

INVITATION TO BID

The Ware County Board of Commissioners is now accepting sealed bids for the purchase of one (1) Stryker Power-Pro XT Stretcher for use by Ware County EMS. Ware County has no intention of purposely eliminating any company from bidding. However, there are certain specifications that must be met or exceeded.

The Ware County Board of Commissioners reserves the right to reject any or all bids, with or without cause. Sealed bids will be accepted until Thursday, September 12th, 2013 and bids will be opened on that date at 10:30 a.m., at the Ware County Commission Office located at 800 Church Street, Suite 223, Waycross, Georgia. No late bids will be accepted. Awarding of the bid will take place at the next regular meeting of the Ware County Board of Commissioners and will be based on the lowest and/or best bid.

If you have any questions concerning this bid, you may call Elizabeth Hope at (912) 287-4300.

Should your firm be interested in submitting a bid, please fill out the bid specification form, submit the sealed bid, marked on the outer envelope as "EMS Stretcher" and mail or deliver to:

**Ware County Commission
Elizabeth Hope
800 Church Street, Suite 223
Waycross, GA 31501**



SCOPE

These specifications cover one (1) Stryker Power-Pro XT Stretcher for use by Ware County EMS.

VENDOR INFORMATION

The equipment offered shall be equal with the detailed requirements listed below, unless otherwise noted. Bidders are to indicate exactly what they are offering in each of the blanks in the "Bidder's Response" column. If this is left blank or is incomplete, your bid will not be considered for award until all information is furnished. **Do not use "Comply", "Yes", "OK", "Same", an "X", a "V", a "Checkmark", or a "Ditto Mark", unless bidding EXACTLY as stated.**

SUPPORTING DATA

Bidder's must furnish catalog pages, specification sheets or similar data to support statements made in the Bidder's Response column. **Failure to furnish this data may be considered as cause for rejection of the bid.**

PRESERVATION OF RIGHTS

The Owner reserves the right to reject any and/or all bids and waive all minor technicalities, informalities, and irregularities. The Owner reserves the right to accept the bid, which in the judgment of the Owner, is in his best interest.

SPECIFICATIONS	BIDDER'S RESPONSE
<p>Stryker Power-Pro XT 6506</p> <ul style="list-style-type: none"> • 700lb Capacity With Restraints 	<p>Manufacturer:</p> <p>Model:</p>
<ul style="list-style-type: none"> • 3-Stage IV Pole PR 	
<ul style="list-style-type: none"> • Pocketed Back Rest Pouch 	
<ul style="list-style-type: none"> • Head End Storage Flat Bracket for Cardiac Monitor/Defibrillator 	
<ul style="list-style-type: none"> • Equipment Hook 	
<ul style="list-style-type: none"> • Dual Wheel Lock 	
<ul style="list-style-type: none"> • No Steer Lock Option 	
<ul style="list-style-type: none"> • Power-Pro Standard Components 	
<ul style="list-style-type: none"> • HE 02 Bottle Packaging 	
<ul style="list-style-type: none"> • Non-Power Load Compatible 	
<ul style="list-style-type: none"> • Trendelenburg 	

SPECIFICATIONS	BIDDER'S RESPONSE
<ul style="list-style-type: none"> • Foot End Oxygen Bottle Holder 	
<ul style="list-style-type: none"> • 120V A/C Power Cord, Charger & Battery 	
<ul style="list-style-type: none"> • J Hook 	
<ul style="list-style-type: none"> • Bolster Mattress 	
<ul style="list-style-type: none"> • PR Cot Retaining Post 	
<ul style="list-style-type: none"> • Owner's Manual-English 	
<ul style="list-style-type: none"> • 3 Year X-Frame Power Train Warranty 	
<ul style="list-style-type: none"> • 2 Year Bumper to Bumper Warranty 	
<ul style="list-style-type: none"> • Shipping and Handling Included 	
<ul style="list-style-type: none"> • Delivery Date 	
<ul style="list-style-type: none"> • Total Price 	

AUTHORIZATION

Sign below in ink in the space provided. Unsigned proposals will be considered incomplete and will be subject to rejection.

It is agreed by the undersigned proposer that the signing and delivery of this proposal represents the proposer's acceptance of the terms and conditions of the specifications and provisions, and if awarded the contract, will perform in accordance with this agreement.

Submitted by:

Company name: _____

Address: _____

City, state, zip: _____

Telephone: _____

Fax: _____

Signature: _____

Printed name: _____

Title: _____

Date: _____

ADDITIONAL INFORMATION

Is any owner or officer of the Proposer an employee of Ware County or related as close as third cousin to a Ware County Commissioner or other elected official?

YES _____ NO _____

Local Vendors submitting a proposal from Waycross and Ware County MUST have valid City and/or County business license.

Local Vendor: YES _____ NO _____

City License #: _____

County License #: _____

Date of Issue: _____

Any bid not containing this information will NOT be considered

STATEMENT OF NO BID

We, the undersigned, have declined to bid

- _____ Specifications too “tight”, i.e., geared toward one brand or manufacturer only
- _____ Insufficient time to respond to the Invitation to Bid.
- _____ We do not offer this product or services
- _____ Unable to meet specifications
- _____ Unable to meet Bond requirements
- _____ Specifications unclear (explain how)
- _____ Unable to meet Insurance requirements
- _____ Remove us from your “Bidders List” altogether
- _____ Other (specify below)

Remarks:

Company Name: _____
Signature: _____
Telephone: _____
Date: _____

Contractor Affidavit under O.C.G.A. § 13-10-91 (b) (1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm, or corporation which is engaged in the physical performance of services on behalf of the Ware County Board of Commissioners has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91 (b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Name of Project

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 201____ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY
OF _____, 201____.

NOTARY PUBLIC

My Commission Expires:
