refurbishment schedule with associated pricing information is available and can be provided to Escambia County.

Will furnish section as written: Yes ___ No ___

OPTIONS:

Please provide quotes for the purchase and installation of the following Option Items:

1. DRIVECAM Video Event Data Recorder

Cost: _____

Will furnish section as written: Yes ___ No ___

2. Rearview Backing Camera and B/W or Color Visor Type or 6” – 8” flat screen monitor.

Note: The camera or its lens will be subjected to various weather conditions and must be able to operate under varying temperature ranges and weather conditions.

Cost: _____

Will furnish section as written: Yes ___ No ___

EXHIBIT B

PERFORMANCE AND PAYMENT BOND

BOND NO. _____

PERFORMANCE BOND

KNOW ALL MEN BY THESE PRESENTS: That

(Insert name, address, and phone number of contractor)

_____, as Principal, and

(Insert full name, home office address and phone number of surety)

as Surety, are held and firmly bound unto the Board of County Commissioners for Escambia County, Florida, 223 Palafox Place, Pensacola, Florida 32597-1591, (850) 595-4900, as Obligee in the sum of

_____ Dollars (\$_____), for the payment whereof we bind ourselves, our heirs, executors, personal representatives, successors and assigns, jointly and severally, firmly by these present.

WHEREAS, Principal has entered into a contract dated as of the _____ day of _____, 20____, with Obligee for Contract

No. _____,

(Insert name of project, including legal description, street address of property and

_____ general description of improvement) _____

in accordance with drawings and specifications, which contract is by reference made a part hereof, and is hereinafter referred to as the Contract.

THE CONDITION OF THIS BOND is that if Principal:

1. Performs the Contract at the times and in the manner prescribed in the Contract; and

2. Pays Obligees any and all losses, damages, costs and attorneys' fees that Obligees sustains because of any default by Principal under the Contract; and
3. Performs the guarantee of all work and materials furnished under the Contract applicable to the work and materials, then this bond is void; otherwise it remains in full force; and
4. Principal understands and agrees that this bond shall remain in full force and effect throughout the two (2) year warranty period after substantial completion of the work.

The Surety, for value received, hereby stipulates and agrees that no changes, extensions of time, alterations or additions to the terms of the Contract or other work to be performed hereunder, or the specifications referred to therein shall in anywise affect its obligation under this bond, and it does hereby waive notice of any such changes, extensions of time, alterations or additions to the terms of the Contract or to work or to the specifications.

This instrument shall be construed in all respects as a common law bond.

In no event will the Surety be liable in the aggregate to Obligees for more than the penalty sum of this Performance Bond, regardless of the number of suits that may be filed by Obligees.

IN WITNESS WHEREOF, the above parties have executed this instrument this ____ day of _____, 20____, the name and corporate seal of each corporate party being hereto affixed and these premises duly signed by its undersigned representative, pursuant to authority of its governing body.

Signed, sealed and delivered

in the presence of: PRINCIPAL:

By: _____

Name: _____

Its: _____

Witnesses as to Principal

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____, as _____ of _____, a _____ corporation, on behalf of the corporation. He/she is personally known to me **OR** has produced _____ as identification and did (did not) take an oath.

My Commission Expires:

(Signature)
Name: _____
(Legibly Printed)

(AFFIX OFFICIAL SEAL)

Notary Public, State of _____
Serial No., If Any: _____

ATTEST:

SURETY: _____
(Printed Name)

Witness

(Business Address)

Witness

(Authorized Signature)

(Printed Name)
OR

As Attorney In Fact (Attach Power)

Witnesses

(Business Address)

(Printed Name)

(Telephone Number)

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____,
20____ by _____, as _____ of
_____ as Surety, on behalf of Surety. He/she is personally known to
me **OR** has produced _____ as identification and did (did not) take an oath.

My Commission Expires:

(Signature)
Name: _____
(Legibly Printed)

(AFFIX OFFICIAL SEAL)

Notary Public, State of _____
Serial No., If Any: _____

BOND NO. _____

PAYMENT BOND

BY THIS BOND, We, _____
(Insert name, address and phone number of contractor)
_____ (hereinafter called the "Principal")

and _____ (hereinafter called the "Surety"),
(Insert name)
located at _____, a surety insurer
(Insert address and phone number)
chartered and existing under the laws of the State of _____ and authorized to do business

in the State of Florida, are held and firmly bound unto the Board of County Commissioners for Escambia
County, Florida, 223 Palafox Place, Pensacola, Florida 32597-1591, (850) 595-4900, (hereinafter called
the "County") in the sum of _____ (\$ _____) for

payment of which we bind ourselves, our heirs, our personal representatives, our successors and our
assignees, jointly and severally.

WHEREAS, Principal and County have reached a mutual agreement relating to Contract
No. _____

(hereinafter referred to as the "Contract") as of _____ (the bid award date for projects
thereto)

for the purpose of _____
(Insert name of project, including legal description, street address of property and general
description of
improvement.)

said Contract being made a part of this Bond by this reference.

NOW, THEREFORE, THE CONDITION OF THIS BOND IS THAT IF THE PRINCIPAL:

1. Performs the contract dated _____, _____, between Principal and County for construction of _____, the contract being made a part of this bond by reference, at the times and in the manner prescribed in the contract; and
2. Promptly makes payments to all claimants, as defined in Section 255.05(1), Florida Statutes, supplying Principal with labor, materials, or supplies, used directly or indirectly by Principal in the prosecution of the work provided for in the contract; and
3. Pays County all loses, damages, expenses, costs, and attorney's fees, including appellate proceedings, that the County sustains because of a default by Principal under the contract; and
4. Performs the guarantee of all work and materials furnished under the contract for the time specified in the contract, then this bond is void; otherwise it remains in full force.

Any action instituted by a claimant under this bond for payment must be in accordance with the notice and time limitation provisions in Section 255.05(2), Florida Statutes.

BE IT FURTHER KNOWN:

1. Any changes in or under the Contract and compliance or noncompliance with any formalities connected with the said Contract or alterations which may be made in the terms of the said Contract, or in the work to be done under it, or the giving by the County of any extension of time for the performance of the said Contract, or any other forbearance on the part of the County or Principal to the other, shall not in any way release the Principal and the Surety, or either of them, their heirs, personal representatives, successors or assigns from liability hereunder, notice to the Surety of any such changes, alterations, extensions or forbearance being hereby waived.
2. Certain claimants seeking the protection of this Bond must timely comply with the strict requirements set forth in Section 255.05, Florida Statutes, and as otherwise provided by law.
3. As concerns payment for labor, materials and supplies, as affects certain claimants, no legal action shall be instituted against the Principal or Surety on this Bond after one (1) year from the performance of labor or the completion of delivery of the materials or supplies as is specifically mandated pursuant to Section 255.05, Florida Statutes.

THIS BOND DATED THE _____ DAY OF _____, 20____ (the date of issue by the Surety or by the Surety's agent and the date of such agents power-of-attorney).

Signed, sealed and delivered

in the presence of:

PRINCIPAL:

By: _____
Name: _____
Its: _____

Witnesses as to Principal

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, as _____, of _____, a _____ corporation, on behalf of the corporation. He/she is personally known to me **OR** has produced _____ as identification and did (did not) take an oath.

My Commission Expires:

(Signature)
Name: _____
(Legibly Printed)

(AFFIX OFFICIAL SEAL)

Notary Public, State of _____

Serial No., If Any: _____

ATTEST:

SURETY: _____

(Printed Name)

Witness

(Business Address)

Witness

(Authorized Signature)

(Printed Name)

OR

As Attorney In Fact (Attach Power)

Witnesses

(Business Address)

(Printed Name)

(Telephone Number)

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____,
20____, by _____, as _____ of
_____ as Surety, on behalf of Surety. He/she is personally known to
me **OR** has produced _____ as identification and did (did not) take an oath.

My Commission Expires: _____

(Signature)

Name: _____

(Legibly Printed)

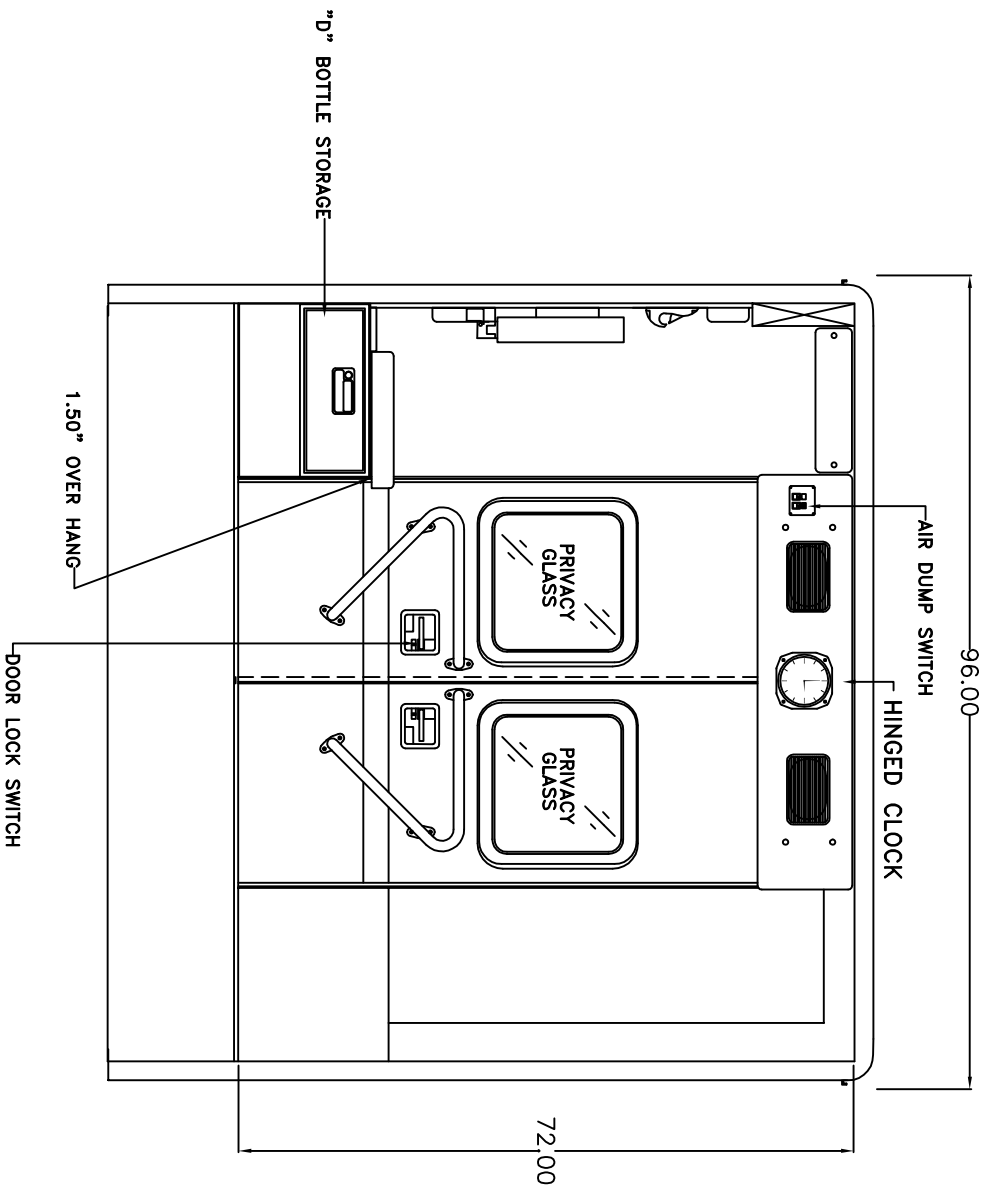
(AFFIX OFFICIAL SEAL)

Notary Public, State of _____

Serial No., If Any: _____

ESCAMBIA CO. E.M.S.

REAR WALL
GMC 4500 CHASSIS



REV	DESCRIPTION	DATE	APPROVED
C		6/27/05	

PROPOSAL DRAWING

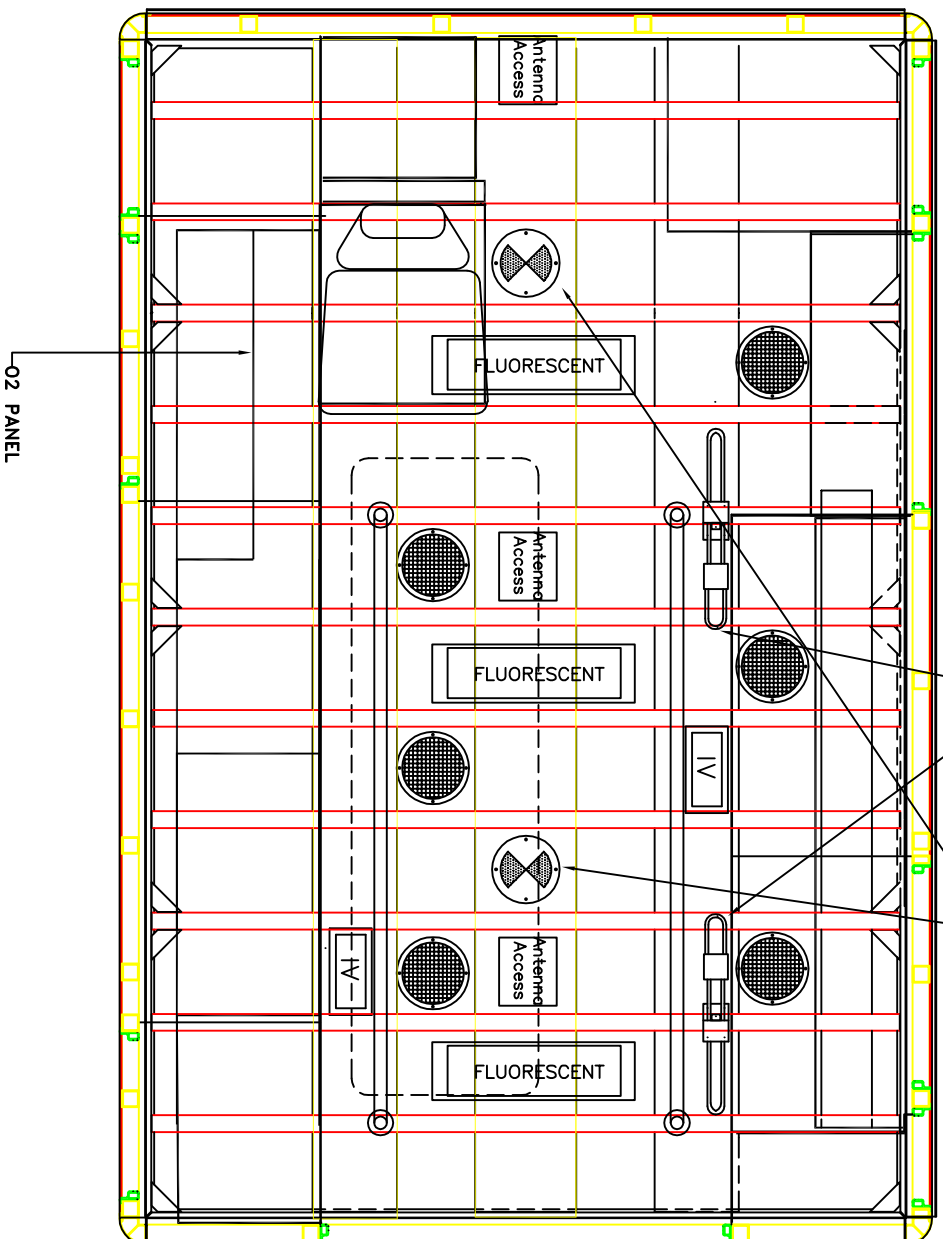
#0601

ESCAMBIA CO. E.M.S.

OVERHEAD WITH CPR SEAT
GMC 4500 CHASSIS

REV	DESCRIPTION	DATE	APPROVED
C		8/9/05	

CEILING STRETCHER HANGERS WITH
POSITIVE RETENSION LATCH.
ADD ADDITIONAL CEILING PLATES
PAINTED COVERS

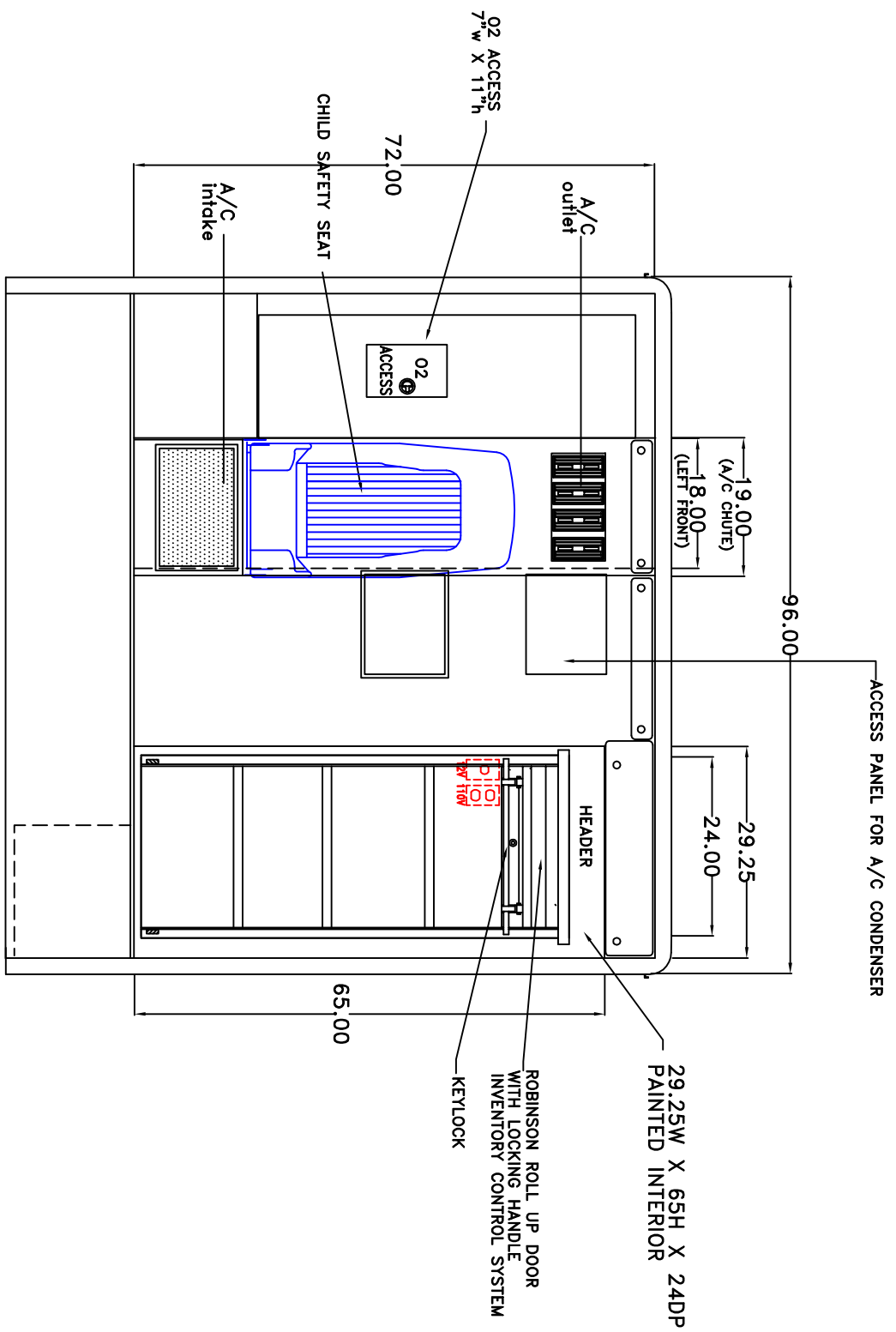


PROPOSAL DRAWING

#0601

ESCAMBIA CO. E.M.S.

FRONT WALL GMC 4500 CHASSIS



REV	DESCRIPTION	DATE	APPROVED
C		8/9/05	(MS)

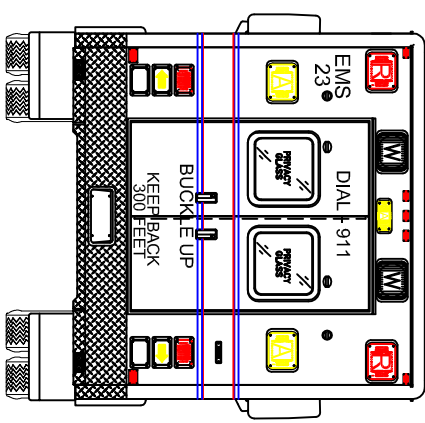
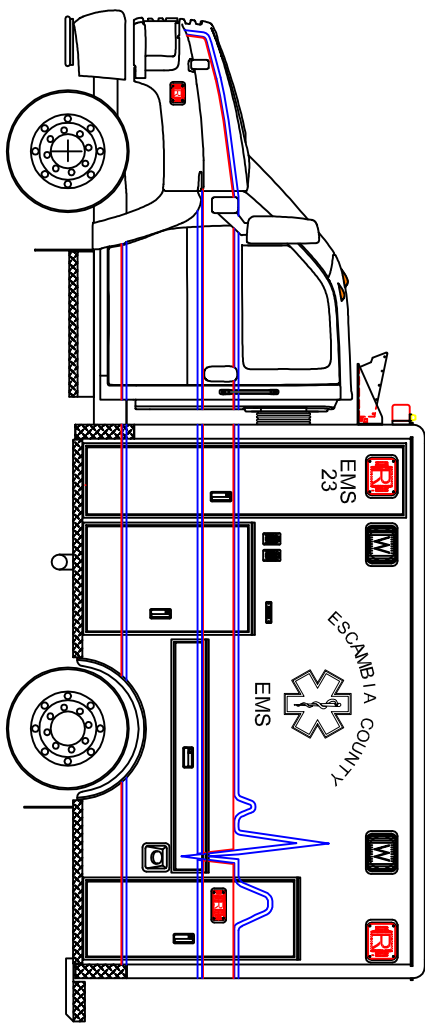
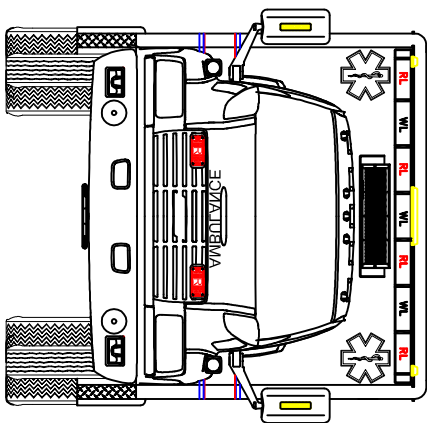
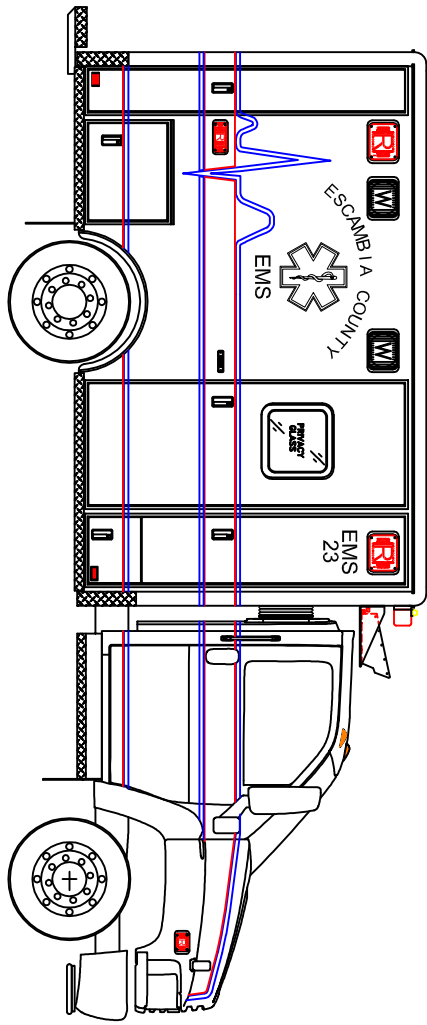
PROPOSAL DRAWING

#0601

ESCAMBIA CO. E.M.S.

EXTERIOR GRAPHICS
 GMC 4500 CHASSIS
 (SEE EXTERIOR DETAIL DRAWING)

REV	DESCRIPTION	DATE	APPROVED
A		8/9/05	

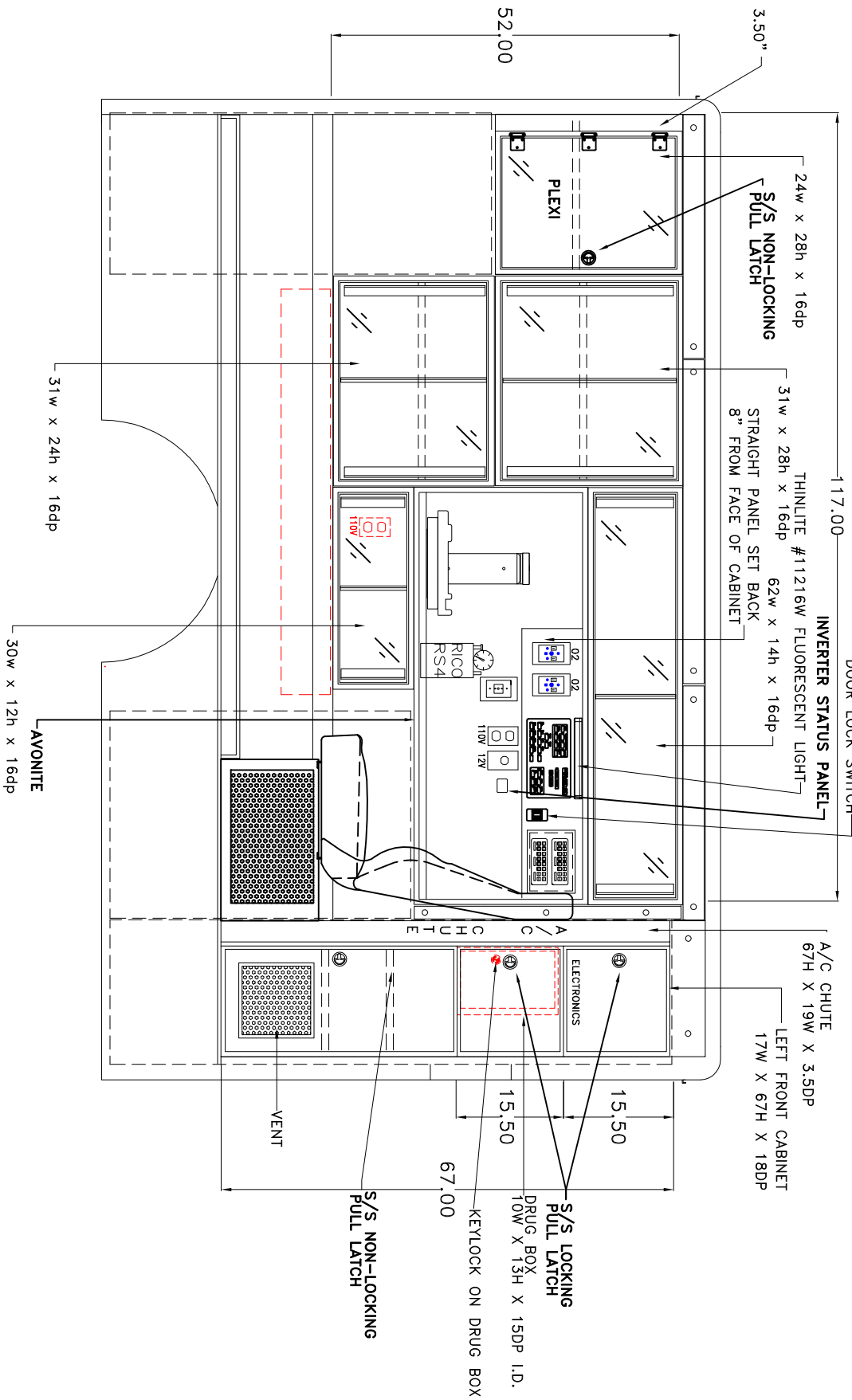


PROPOSAL DRAWING

#0601

ESCAMBIA CO. E.M.S.

CABINET WALL GMC 4500 CHASSIS



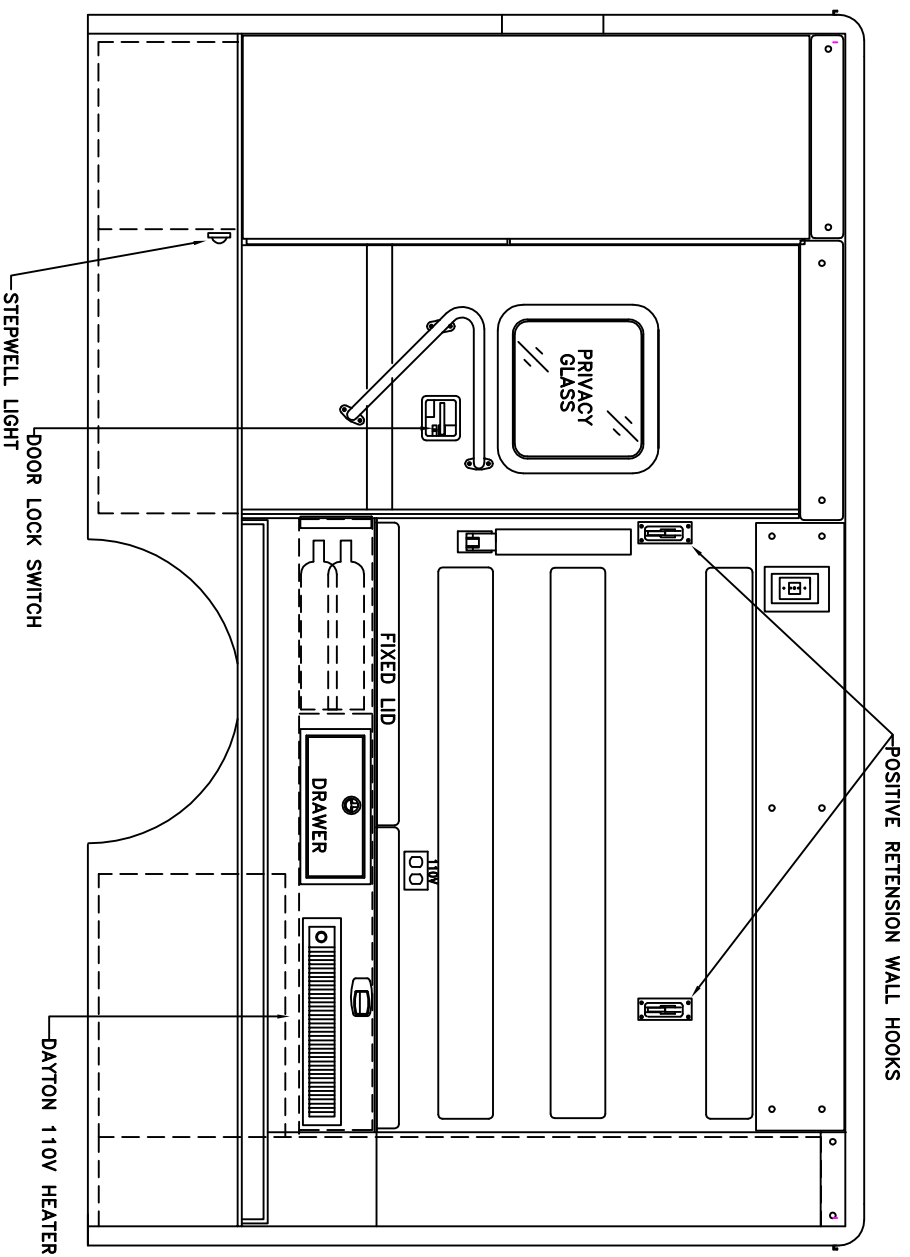
PROPOSAL DRAWING

#0601

REV	DESCRIPTION	DATE	APPROVED
C		6/9/05	

ESCAMBIA CO. E.M.S.

SIDE WALL
GMC 4500 CHASSIS



REV	DESCRIPTION	DATE	APPROVED
C		6/9/05	

PROPOSAL DRAWING

#0601