



Sullivan County Purchasing

**3411 Highway 126 – Ste. 201
Blountville, TN 37617-0569**

ADDENDUM 1

To: All Prospective Proposers

From: Michelle Ramey, CPPO, CPPB
Assistant Purchasing Agent

Re: Critical Care Ambulance

Subject: ITB #040322(MR) Critical Care Ambulance, Type I, Class One (4x4)

Date: April 13, 2022

This addendum is issued to provide answers to questions received as of 4/13/22. It shall be considered as part of the contract subject to all the general conditions thereof, the same as if attached to and included in the original specifications. All items included in the addendum shall be covered in the Bid as submitted by the Contractor.

- Question:** Page 9, Item 13, Fire-Com System. Please specify exactly what parts you require as there are many options to a wireless three (3) user capability.

Answer: FIRECOM: FRConnect; FHW505 – Headset x 3; WB505R – Wireless Base Station; 5400D – Base Digital Intercom; 5400D Digital Remote Head – Remote Intercom; MR-52X-APX 8500 Cable; NFPA-Compliant Headset Hanger Hook - 3
- Question:** Page 63-66 Squad Bench Area. In the written specification, you ask to “provide” generically, and in the attached conceptual layout pages 84-86 you provide in drawing what the agency desires. There are spatial requirements which needs to be maintained, and the customization of the upper cabinets, and bench cabinets have no approximate or firm dimensions. This does make a difference in materials and labor, but more importantly the ability to meet the expectations of Sullivan County EMS. We ask that you provide the following dimensions for exact pricing.

Answer: Bench/ Seating Area is Approximate 48”
- Question:** Height, Width and Depth of the tower cabinet at head of squad bench

Answer: Floor to top of lip of work surface is 37”, inside opening height minimum 32’, outside width minimum of 20 1/2” with inside opening width minimum of 17”, inside depth minimum of 22”.

4. **Question:** Height, Width and Depth for the tower cabinet at the rear of the squad bench.

Answer: Opening Height minimum of 58", inside height minimum 65", opening width minimum of 26", Inside width minimum 27", depth minimum of 22". The cabinet shall contain medical air and oxygen outlets, an AC outlet and Q strains on the floor and back wall as per specs and drawing. The side walls shall have track for adjustable shelving.

5. **Question:** The inside diameter and dimensions for the M1, M2, M3 Drawers in the rear squad bench tower cabinet.

Answer: The face of each drawer shall be a minimum of 6 ½" high and 9" wide. I do not have interior dimensions of drawers, but they should be as large as possible given the space provided. The depth shall be as much as is allowed in this space.

6. **Question:** The balloon pump cabinet. More detail is necessary, such as the area of the curb side rear cabinet necessary (size of opening relative to dimensions of the balloon pump). Is this in lieu of the Curbside rear compartment and flush against curbside wall at rear of squad bench? If this is currently part of the design of your current fleet, can you provide a photo to assist in design detail.

Answer: Dimensions provide above. This is in lieu of an exterior curbside compartment above floor level and should be flush with curbside wall but allow for required plumbing using minimum space. There will be a small curbside rear compartment that is below floor level as per the drawing and specs.

****See attached pictures of truck and cabinetry that is of similar design.**

7. **Question:** Page 9, #8, Who is the agency's current Motorola Vendor for communications equipment? A specific representative contact information is requested.

Answer: Motorola Solutions INC
PO Box 404059
Atlanta, GA 30384-4059
Phone (865) 690-6110

8. **Question:** What options are required for the Stryker Power Pro XT Cot?

Answer: The cot should be ordered as high configuration power pro-2

9. **Question:** There is no location in drawings or specifications on location of Technimount Wall Mount. To appropriately provide cost, the addition of substructure in the wall for that location will need to be added to proposal. Please provide location of Technimount Wall Mount Pro System – Model No. 03-5202MA.

Answer: The wall mount should be mounted curbside beneath L2 as not to interfere with the suction unit and leaving as much useable space as possible for the solid surface work area below.

10. **Question:** Please provide a list of exact line items to be option priced and what is to be included as part of specification. The nomenclature of "shall provide" in the context of a bid specification is stating it is a part of the specification. Not an optioned item.

Answer: Items: 19, 20, 21, 22, 23, 24 and 25 should be priced as option items.

11. **Question:** Specifications and drawings include a Bariatric Lift installed between the frame rails at the rear of the unit. Is it correct that the intent of the specification is to include a bariatric lift and Stryker Power Load to be installed and included in the specification?

Answer: Yes, it shall have both the bariatric lift and a Power Load. That will give the option of loading the stretcher with the Power Load while loading additional equipment (balloon pump) or a bariatric patient with the lift.

12. **Question:** Generator and Inverter. Which is primary power source, Inverter or Generator?

Answer: The inverter shall be primary with the generator acting as supplemental or backup power.

13. **Question:** Ethernet Cable No.1: No information is provided for the origination and termination points

Answer: This cable may not be necessary. Just need to confirm that all cables are provided and installed for the cradle point, the FIRECOM system and two-way radio and all other electrical components.

Any questions regarding this Addendum, please contact Michelle Ramey at michelle.ramey@sullivancountytn.gov.

End of Addendum 1











