

SOLICITATION  
22-36001-001

AMBULANCE



Putnam County Board of Commissioners  
117 Putnam Drive, Suite A  
Eatonton, GA 31024

JULY 13, 2022

9:00 A.M.

# PUTNAM COUNTY BOARD OF COMMISSIONERS



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117 Putnam Drive, Suite A ♦ Eatonton, GA 31024  
Tel: 706-485-5826 ♦ Fax: 706-923-2345 ♦ [www.putnamcountyga.us](http://www.putnamcountyga.us)

## PUTNAM COUNTY SOLICITATION # 22-36001-001 Ambulance

The Putnam County Board of Commissioners requests sealed bids, good for 90 business days, for an **Ambulance**.

**Prospective bidders must obtain a bid package from the Putnam County Board of Commissioners via one of the following methods:**

- on the county website: [www.putnamcountyga.us](http://www.putnamcountyga.us)
- in person at 117 Putnam Drive, Suite A, Eatonton, GA 31024
- by email at [putnamboc@putnamcountyga.us](mailto:putnamboc@putnamcountyga.us)
- by fax at 706-923-2345
- by telephone at 706-485-5826

**Proposals must be submitted on the proposal form issued by Putnam County and contained in the bid package.**

Proposals must be received by **Wednesday, July 13, 2022 at 9:00 a.m.** The proposals will be read at that time.

LOCAL AND MINORITY OWNED/OPERATED AND/OR WOMEN OWNED/OPERATED BUSINESSES ARE ENCOURAGED TO SUBMIT PROPOSALS.

PUTNAM COUNTY RESERVES THE RIGHT TO REJECT ANY AND ALL BIDS, TO WAIVE ANY AND ALL TECHNICALITIES AND TO AWARD THE BID BASED ON THE LOWEST AND/OR BEST INTEREST OF PUTNAM COUNTY.

06/16/2022 & 06/23/2022

# PUTNAM COUNTY BOARD OF COMMISSIONERS



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Tel: 706-485-5826 ♦ Fax: 706-923-2345 ♦ [www.putnamcountyga.us](http://www.putnamcountyga.us)

## INSTRUCTIONS AND SPECIFICATIONS FOR BIDDERS: SOLICITATION # 22-36001-001 AMBULANCE PUTNAM COUNTY, GEORGIA

### SECTION 1 – GENERAL NOTICE

Sealed proposals for an AMBULANCE (SOLICITATION: 22-36001-001) will be received by the office of the Board of Commissioners of Putnam County, Georgia, up to the hour of 9:00 A.M. local time, on Wednesday, July 13, 2022, at which time and place they will be publicly opened and read aloud. Bidders are invited to be present.

### SECTION 2 – BID DOCUMENTS

Copies of the Proposal, Specifications, Plans (if required) and other document forms may be obtained from the office of the County Commissioners. Bidders are required to examine the same and satisfy themselves that all requirements are fully understood. **It is highly recommended that bidders also personally inspect the location of the project upon which they are bidding.**

### SECTION 3 – BIDDING PROCEDURE

Bids shall be presented in a sealed envelope with the bid number (22-36001-001) and the name of the company or firm submitting clearly marked on the outside of the envelope. **ONE (1) ORIGINAL (PAPER) AND ONE (1) COPY (PAPER) AND A PDF COPY OF THE BID ON A CD OR FLASH DRIVE MUST BE SUBMITTED.** Bids will not be accepted verbally, by fax or email. All appropriate blanks shall be completed. Any interlineations, alteration, or erasure on the specification document shall be initialed by the signer of the bid. Bidder shall not change the proposal form nor make additional stipulations on the specification document. Any amplified or qualifying information shall be on the bidder's letterhead and firmly attached to the bid document. **Items in RED are requirements for bid consideration.**

**Bid prices shall be submitted on the Proposal Form included in the bid document.**

Each bid must be legibly printed in ink or by printer, include the full name, business address, and telephone number of the bidder and be signed in ink by the bidder.

A bid by a firm or organization other than a corporation must include the name and address of each member.

A bid by a corporation must be signed in the name of such corporation by a duly authorized official thereof.

No bidder shall submit more than one proposal nor submit two or more proposals under different names.

**In order to be considered, the outside of the sealed envelope must be clearly marked with the offeror's name, address and phone number, the project number, name of the project for which the proposal is being submitted, and the bid opening date and time of Wednesday, July 13, 2022 at 9:00 a.m. All proposals shall be delivered by a delivery service or in person to Putnam County Board of Commissioners, 117 Putnam Drive, Suite A, Attn: County Manager, Eatonton, GA 31024, on or before the time and date prescribed above.**

**For your convenience, please use the label on the enclosed "Submittal Requirement" page.**

**Bids received after the time and date established for receiving bids will be rejected.**

#### SECTION 4 – QUALIFICATION OF BIDDERS

**All bidders shall provide a Work Resume and file it with their bid. The resume shall include projects which are similar to the type of work being bid for which the bidder had direct control over and was charged with full responsibility of the outcome.**

#### SECTION 5 – ADDENDA

Addenda are written instruments issued by the County prior to the date for receipt of bids which modify or interpret the specification document by addition, deletion, clarification, or correction.

Addenda will be mailed or delivered to all who are known by the County to have received a complete set of specification documents. Potential bidders may return the "Potential Bidder Form" to ensure they are notified of any addenda issued.

Copies of addenda will be posted on the county website and will also be available for inspection at the office of the County Manager.

No addendum will be issued later than forty-eight (48) hours prior to the date and time for receipt of bids, except an addendum withdrawing the invitation to bid or an addendum which includes postponement of the bid.

**Bidders shall ascertain prior to submitting their bid that they have received all addenda issued and they shall acknowledge receipt of addenda on the proposal form.**

#### SECTION 6 – BIDDER'S REPRESENTATION

Each bidder by signing and submitting a bid, represents that the bidder has read and understands the specification documents and the bid has been made in accordance therewith.

Each bidder for services further represents that the bidder is familiar with the local conditions under which the work is to be done and has correlated the observations with the requirements of the bid documents.

**NON-COLLUSION AFFIDAVIT:** By submitting a proposal, the bidder represents and warrants that such bid is genuine and not a sham or collusion or made in the interest or in behalf of any person not therein named, and that the bidder has not directly or indirectly induced or solicited any other bidder to put in a sham bid, or any other firm, person or corporation to refrain from bidding and that the bidder has not in any manner sought by collusion to secure to that bidder any advantage over any other bidder.

**INTEREST OF:** By submitting a proposal, the bidder represents and warrants that neither a commissioner, administrator, manager, employee, nor any other person employed by PUTNAM COUNTY or in any other way connected with the county has, in any manner, an interest, either directly or indirectly, in the bid or in the contract which may be made under it, or in any expected profits to arise therefrom.

**CERTIFICATE OF INDEPENDENT PRICE DETERMINATION:** By signing and submitting this bid, the bidder certifies that the prices in this bid have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor; unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder prior to bid opening directly or indirectly to any other bidder or to any competitor; no attempt has been made, or will be made, by the bidder to induce any person or firm to submit, or not to submit, a bid for the purpose of restricting competition.

Various professions within the building industry are required by state law to be licensed. These professions include electricians, plumbers, conditioned air contractors, low voltage contractors, utility contractors, and certain residential and general contractors. Putnam County will be complying with

state laws and board rules regarding licensure. **No bid or proposal for projects that require a licensed professional will be accepted from unlicensed persons.** In addition, the licensed contractor must be the prime contractor on the project. It is not permissible for an unlicensed individual/firm to subcontract with a licensed contractor. The validity of all licenses will be checked.

#### SECTION 7 – BIDDER’S SECURITY

BID BOND: No required.

PERFORMANCE BOND: Not required.

#### SECTION 8 – EQUAL OPPORTUNITY

Each bidder agrees that it shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, disability, national origin, age, or marital status. In the employment of persons, bidder shall take affirmative action to ensure that applicants are employed and that employees are treated during employment without regard to race, color, religion, sex, disability, national origin, age, or marital status.

#### SECTION 9 – CLARIFICATION OF SPECIFICATION DOCUMENTS

Bidders shall promptly notify the County Manager of any ambiguity, inconsistency, or error which they may discover upon examination of the specification documents.

Bidders desiring clarification or interpretation of the Specification documents shall make a written request which must reach the County Manager at least seven (7) calendar days prior to the date and time for receipt of bids.

Interpretations, corrections, and changes made to the Specification Documents will be made by written addenda. Oral interpretations or changes to the Specification Documents made in any other manner, will not be binding on the County; and bidders shall not rely upon such interpretations or changes.

#### SECTION 10 – SCHEDULE

The ambulance shall be delivered to Putnam County as soon as possible following the Notice of Award, but in no event later than that date which is 150 days from the date of the Notice of Award- unless delayed from the specified chassis manufacturer. The bidder shall state the estimated delivery time on the Official Bid Form in the space provided. Putnam County shall be notified at least fort-eight (48) hours in advance of the delivery date and time.

#### SECTION 11 – BID EVALUATION AND AWARD

The signed bid proposal shall be considered an offer on the part of the bidder. Such offer shall be deemed accepted upon issuance, by the County, of purchase orders, contract award notifications, or other contract documents appropriate to the work.

No bid shall be modified or withdrawn for a period of ninety (90) calendar days after the time and date established for receiving bids and each bidder so agrees in submitting the bid.

Award will be made to the vendor submitting the lowest responsive and responsible bid. The Putnam County Board of Commissioners reserves the right to reject any or all bids, to waive technicalities and to re-advertise or make an award as deemed in its best interest. The written bid documents supersede any verbal or written prior communication between the parties.

#### SECTION 12 – CONTRACT AND BOND

After the acceptance of the bid, the successful bidder must execute a written Contract between the bidder and the County; such contract will incorporate the County’s contract documents and be on forms provided by the County.

### SECTION 13 – INSURANCE

**All bidders shall take special note of the attached insurance sheet titled “Insurance Clause for all County Contracts.”**

**The successful bidder must provide proof of insurance in accordance with the contract documents.**

### SECTION 14 – INDEMNIFICATION

The bidder shall indemnify and hold harmless the County, its members, its officers, and employees from and against all claims, damages, losses, and expenses, including, but not limited to attorney’s fees arising out of or resulting from the performance of the contract, provided that any such claim, damage, loss, or expense is attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of tangible property other than goods, materials, and equipment furnished under this contract, including the loss of use resulting therefrom; is caused in whole or part by any negligent act or omission of the bidder, any subcontractor, or anyone directly or indirectly employed by any one of them or anyone for whose acts made by any of them may be liable, regardless of whether or not it is caused by a party indemnified hereunder.

In any and all claims against the County or its members, officers or employees by an employee of the bidder, any subcontractor, anyone directly or indirectly employed by any of them or by anyone for whose acts made by any of them may be liable, the indemnification obligation listed above shall not be limited in anyway by any limitation of the amount or type of damages, compensation, or benefits payable by or for the bidder or any subcontractor under worker’s or workmen’s compensation acts, disability benefit acts, or other employee benefit acts.

### SECTION 15 – LAWS

The Laws of the State of Georgia shall govern the rights, obligations, and remedies of the Parties under this proposal and any agreement reached as a result of this process.

### SECTION 16 – INDEPENDENT CONTRACTOR

It is the express intent of the parties that this Contract shall not create an employer-employee relationship, and the Contractor, or any employee or other person acting on behalf of Contractor in the performance of this Contract, shall be deemed to be independent contractor(s) during the entire term of this Contract or any renewals thereof. Contractor shall be responsible for all compensation and benefits payable to Contractor’s employee(s) under this Contract and Contractor’s employees shall not be entitled to any compensation from County or to any benefits made to their employees, including, but not limited to, overtime, vacation, retirement benefits, workers’ compensation, sick leave, or injury leave. Contractor shall also be responsible for maintaining workers’ compensation insurance, unemployment insurance, and for payment of all federal, state, local and any other payroll taxes with respect to the employee’s compensation.

### SECTION 17 – CERTIFICATION

By signing and submitting a proposal, the bidder certifies that they have carefully examined the plans for this project and the applicable federal, state, and local regulations and the special provisions included in and made a part of this proposal, and have also personally examined the site of the work. If awarded, the bidder further proposes to execute the contract agreement described in the specifications as soon as the work is awarded.

### SECTION 18 - DRUG-FREE WORK PLACE CERTIFICATION

By signing and submitting a proposal, the bidder certifies that the provisions of Code Sections 50-24-1 through 50-24-6 of the Official Code of Georgia Annotated, relating to the "Drug-free Work Place Act", have been complied with in full. The bidder further certifies that:

(1) A drug-free work place will be provided for the contractor's employees during the performance of the contract; and

(2) Each contractor who hires a subcontractor to work in a drug-free work place shall secure from that subcontractor a written certification that a drug free work place will be provided for the subcontractor's employees during the performance of this contract pursuant to paragraph (7) of subsection (b) of Code Section 50-24-3.

Also, they further certify that they will not engage in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

#### SECTION 19 – SECURITY AND IMMIGRATION COMPLIANCE

It is further certified that pursuant to O.C.G.A. §13-10-91 I and all contractors and sub-contractors performing work under this Agreement are in compliance with the Federal Work Authorization Program. Prime contractors and sub-contractors may participate in any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 ("IRCA"). **Contractor Affidavit, Subcontractor Affidavit (if applicable), and Sub-subcontractor Affidavit (if applicable) must be completed and turned in with your bid.**

It is further certified that pursuant to O.C.G.A. §50-36-1 I am a United States citizen, a legal permanent resident of the United States, or a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. **Affidavit must be completed and turned in with your bid, along with a copy of your driver's license.**


#### SECTION 20 – PAYMENTS

Contractor shall be paid by and in accordance with Putnam County payment regulations. Putnam County will strive to take advantage of all discounts offered for prompt payment, therefore, indicate all discounts on monthly invoices. Invoices shall not be submitted more frequently than once a month.





#### SECTION 21 – SPECIFICATIONS

Putnam County is seeking proposals for a NEW Ambulance as described on the following pages.


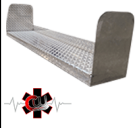
MODULAR BODY

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1		Modular Body - Type I 12'	The ambulance body 149"L x 96"W x72"H shall be constructed of custom designed aluminum extrusions and aluminum plate. The ambulance body shall be designed and engineered specifically as an emergency vehicle and shall be built to meet the heavy-duty requirements of emergency service.	










CHASSIS

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Chassis - Dodge B4500 - Diesel - 84CA		
Putnam County EMS would prefer a 4x2 chassis				
1	Each	Back Up Camera - OEM - Dodge	An OEM Dodge backup camera shall be ordered with the chassis and installed on the rear of the module. The camera shall function with the digital display on the dash.	
1	Each	Chassis Add On #1	Non Standard Additional Chassis Add On	
Ranch Hand full bumper replacement				
2	Each	Chassis Add On #2	Non Standard Additional Chassis Add On	
LED fog lights mounted in cutouts our Ranch Hand bumper				


CHASSIS ADD ON




QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Set	Wheel Inserts - Dodge B4500/B5500 (Standard)	Chrome wheel simulators shall be installed on the chassis wheels.	
1	Set	Running Boards - Driver & Passenger - Reg Cab - NFPA (Standard)	Diamond plate running boards shall be provided and installed on the cab of the module to the chassis manufacturers recommendation.	







QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
2	Set	Lights - Grille - ION Red w Clear Lens LED (Standard)	Whelen ION series Red LED warning light with clear lens and chrome flange installed on the front grill of the chassis.	
2	Set	Lights - Front Intersection - ION Red w Clear Lens LED (Standard)	Whelen ION series Red LED warning light with clear lens and chrome flange installed on the fenders of the chassis.	
1	Set	Speaker - Cast - Dodge B3500/B4500/ B5500 (Standard)	Two (2) 100-watt speakers shall be installed through the front OEM bumper.	
2	Set	Fire Extinguisher - 5Lb w/ Bracket (Standard)	5lb Fire Extinguisher shall be shipped loose.	
1	Each	Suspension - Liquid Springs - 2021 Dodge B4500/B5500	CLASS (Compressible Liquid Adaptive Suspension System) Liquid Spring Suspension System is a smart suspension system for Ambulances. Liquid-based struts and an on-board processor to provide better handling and control. System must provide a smoother, and softer ride. This reduced Ambulance vibration increases comfort and lower maintenance costs.	
1	Set	Mud Flaps	Set of heavy-duty, thick rubber material mud flaps shall be as wide as the dual rear wheels.	
1	Each	Spare Tire	A spare tire shall be provided with the chassis.	
1	Each	Alarm - Backup	An audible alarm shall be installed to activate when the vehicle is placed into reverse gear. There shall be installed on the front console and wired through the vehicle electrical system, a momentary cutoff switch to disable the alarm.	
1	Set	Engine Block Heater - Wire - Shoreline	The chassis engine block heater shall be wired to shoreline power.	




#### CHASSIS CONSOLE

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Console - Wood - Gray (Standard)	A wood scorpion coated console with (2) cup holders and map slot shall be provided between the driver and passenger seat.	




QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Siren - (Standard)	A Whelen 295SLSA1 single tone siren shall be installed in the cab console.	 WHELEN
1	Each	Spotlight - Hand Held - Ship Loose		 GOODSMANN
1	Set	Arm Rest - Adjustable - Scorpion Gray - Black Arm Pad	Adjustable arm - rest shall be mounted on the driver and passenger side of the console.	<b>Photo Coming Soon</b>
1	Each	Glove Box - Stainless Steel - Dual	A 2-slot stainless steel glove box shall be installed at the customer specified location TBD during pre-build.	
1	Each	Console Add On #1	Chassis Console Add On	<b>+CONSOLE Add-Ons # 1</b>
<b>110v behind passenger side of console</b>				

#### L1 COMPARTMENT



QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	L1 Compartment	Street Side Forward Compartment Dimensions: H72"x W20"x D22"	
1	Each	O2 Bracket Kit - Universal Cylinder (Standard)	There shall be a Universal Zico Cylinder Bracket QRM-V O2 bottle mount to allow the department to utilize both "M" cylinder and "H" cylinder bottles.	 ZICO
1	Each	O2 Wrench	An aluminum O2 wrench provided near the O2 bracket in the Oxygen compartment.	
1	Each	Oxygen Regulator - 50 PSI	50 PSI Pre-Set diaphragm regulator with nut and nipple connection for large cylinders and preset to 50 PSI.	 WESTERN METAL
1	Each	Vertical Divider - L1 Compartment	A full height aluminum divider shall be provided in the center of the L1 compartment left of the O2 bracket (Not Compatible w/ Electric O2 Lift)	<b>Photo Coming Soon</b>


QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Portable O2 Bracket Kit - D Cylinder - Zico QR-D-2		
Mounted under pass thru on floor				
1	Each	L1 Compartment Add On #1		
Cast single O2 holder mounted left of divider				
2	Each	L1 Compartment Add On #2		
Adjustable shelf upper portion left of divider on shelf track				

#### L2 COMPARTMENT


QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	L2 Compartment	Street Side Intermediate Compartment Dimensions: H40"x W30"x D20"	
1	Each	Panel - L2 - Inverter - Vanner 1050	A Vanner 1050 watt Inverter with 50 amp battery charger shall be provided and installed in the streetside exterior L2 compartment.	
1	Each	Inverter - Pre Wire	A pre-wire for installation of the inverter shall be provided in the L2 compartment.	

#### L3 COMPARTMENT

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	L3 Compartment (Standard)	Street Side Rear Compartment Dimensions: H40"x W30"x D20"	
Tall enough to house stair chair				
1	Each	Adjustable Shelf - L3 Compartment	A horizontal aluminum adjustable shelf/shelves shall be provided in the L3 compartment mounted on shelf track.	

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1/2 depth shelf				
1	Each	L3 Compartment Add On #1	Non Standard L3 Compartment Add On	
Stair chair pocket on door				


R3 COMPARTMENT

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	R3 Compartment	Curb Side Rear Compartment Dimensions: H72"x W15"x D20"	
1	Each	Backboard Divider - R3 Compartment	A vertical divider shall be mounted center of the back board compartment.	<b>Photo Coming Soon</b>


R2 COMPARTMENT

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	R2 Compartment	Curb Side Intermediate Compartment Dimensions: H20"x W24"x D20"	<b>Photo Coming Soon</b>










R1 COMPARTMENT

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	R1 Compartment	Curb Side Forward Compartment Dimensions: H72"x W18"x D20"	
<p>cutout lower portion of compartment for Lucas device storage. Upper portion of ALS to be inside only. Not entire portion of the upper portion just half.</p>				





EMERGENCY LIGHT PACKAGE

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Set	Lights - 900 Series - Red & White LED Warning w Clear Lens (7 Front Wall R/W/R/W/R/W/R)	Whelen 900 LED warning lights shall be installed on the module in the specified configuration. (7) front wall lights, (4) side body lights, (3) rear upper, and (2) lower window level lights.	



NON EMERGENCY LIGHT PACKAGE


QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
2	Set	Lights - Action Area/ Telemetry - LED	3" round led lights shall be located in the action area and telemetry area.	
1	Each	Lights - Compartment - Single - LED Strip Lights (Standard)	Each exterior compartment shall have one (1) strip LED light installed full height on each side of the door opening.	
8	Set	Lights - Dome - Whelen LED (Standard)	Whelen 8" LED Dome patient compartment lights with dual level lighting will be located in the ceiling. *Exact location & quantity can be changed at pre-construction meeting*	
6	Set	Lights - Scene - 900 Series LED	Whelen 900 Series LED Scene Lights shall be installed (2) two on rear, (2) per side of the ambulance modular body.	
2	Set	Lights - Stop/Turn/ Tail - 600 Series LED	Whelen 600 Series LED Brake, Back Up and Turn signals with individual bezels installed on the rear of the module.	
1	Set	Lights - ICC Marker - Red & Amber LED	7 LED Red and & 7 LED Yellow ICC lights installed on the upper module perimeter to meet DOT requirements.	
1	Each	Light - Stepwell - LED	LED Stepwell light installed at the entry steps of the module.	
1	Each	Lights - Tag Bracket - LED	LED lighting installed at the the tag bracket to meet DOT requirements.	
2	Set	Lights - Docking - 6" Oval White	6" LED lights installed at the rear bumper to provide additional back up lighting.	

MODULAR EXTERIOR




QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Shoreline - 20A/120V - Auto Eject - Yellow Cover (Standard)	A 20 amp automatic power line disconnect system shall be furnished for the vehicle shoreline.	
2	Set	Fenderette - Aluminum (Standard)	Polished aluminum fender flair shall be installed around the rear wheel well openings.	
1	Each	Window - Side - Sliding (Standard)	Tinted high black aluminum framed sliding window is to be centered on the side entry door.	
2	Each	Window - Rear - Fixed (Standard)	Tinted high black aluminum framed fixed window is to be centered on each rear entry door.	
1	System	Door Locks - Power - 6 Compartments & 2 Entry Doors w Hidden Stealth Switch	Install Power Door locks on all Compartments and Patient Entry Side and Rear Doors. Lock/unlock can be initiated by key fob, remote switch or by Cab & Driver's Side electric locks.	
1	Set	Compartments - Scorpion - Gray (Standard)	Scorpion coated finish on all exterior compartments.	
1	Set	Drip Rails - Aluminum		<b>Photo Coming Soon</b>

PAINT





QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Paint Type - Modular Body - 2 Color	The modular body shall be sanded, primed and painted 2 color's using Axalta's Top Gun training and paint procedures.	
1	Each	Paint Type - Chassis - 1 Color - 2 Tone	The chassis shall be sanded, primed and painted 2 color's using Axalta's Top Gun training and paint procedures.	






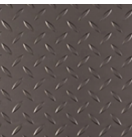
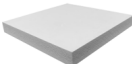



QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Paint Type - 2 Stripes	Two painted, single color beltline stripes, runs length of chassis and wraps around module. Painted with Axalta brand paint. **Color and location to be determined during precon**	

VINYL GRAPHICS



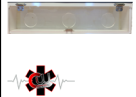





QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Set	Door Panels - Chevron (Standard)	Aluminum plate door panels on all exterior doors with 12" of reflective chevron.	
Red/White				
1	Set	Vinyl Graphics - Star of Life Reflective Package	KKK-Spec reflective SOL package provided with the graphics package. *Exact color and location to be determined at the pre-construction meeting*	
1	Set	Vinyl Graphics - Lettering & Decals	Lettering and department decals designed and printed on 3M 680CR reflective material and laminated with UV protective laminate.	

MODULAR INTERIOR



QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Panel - Power - Location - Interior (Standard)	A printed circuit board shall be installed in the interior electrical cabinet behind attendant seat.	
2	Set	Antenna - Coax	Two [2] 10-gauge power and two [2] ground wires, two [2] RG58U coax cables, and two [2] PL259 connectors.	
2	Each	Outlet - 12V	12 Volt DC 20 Amp cigar style outlets will be located in the action area and in the advanced life support cabinet. *Exact location & quantity can be changed at pre-construction meeting*	
6	Each	Outlet - 110V - Lighted	110 Volt AC GFI duplex lighted outlets will be located in the action area, the telemetry, as well as the advanced life support cabinet. *Exact location & quantity can be changed at pre-construction meeting*	
<p>(2) 110v in telemetry area  (1) in Action area  (1) lower portion of ALS on the right side lower section  (2) upper portion of ALS</p>				












QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Outlet - Oxygen - Single	A single O2 outlet provided at the head end of the squad wall. *Exact location & quantity can be changed at pre-construction meeting*	
1	Set	Outlet - Oxygen - Dual	Dual O2 outlets shall be provided in the action area. *Exact location & quantity can be changed at pre-construction meeting*	
1	Each	Outlet - Vacuum	Ohio style quick disconnect vacuum outlet provided in the action area wall.	
1	Each	Electrical System - RCTronics 12V (Standard)	12v RC Tronics switch panel electrical system shall be provided in the cab console and in the action area of the module.	 R.C. Tronics
2	Each	Pre Wire - 12V Radio	12v radio pre-wires at the front console and rear action area. *Exact location and quantity can be changed at the pre-construction meeting*	
1	Each	Flooring - Gun Metal Gray - Lonplate 3" (Standard)	Lonplate heavy duty floor covering installed above the PVC sub floor, rolled up on each side 3".	
1	Each	Flooring - Composite PVC Sub Flooring	PVC composite sub flooring shall be installed above the aluminum sub floor.	
1	Set	Cabinets - Plywood - 1 Tone - Glossy Gray	Cabinets shall be constructed of 3/4" plywood with a high-pressure plastic Glossy Gray laminate finish.	
1	Set	Windows - Life Defender - Restocking	Austin Hardware Gen II Life Defender cabinets, with clear plexi and restocking sliding windows.	 LIFE DEFENDER By Austin Hardware & Supply, Inc.
1	Each	Seat - CPR		<b>Photo Coming Soon</b>
1	Each	Countertops - White	Solid Surface material counter tops at the action and telemetry areas. White in color.	



QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Cabinet - Plywood - Over Rear Door	Cabinet located over the rear entry door, providing one storage section.	
1	Each	Cabinet - Plywood - Squad Bench Overhead	Cabinet located over the squad bench, divided into two separate storage sections.	
1	Each	Cabinet - Plywood - Glove Box	Cabinet located over the side entry door, providing storage for three glove boxes.	
1	Each	Cabinet Add On #1	Non Standard Additional Cabinet Add On	
<b>Additional shelf in rear streetside cabinet above L3 compartment</b>				
1	Each	Cabinet Add On #2	Non Standard Additional Cabinet Add On	
<b>Aluminum angle to be mounted on each shelf to prevent storage bins from sliding during transit</b>				
1	System	Insulation - Foam Spray	The modular ambulance body shall be insulated with a non-flammable Spray Foam insulation.	
6	Each	Emergency Release Latch	Curb and Rear entry doors shall come with upper and lower emergency release latches, in the event of failure to exit the module.	
1	Each	Cot - Power Pro 6506	A Stryker Power Pro XT cot with customer specified options shall be provided by the manufacturer.	

**MODULAR INTERIOR DETAILS**

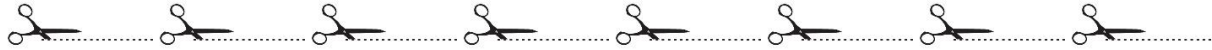
QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
1	Each	Suction - Rico - Action Area (Standard)	A RICO RS4X disposable aspirator will be installed in the action area and connected to the vacuum inlet by a quick connect coupler.	
1	Each	Vacuum Pump	Electric vacuum pump installed in the L-2 exterior compartment, plumbed to the vacuum outlet on the rear action area wall.	

QTY	UOM	PRODUCT NAME	DESCRIPTION	PRODUCT IMAGE
3	Each	Seat Belt - 6 Point Harness	All seated positions shall have a 6 point safety harness seat belt system.	
2	Each	Grab Rail - Ceiling - 80" Yellow (Standard)	1.25" diameter x 80" yellow grab bars shall be provided and securely fastened to the ceiling over the primary cot and over the squad bench. *Exact location & quantity can be changed at pre-construction meeting*	
3	Each	Grab Handle - 18" Yellow (Standard)	1.25" diameter x 18" yellow grab bars shall be provided at each entry door. *Exact location & quantity can be changed at pre-construction meeting*	
3	Each	Grab Handle - Interior V Style - Yellow (Standard)	V-Style yellow grab handles shall be provided on the side and rear entry doors.	
1	Each	Timer - 15 Minute Delay	A 15-minute mechanical timer shall be provided and installed at the head of squad bench adjacent to the side entry door. Timer to control the curb side dome lights.	
1	Each	Clock - Digital - Intellitec (Standard)	A digital EMS clock shall be provided at the Action Area wall.	
2	Set	IV Hanger - Ceiling Mount (Standard)	IV Hangers will be recessed in the ceiling over the head and foot end of the primary cot.	
1	System	Upholstery - Vinyl - Gunmetal Gray (Standard)	Seamless vacuum formed vinyl material, gun metal gray, provided on the attendant seat, squad bench cushions and CPR cushions.	
1	System	Cot Fastener - Performance Load - Non Charging - Stryker	A Performance Load cot fastener shall be center mounted on the floor of the module.	
1	System	Cot Fastener Mount - Center (Standard)	The cot fastener shall be center mounted in the patient module.	
1	Set	Seat - Attendant Child 3 Point Safety - Gunmetal Gray w Swivel Base - Wise (Standard)	Attendant seat with child safety seat, 3 point harness and swivel base shall be located at the head end of the primary cot.	

# IMPORTANT SUBMITTAL REQUIREMENT

Submittals must be properly labeled to ensure they are not inadvertently opened before the designated time. Affix the label below to the outside of the sealed submittal envelope or delivery package.

If this label is not used (i.e. in case of some delivery services), it is the bidder's responsibility to ensure that all required information (offeror's name, address and phone number, the project number, name of the project for which the proposal is being submitted, and the bid opening date and time) is on the OUTSIDE of the delivery package. Submissions that do not comply may be rejected.



FROM:  
Company Name \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

Bid/Proposal #: 22-36001-001  
Bid/Proposal Name: Ambulance  
Bid Opening Date/Time: Wednesday, July 13, 2022, 9:00 AM

TO:  
PUTNAM COUNTY BOARD OF COMMISSIONERS  
ATTN: COUNTY MANAGER  
117 PUTNAM DRIVE  
SUITE A  
EATONTON, GA 31024

# PUTNAM COUNTY BOARD OF COMMISSIONERS



117 Putnam Drive, Suite A ♦ Eatonton, GA 31024  
Tel: 706-485-5826 ♦ Fax: 706-923-2345 ♦ [www.putnamcountyga.us](http://www.putnamcountyga.us)

## PROPOSAL FORM SOLICITATION 22-36001-001 AMBULANCE

**To: The Putnam County Board of Commissioners**

Pursuant to the invitation to bid and the instructions to Bidders and according to the specifications attached, the below stated bidder proposes the following prices for an Ambulance:

\_\_\_\_\_ **does hereby propose the following:**  
**(Name of Bidder)**

\$ \_\_\_\_\_ **(Base Bid)**

**OPTIONS:**

- a) \_\_\_\_\_ \$ \_\_\_\_\_
- b) \_\_\_\_\_ \$ \_\_\_\_\_
- c) \_\_\_\_\_ \$ \_\_\_\_\_

**Grand Total: \$** \_\_\_\_\_

**Additional sheet may be attached for detailed breakdown.**

**MARK OUTSIDE OF BID ENVELOPE AS FOLLOWS:**

**The offeror's name, address, telephone number, the Solicitation # and name, the date Wednesday, July 13, 2022 at 9:00 a.m. and addressed as follows:**

**Ambulance**  
**Attn: Paul Van Haute, County Manager**

I hereby acknowledge receipt of the following checked amendments of the Proposal, Plans and/or Specifications, etc.:

Amendment No's: 1\_\_\_\_, 2\_\_\_\_, 3\_\_\_\_, 4\_\_\_\_, 5\_\_\_\_, I understand that failure to confirm the receipt of amendments is cause for rejection of bids.

Signatures on the following page

The undersigned signatory for the bidder represents and warrants that he has full and complete authority to submit this proposal to the County and to enter into contract with Putnam County.

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
BY (SIGNATURE)

\_\_\_\_\_  
STREET ADDRESS or P. O. BOX

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
CITY, STATE

\_\_\_\_\_  
ZIP CODE

\_\_\_\_\_  
(TITLE)

\_\_\_\_\_  
TELEPHONE NO.

\_\_\_\_\_  
FAX NO.

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
EMPLOYERS FEDERAL I.D. NO or  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
Email

The Bidder(s) whose signature(s) appears on this document, having personally appeared before me, and being duly sworn, deposes and says that the above statements are true and correct.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary signature: \_\_\_\_\_

My commission expires: \_\_\_\_\_ (seal)

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## INSURANCE CLAUSE FOR ALL COUNTY CONTRACTS

The Contractor shall indemnify and hold harmless, to the fullest extent allowed by law, Putnam County, Georgia, its members, its officers and employees from and against all losses, claims, damages and expenses, including court-ordered attorney's fees, arising out of or resulting from the performance of the contract that results in bodily injury, sickness, disease, death or injury to or destruction of tangible property, including the loss of use resulting therefrom and is caused in whole or in part by the Contractor, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable.

Contractor shall not commence work under this contract until he has obtained all insurance required under this Section and such insurance has been approved by PUTNAM COUNTY, nor shall the Contractor allow any subcontractor to commence work on his subcontract until all similar insurance required of the subcontractor has been so obtained and approved.

A. Workers' Compensation Insurance and Employer's Liability Insurance:

The Contractor shall take out and maintain during the life of this contract the applicable statutory Worker's Compensation Insurance, and in the case of any work sublet, the Contractor shall require the subcontractor similarly to provide statutory Worker's Compensation Insurance for the latter's employees. Coverage shall be provided by an insurance company authorized to write such insurance in all states where the Contractor will have employees located in the performance of this contract, and the Contractor shall require each of his subcontractors similarly to maintain Employer's Liability Insurance similarly to the Contractor.

Worker's Compensation – Required limits:

Coverage A – Coverage will include Statutory requirements

Coverage B – Employers Liability

\$100,000 Each Person

\$100,000 Each Person by Disease

\$500,000 Policy Limit – Disease

B. General Liability Insurance

1. The Contractor shall maintain during the life of this contract, Commercial General Liability Insurance, naming and protecting him and Putnam County against claims for damages resulting from (a) bodily injury, including wrongful death, and (b) property damage which may arise from operations under this contract whether such operations be by himself or by any subcontractor or anyone directly or indirectly employed by either of them. The insurance requirements are:

Commercial General Liability with limits of:  
\$1,000,000 Each Occurrence  
\$1,000,000 Personal Injury  
\$2,000,000 Products/Completed Operations  
\$2,000,000 General Aggregate

2. Coverage shall include Contractual Liability coverage insuring the contractual exposure as addressed in this contract.
  3. There shall be no exclusion or limitation for the Explosion (X), Collapse (C) and Underground (U) hazards.
  4. **Putnam County shall be named as Additional Insured.**
  5. The Commercial General Liability coverage shall be endorsed with the Designated Construction Project(s) General Aggregate Limit endorsement.
- C. Automobile Liability Insurance: The Contractor shall take out and maintain during the life of the contract such Automobile Liability Insurance as shall protect him against claims for damages resulting from (a) bodily injury, including wrongful death, and (b) property damage which may arise from the operations of any owned, hired, or non-owned automobiles used by or for him in any capacity in connection with the carrying out of this contract. The minimum acceptable limits of liability to be provided by such Automobile Liability Insurance shall be as follows:

Bodily Injury and Property Damage \$1,000,000 Combined Single Limit

- D. Builder's Risk Insurance: ***(For Building Construction Contracts Only)*** Unless otherwise specified where buildings are to be constructed under this contract, the Contractor shall provide coverage for all direct physical loss (also known as "Special Causes of Loss"). Such insurance shall be written on a Replacement Cost basis covering such building in the amount equal to one-hundred percent (100%) of the contract amount (minimum) as specified herein. Losses, if any, shall be made payable to PUTNAM COUNTY and Contractor as their interest may appear. A certificate of insurance evidencing such insurance coverage shall be filed with PUTNAM COUNTY by the time work on the building begins and such insurance shall be subjected to the approval of PUTNAM COUNTY.
- E. Minimum Scope of Insurance: All Liability Insurance policies shall be written on an "Occurrence" basis only. All insurance coverage is to be placed with insurers authorized to do business in the State of Georgia.
- F. Certificate of Insurance: All Certificates of Insurance shall be filed with PUTNAM COUNTY on the standard ACCORD CERTIFICATE OF INSURANCE form showing the specific limits of insurance, coverage modifications and endorsements required by the preceding Sections A, B, C, D and showing PUTNAM COUNTY as an additional insured where required. Such certificate shall specifically state that insurance policies are to be endorsed to require the insurer to provide PUTNAM COUNTY thirty days notice of cancellation, non-renewal or any material reduction of insurance coverage.

***The original certificate shall be provided to the Putnam County Board of Commissioners as designated and mailed to: 117 Putnam Drive, Suite A, Eatonton, GA 31024.***

# PUTNAM COUNTY BOARD OF COMMISSIONERS



117 Putnam Drive, Suite A ♦ Eatonton, GA 31024  
706-485-5826 ♦ 706-923-2345 fax  
[www.putnamcountyga.us](http://www.putnamcountyga.us)

## SAVE Affidavit

**(U.S. Citizens are only required to provide this affidavit one time)**

By executing this affidavit under oath, as bidder to Putnam County Georgia as referenced in O.C.G.A. § 50-36-1, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

**Please check one box only**

- 1)  I am a United States citizen
- 2)  I am a legal permanent resident of the United States
- 3)  I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

\_\_\_\_\_

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

\_\_\_\_\_.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in \_\_\_\_\_ (city), \_\_\_\_\_ (state).

Signature of Applicant: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE  
\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

Notary Public Signature: \_\_\_\_\_

Affix Notary stamp/seal here

My Commission Expires: \_\_\_\_\_



# PUTNAM COUNTY BOARD OF COMMISSIONERS



117 Putnam Drive, Suite A ♦ Eatonton, GA 31024  
706-485-5826 ♦ 706-923-2345 fax ♦ www.putnamcountyga.us

## 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 Putnam 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 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

Putnam County Board of Commissioners

Name of Public Employer

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

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ 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 \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

My Commission Expires:

# PUTNAM COUNTY BOARD OF COMMISSIONERS



117 Putnam Drive, Suite A ♦ Eatonton, GA 31024  
706-485-5826 ♦ 706-923-2345 fax ♦ www.putnamcountyga.us

## Subcontractor Affidavit Under O.C.G.A. § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor 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 under a contract with \_\_\_\_\_ (name of contractor) on behalf of the Putnam 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 subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice of receipt of an affidavit from any sub-subcontractor that has contracted with a sub-subcontractor to forward, within five business days of receipt, a copy of such notice to the contractor. Subcontractor 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 Subcontractor

\_\_\_\_\_  
Name of Project

Putnam County Board of Commissioners

Name of Public Employer

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

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ 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 \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

My Commission Expires:

# PUTNAM COUNTY BOARD OF COMMISSIONERS



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## Sub-subcontractor Affidavit Under O.C.G.A. § 13-10-91(b)(4)

By executing this affidavit, the undersigned sub-subcontractor 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 under a contract with \_\_\_\_\_ (name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract) and \_\_\_\_\_ (name of contractor) on behalf of the Putnam 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 sub-subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned sub-subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the sub-subcontractor with the information required by O.C.G.A. § 13-10-91(b). The undersigned sub-subcontractor shall submit, at the time of such contract, this affidavit to \_\_\_\_\_ (name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract). Additionally, the undersigned sub-subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to \_\_\_\_\_ (name of subcontractor or sub-subcontractor with whom such sub-subcontractor has privity of contract). Sub-subcontractor 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 Sub-subcontractor

\_\_\_\_\_  
Name of Project

\_\_\_\_\_  
Putnam County Board of Commissioners

\_\_\_\_\_  
Name of Public Employer

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

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ 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 \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
My Commission Expires: