

State of Delaware

AUTOMATED EXTERNAL DEFIBRILLATORS

Invitation to Bid Contract No. 07-411-RP

April 3, 2007

***- Deadline to Respond -
Tuesday, May 1, 2007
1:00 p.m. EDT***

CONTRACT NO. 07-411-RP

ALL BIDDERS:

The enclosed packet contains an "INVITATION TO BID" for AUTOMATED EXTERNAL DEFIBRILLATORS. The invitation consists of the following documents:

INVITATION TO BID - CONTRACT NO. 07-411-RP

- 1 DEFINITIONS and GENERAL PROVISIONS
- 2 SPECIAL PROVISIONS and SPECIFICATIONS
- 3 BID QUOTATION REPLY SECTION
 - A - NO BID REPLY FORM
 - B - NON-COLLUSION STATEMENT AND ACCEPTANCE
 - C - QUOTATION SUMMARY
 - D - OFFICE OF MINORITY AND WOMEN BUSINESS ENTERPRISE (OMWBE) APPLICATION

In order for your bid to be considered, the bid quotation reply section shall be executed completely and correctly and returned in a sealed envelope clearly displaying the contract number, by **Tuesday, May 1, 2007, 1:00 p.m. EDT.**

Bids shall be submitted to:

**STATE OF DELAWARE
GOVERNMENT SUPPORT SERVICES
CONTRACTING SECTION
100 ENTERPRISE PLACE - SUITE 4
DOVER, DE 19904.**

Please review and follow the information and instructions contained in the general and special provisions section of the invitation. Should you need additional information, please call Roxann Parker at 857-4555 or email at Roxann.parker@state.de.us.

P:MERGEITB

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
SPECIAL PROVISIONS

1. **CONTRACT REQUIREMENTS:**

This contract will be issued to cover the Insert Contract Name requirements for all State Agencies and shall be accessible to any School District, Political Subdivision, or Volunteer Fire Company or any authorized Early Defibrillation Program agency operating within the State of Delaware. This contract will be for two types of Automatic External Defibrillators. One suitable for use by public safety agencies, specifically police, fire and rescue organizations and the other for use by the general public under the Public Access Defibrillation program.

2. **MANDATORY USE CONTRACT:**

REF: Title 29, Chapter 6911(d) Delaware Code. Every state department and agency within the Executive Branch and Judicial Branch of the state government shall procure all material, equipment and nonprofessional services through the statewide contracts administered by Government Support Services, Office of Management and Budget. Delaware State University, Delaware Technical and Community College, the operations funded by Public School Districts, Delaware Transit Corporation, Department of Elections, the Legislative Branch and the Board of Pension Trustees and their consultants are specifically exempted from the requirements of this subsection.

3. **CONTRACT PERIOD:**

Each vendor's contract shall be valid for a one (1) year period from July 1, 2007 through June 30, 2008. Each contract may be renewed for three (3) one (1) year periods through negotiation between the contractor and Government Support Services. Negotiation must be initiated no later than ninety (90) days prior to the termination of the current agreement.

4. **PRICES:**

Prices shall remain firm for the term of the contract.

5. **PRICE ADJUSTMENT:**

If agreement is reached to extend this contract for the second, optional year, the Division of Government Support Services shall have the option of offering a determined price adjustment and shall not exceed the current Philadelphia All Urban Consumers Price Index (CPI-U), U.S. City Average. If the CPI-U is used, any increase/decrease shall reflect the change during the previous published twelve (12) month period at the time of renegotiation.

STATE OF DELAWARE
Office of Management and Budget
Government Support Services

6. **SHIPPING TERMS:**

F.O.B. destination; freight pre-paid.

7. **QUANTITIES:**

The attention of bidders is called to the fact that, unless stated otherwise, the quantities given in the proposal are best estimates and are given as a basis for the comparison of bids. Quantities ordered may be increased or decreased by any eligible agency as deemed necessary during the period of the contract.

8. **FUNDING OUT:**

The continuation of this contract is contingent upon funding appropriated by the legislature.

9. **BID BOND REQUIREMENT:**

A. Bid Bond Waived.

10. **PERFORMANCE BOND REQUIREMENT:**

A. Performance Bond Waived

STATE OF DELAWARE
Office of Management and Budget
Government Support Services

11. **MANDATORY INSURANCE REQUIREMENTS:**

A. Certificate of Insurance and/or copies of insurance policies for the following:

1. As a part of the contract requirements, the contractor must obtain at its own cost and expense and keep in force and effect during the term of this contract, including all extensions, the minimum coverage limits specified below with a carrier satisfactory to the State. All contractors must carry Comprehensive General Liability and at least one of the other coverages depending on the type of service or product being delivered.
 - a. Comprehensive General Liability - \$1,000,000.00 per person/\$3,000,000 per occurrence.

and

 - b. Medical/Professional Liability - \$1,000,000.00 per person/\$3,000,000 per occurrence.

or

 - c. Miscellaneous Errors and Omissions - \$1,000,000.00 per person/\$3,000,000 per occurrence.

or

 - d. Product Liability - \$1,000,000.00 per person/\$3,000,000 per occurrence.
2. Automotive Liability Insurance covering all automotive units used in the work with limits of not less than \$100,000 each person and \$300,000 each accident as to bodily injury and \$25,000 as to property damage to others.
3. Forty-five (45) days written notice of cancellation or material change of any policies is required.

**Administrator, Government Support Services
Contract No. 07-411-RP
State of Delaware
100 Enterprise Place, Suite 4
Dover, DE 19904**

Note: The State of Delaware shall not be named as an additional insured.

STATE OF DELAWARE
Office of Management and Budget
Government Support Services

12. **BASIS OF AWARD:**

Government Support Services shall award this contract to the lowest responsible and responsive bidder(s) who best meets the terms and conditions of the bid. The award will be made on basis of price, product evaluation, and prior history of service and capability.

Government Support Services reserves the right to reject any or all bids in whole or in part, to make multiple awards, partial awards, award by types, item by item, or lump sum total, whichever may be most advantageous to the State of Delaware.

13. **STATE OF DELAWARE BUSINESS LICENSE:**

Prior to receiving an award, the successful vendor shall either furnish Government Support Services with proof of State of Delaware Business Licensure or initiate the process of application where required. An application may be requested in writing to: Division of Revenue, Carvel State Building, P.O. Box 8750, 820 N. French Street, Wilmington, DE 19899 or by telephone to one of the following numbers: (302) 577-8201 - Public Service, (302) 577-8250 - Licensing Department.

Information regarding the award of this contract will be given to the Division of Revenue. Failure to comply with the State of Delaware licensing requirements may subject your organization to applicable fines and/or interest penalties.

14. **HOLD HARMLESS:**

The successful bidder agrees that it shall indemnify and hold the State of Delaware and all its agencies harmless from and against any and all claims for injury, loss of life, or damage to or loss of use of property caused or alleged to be caused, by acts or omissions of the successful bidder, its employees, and invitees on or about the premises and which arise out of the successful bidder's performance, or failure to perform as specified in the Agreement.

15. **NON-PERFORMANCE:**

In the event the vendor does not fulfill its obligations under the terms and conditions of this contract, the ordering agency may purchase equivalent product on the open market. Any difference in cost between the contract prices herein and the price of open market product shall be the responsibility of the vendor. Under no circumstances shall monies be due the vendor in the event open market products can be obtained below contract cost. Any monies charged to the vendor may be deducted from an open invoice.

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Government Support Services

16. **FORCE MAJEURE:**

Neither the vendor nor the ordering agency shall be held liable for non-performance under the terms and conditions of this contract due, but not limited to, government restriction, strike, flood, fire, or unforeseen catastrophe beyond either party's control. Each party shall notify the other in writing of any situation that may prevent performance under the terms and conditions of this contract.

17. **EXCEPTIONS:**

Bidders may elect to take minor exception to the terms and conditions of this ITB. Government Support Services shall evaluate each exception according to the intent of the terms and conditions contained herein, but Government Support Services must reject exceptions that do not conform to State bid law and/or create inequality in the treatment of bidders. Exceptions shall be considered only if they are submitted with the bid or before the date and time of the bid opening.

18. **MANDATORY USAGE REPORT:**

One of the primary goals in administering this contract is to keep accurate records regarding its actual value. This information is essential in order to update the contents of the contract and to establish proper bonding levels if they are required. The integrity of future contracts revolves around our ability to convey accurate and realistic information to all interested bidders.

A report shall be furnished by the successful contractor **MONTHLY** detailing the purchasing of all items on this contract. The format to be followed is described herein and shall be filed within fifteen (15) days after the end of each reporting period. Any exception to this mandatory requirement may result in cancellation of the award. Failure to provide the report with the minimum required information may also negate any contract extension clauses. Additionally, contractors who are determined to be in default of this mandatory report requirement may have such conduct considered against them, in assessment of responsibility, in the evaluation of future proposals.

The report shall be submitted electronically in EXCEL and sent as an attachment to insert email. It shall contain the six-digit department and organization code.

FORMAT OF REPORT

**State of Delaware
Monthly Usage Report**

State of Delaware							
Monthly Usage Report							
Supplier Name:				Report Start Date:			
Contact Name:				Report End Date:			
Contact Phone:				Today's Date:			
Agency Name or School District	Division or Name of School	Budget Code	Item Description	Contract Item Number	Hour Expended	Contract Proposal Price	Total Spend
							\$0.00
							\$0.00

NOTE: A copy of the Usage Report will be sent by electronic mail to the Awarded Vendor.

The report shall be submitted electronically in **EXCEL** and sent as an attachment to roxann.parker@state.de.us. It shall contain the six-digit department and organization code for each agency and school district.

STATE OF DELAWARE
Office of Management and Budget
Government Support Services

19. **BUSINESS REFERENCES:**

In order to have your bid considered, please supply three (3) business references consisting of current or previous customers with your reply. Please include name, address, telephone number, and a contact person.

20. **ORDERING PROCEDURE:**

Successful contractors are required to have either a local telephone number within the (302) area code, a toll free (800) number, or agree to accept collect calls. Each agency is responsible for placing their orders and may be accomplished by written purchase order, telephone, fax or computer on-line systems. The contractor or vendor must accept full payment by procurement (credit) card and/or conventional check and/or other electronic means at the State's option, without imposing any additional fees, costs or conditions.

21. **BILLING:**

The successful vendor is required to "Bill as Shipped" to the respective ordering agency(s). Ordering agencies shall provide contract number, ship to and bill to address, contact name and phone number.

22. **PAYMENT:**

The agencies or school districts involved will authorize and process for payment each invoice within thirty (30) days after the date of receipt of a correct invoice. The contractor or vendor must accept full payment by procurement (credit) card and/or conventional check and/or other electronic means at the State's option, without imposing any additional fees, costs or conditions.

23. **PRODUCT SUBSTITUTION:**

All items delivered during the life of the contract shall be of the same type and manufacture as specified or accepted as part of the bid proposal unless specific approval is given by Government Support Services to do otherwise. Awarded vendors are highly encouraged to offer any like substitute product (s); either generic or brand name, at any time during the subsequent contract term, especially if an opportunity for cost savings to the state exists. In such cases, the state may require the submission of written specifications and/or product samples for evaluation prior to any approvals being granted.

24. **DISCONTINUED ITEMS:**

In the event an item on the contract becomes unavailable, the vendor must notify the Division of Support Services promptly. If purchase orders are on hand at the time the item becomes unavailable, it is the vendor's responsibility to notify the ordering agency and to offer a suitable substitute if available at the contract price.

STATE OF DELAWARE
Office of Management and Budget
Government Support Services

25. **BID/CONTRACT EXECUTION:**

Both the non-collusion statement that is enclosed with this Invitation to Bid and the contract form delivered to the successful bidder for signature **shall** be executed by a representative who has the legal capacity to enter the organization into a formal contract with the State of Delaware, Government Support Services. The Awarded vendor(s) shall submit their **W-9** with the executed contract form.

26. **CONTRACTOR RESPONSIBILITY:**

The State will enter into a contract with the successful contractor. The successful contractor shall be responsible for all products and services as required by this ITB. Subcontractors, if any, shall be clearly identified in the financial proposal.

27. **PERSONNEL:**

- a. The Contractor represents that he has, or will secure at his own expense, all personnel required to perform the services required under this contract.
- b. All of the services required hereunder shall be performed by the Contractor or under his direct supervision, and all personnel, including subcontractors, engaged in the work shall be fully qualified and shall be authorized under State and local law to perform such services.
- c. None of the work or services covered by this contract shall be subcontracted without the prior written approval of the State.

28. **LIFE CYCLE COSTING:**

If applicable, the specifications contained within this ITB have been developed through Life Cycle Cost Analysis that will allow the State to realize the lowest total cost of ownership and operation over the useful life of the equipment.

29. **ENERGY STAR PRODUCTS:**

The contractor **must** provide products that earn the ENERGY STAR rating and meet the ENERGY STAR specifications for energy efficiency. The offeror is encouraged to visit www.energystar.gov for complete product specifications and updated lists of qualifying products.

30. **TERMINATION FOR CONVENIENCE:**

Contracts shall remain in effect for the time period and quantity specified unless the contract is terminated by the State. The State may terminate the contract at any time by giving written notice of such termination and specifying the effective date thereof, at least sixty (60) days before the effective date of termination.

STATE OF DELAWARE
Office of Management and Budget
Government Support Services

31. **TERMINATION FOR CAUSE:**

If, for any reasons, or through any cause, the Contractor fails to fulfill in timely and proper manner his obligations under this Contract, or if the Contractor violates any of the covenants, agreements, or stipulations of this Contract, the State shall thereupon have the right to terminate this contract by giving written notice to the Contractor of such termination and specifying the effective date thereof, at least 5 days before the effective date of such termination. In that event, all finished or unfinished documents, data, studies, surveys, drawings, maps, models, photographs, and reports or other material prepared by the Contractor under this Contract shall, at the option of the State, become its property, and the Contractor shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents and other materials which is usable to the State.

32. **VENDOR EMERGENCY RESPONSE POINT OF CONTACT:**

The awarded vendor(s) shall provide the name(s), telephone, or cell phone number(s) of those individuals who can be contacted twenty four (24) hours a day, seven (7) days a week where there is a critical need for commodities or services when the Governor of the State of Delaware declares a state of emergency under the Delaware Emergency Operations Plan April 2005. Failure to provide this information could render the bid as non-responsive.

STATE OF DELAWARE
Office of Management and Budget
Government Support Services

I. INTRODUCTION:

The purpose of this Invitation to Bid (ITB) is to allow Government Support Services, a division under the Office of Management and Budget, to enter into a contract with a qualified Offeror for the provision of Automated External Defibrillators. The contract award will be determined by the Office of Management and Budget, Government Support Services, in accordance with Title 29, Section 6924.

II. FORMAT FOR INVITATION TO BID:

A. NUMBER OF COPIES WITH MAILING OF PROPOSAL:

Four (4) copies of the Proposal will be submitted in a sealed envelope clearly marked with the name of the offeror and labeled 07-411-RP AUTOMATED EXTERNAL DEFIBRILLATORS. One of the copies shall be marked "Master Copy" and will contain original signatures in all locations requiring an offeror signature. The remaining three (3) copies do not require original signatures. (Four (4) hard copies of your response with three (3) Diskettes with the completed Excel and Word files must be received).

The State reserves the right to reject any proposals that are not received by this date and time.

The State reserves the right to award the proposed contract to multiple suppliers if the Head of the Agency determines that such an award is in the best interest of the State.

B. DETAILED REQUIREMENTS:

The requirements of this ITB are shown in Appendix A, attached, and made a part of the contract.

C. ATTACHMENTS:

Appendix A (Pricing Grid in Excel Format).

III. PRICING, QUALITY AND SERVICE REQUIREMENTS

A. Pricing

Contract Users require flat prices for items where listed, in Appendix A. The item prices plus all other costs listed will be the number used for cost comparisons. The delivery and shipping costs referred to in this ITB are those for normal shipping, and not rushed orders.

B. Freight Policy:

All shipments will be FOB Delivered to the specified location. Supplier(s) is responsible for filing and expediting all freight claims with the carrier. The Supplier will pay title and risk of loss or damage charges. Emergency/rush delivery requiring special shipping and handling will be at Contract Users' expense (with prior approval only). Rush delivery that occurs as a result of the Supplier's error will be free of charge. Furthermore, the Supplier(s) is responsible for meeting the agreed to schedule for delivery. The successful vendor shall provide reasonable service for emergencies.

APPENDIX A
SCOPE OF WORK DETAILS

III. The completed proposal includes:

- Completed Appendix A comprises the first portion regarding pricing. Four (4) hard copies of your response, the completed excel and Word files.
- Bid Quotation Reply Section
- Delaware Minority and Women Business Enterprise Certification Form and Guidelines (if appropriate)
- While not required, an email to Roxann.parker@state.de.us containing the proposal response as attachments, is requested.

APPENDIX A
SCOPE OF WORK DETAILS

IV. Additional Guidelines:

- No service fees or additional costs will be invoiced to Contract Users by the Supplier during the term of this agreement (except as described in this ITB or mutually agreed upon in writing)
- There will be no “small order”, “minimum order,” or “special order” charges or surcharges
- There will be no return fees for inaccuracies or other errors on the part of the supplier
- Any rush delivery that occurs as a result of Supplier’s error (e.g., stock-outs, etc.) will be free of charge. No handling surcharges will be added or discounts lost for any rush or expedited orders.
- You may also provide catalog(s) and price list(s) for all of the products that you sell that include all of the different price tiers available for each product. **An electronic copy of such is preferred.** The prices listed therein will be the prices that the state will use for off-contract purchases **during the term of the contract.** Please note that as a high volume purchaser of contracted items, the state expects to receive the lowest price offered on off-contract items.
- Write your company name on the label of the diskettes
- **Do not make any changes to the electronic Excel file formats, including adding rows or columns, changing column headers, and inputting text in numeric fields. Comments made on the spreadsheets will be ignored. The excel grids will be locked so that data can be input but format changes can not be made**
- Save your changes under the same filename. Print hard copies of each spreadsheet to accompany your bid.
- If your company would like to include additional information that would be useful in the evaluation process, you may do so as separate, clearly labeled attachments.
- Enter all information directly into the relevant Excel spreadsheet cells in “number” (two-place decimal), not “currency” or other format unless otherwise stated. That is, omit dollar signs, commas, and any other non-essential symbols. (e.g., \$7.90 should be entered as “7.90”.) Prices must be: In US Dollars.
- Enter “n/a” to indicate not available or “0” if there is no charge. Cells left blank will be interpreted as “no bid”.

AUTOMATED EXTERNAL DEFIBRILLATORS
GENERAL REQUIREMENTS

1. Unit must be approved for use by the U.S. Food and Drug Administration.
2. Unit must be semi-automatic with NO manual over-ride capability.
3. Must be Bi-Phasic technology, with pediatric capabilities.
4. Unit shock sequence and joule settings must be user configurable, up to 360 joules.
5. Unit must be able to connect to disposable, self-adhesive defibrillation pads with pre-attached integrated cable.
6. Unit must have a download data-recording device capable of recording up to 30 minutes of EKG data.
7. Data recorder may be either removable PC card or direct connect to a PC with cable or IrDa device.
8. Manufacturer must provide at no charge, data management software and necessary hardware to the Office of Emergency Medical Services (OEMS) necessary to integrate data into existing prehospital data management system. One complete set of data management software and hardware shall be provided at no charge for every thirty (30) Automatic External Defibrillators purchased.
9. Manufacturer must provide, at no charge, one (1) trainer model for every fifty (50) Automatic External Defibrillators purchased.
10. Unit must have the ability to self-test internal circuitry, waveform delivery system and verify calibration of key circuitry and battery condition at least once per day.
11. Manufacturer shall provide a minimum of 5-year unconditional warranty on the unit. Service will be provided onsite by manufacturer certified technician or manufacturer will provide replacement unit.
12. Unit battery shall be able to operate the unit for a period of up to 5 years or 300 defibrillations.
13. Unit shall be shipped fully stocked with 3 sets of adult defibrillation pads and 1 set of pediatric defibrillation pads.
14. Unit shall come equipped with a carrying case.
15. Manufacturer must provide full training by an experienced person on unit(s) to the satisfaction of using agency or other entity at no cost to the State. This will include, but not be limited to: training videos, training cards and user booklets.

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.1 Biphasic Unit, Physio Control, Lifepak 1000 or approved equal

1. DEFIBRILLATOR

Input: ECG via QUIK-COMBO REDI-PAK
pre-connect disposable electrodes.
Standard placement (anterior-lateral or anterior-posterior).
Separate Infant/Child Reduced Energy Defibrillation Electrodes: Must deliver ¼ selected energy. intended for use on children up to 8 years of age or 25 kg (55 lbs)

DEVIATIONS/EXCEPTIONS _____

Electrical

Protection: Input protected against high voltage defibrillator pulses per IEC 60601/EN 60601.

DEVIATIONS/EXCEPTIONS _____

Safety

Classification: Internally powered equipment, IEC 60601-1/EN60601-1, 5.1

DEVIATIONS/EXCEPTIONS _____

Waveform: Biphasic truncated exponential, with voltage and duration compensation for patient impedance.

DEVIATIONS/EXCEPTIONS _____

Output Energy

Sequence: Biphasic, user configurable from 150 to 360 joules, delivered (Level 1, Level 2, Level 3, Level 3, ...)

DEVIATIONS/EXCEPTIONS _____

Charge Time: With a new, non-rechargeable battery pack, or a new fully charged rechargeable battery pack:

200 joules in less than 9 seconds and to 360 joules in less than 15 seconds.

DEVIATIONS/EXCEPTIONS _____

Controls:

ON/OFF	Turns device power on or off.
ANALYZE (optional)	Starts ECG analysis.
SHOCK	Delivers defibrillation energy. Active only when Shock Advisory System advises defibrillation.

CONTRACT NO. 07-411-RP

AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.1 Biphasic Unit, Physio Control, Lifepak 1000 or approved equal (Continued)

DEVIATIONS/EXCEPTIONS Additional keys for menu options and at least one programmable soft key are acceptable.

Clock Set: Two provided to set the clock.

DEVIATIONS/EXCEPTIONS _____

Display: Backlit LCD displaying the number of shocks delivered and elapsed time.
Low Battery Indicator: Low Battery Icon:
At least 30 discharges or 60 minutes operating time remaining with non-rechargeable battery pack.

DEVIATIONS/EXCEPTIONS _____

Service Indicator: Battery service and maintenance required service Icon

DEVIATIONS/EXCEPTIONS _____

Displayed Messages: Messages prompt user through complete operating sequence.

DEVIATIONS/EXCEPTIONS _____

Audible Tones: Coded tones assist user through device operation and alert operator of display messages.

DEVIATIONS/EXCEPTIONS _____

Voice Prompts: Prompt user through complete operation sequence.

DEVIATIONS/EXCEPTIONS May be a programmable option.

1. EVENT DOCUMENTATION

Type: Internal digital memory.

DEVIATIONS/EXCEPTIONS _____

Memory Capacity: 20 minutes audio recording – OPTIONAL . ECG and event log of operator/device actions; At least 20 minutes if unit is configured with audio recording and audio recording setup option is ON. At least 40 minutes if configured with audio recording and audio recording setup option is OFF. At least 60 minutes if not configured with audio recording.

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.1 Biphasic Unit, Physio Control, Lifepak 1000 or approved equal (Continued)

DEVIATIONS/EXCEPTIONS _____

Report Types: CODE SUMMARY report, Event Log report, Test Log report.

DEVIATIONS/EXCEPTIONS _____

Capacity: 100 time stamped entries event Log events, 30 Test Log device tests (assuming no fault codes).

DEVIATIONS/EXCEPTIONS _____

Communications: Options: Direct connection to personal computer with cable or IrDa reader; print direct with EPSON ESC/P protocol for printers with 9-pin printheads, inkjet or laser printer or through IrDa transfer.

DEVIATIONS/EXCEPTIONS _____

Data Review: LIFENET system compatible. Options; DATA TRANSFER Express` information management program; CODE-STAT SUITE data management system.

DEVIATIONS/EXCEPTIONS _____

2. ENVIRONMENTAL

Note: All performance specifications defined assume that the unit has been stored (two hours Minimum) at the operating temperature prior to operation.

DEVIATIONS/EXCEPTIONS _____

Operating Temperature: -20 to +60° C for one hour.

DEVIATIONS/EXCEPTIONS _____

Storage Temperature: -30 to +65° C* (-22 to +149° F) without battery and electrodes.

-30 to +65° C* (-22 to +149° F) with battery and electrodes, maximum exposure time limited to one week.

DEVIATIONS/EXCEPTIONS _____

Atmospheric Pressure: 760mmHG to 429mmHg, 0 to 15,000 ft above sea level.

TECHNICAL SPECIFICATIONS

Item No.1 Biphasic Unit, Physio Control, Lifepak 1000 or approved equal (Continued)

DEVIATIONS/EXCEPTIONS _____

Relative Humidity: 10 to 95% (non-condensing)

DEVIATIONS/EXCEPTIONS _____

Water Resistance: IEC 60529/EN 60529 IP55 "Splash proof" with electrodes and battery installed.

DEVIATIONS/EXCEPTIONS _____

Shock: MIL-STD-810F, Method 516.5, Procedure 1

DEVIATIONS/EXCEPTIONS _____

Vibration: MIL-STD-810F, Method 514.5

DEVIATIONS/EXCEPTIONS _____

***Note:** See Operating Instructions for information on caring for batteries.

3. BATTERIES

Non-Rechargeable

Battery Pak Type: 4.5 amp-hour Lithium Manganese Dioxide with battery life indicator.

DEVIATIONS/EXCEPTIONS _____

Capacity: Typical: 400 200j shocks (400) full discharges with a fully charged new battery.

DEVIATIONS/EXCEPTIONS _____

**Recommended
Replacement
Interval:**

5 years.

DEVIATIONS/EXCEPTIONS _____

Battery Shelf Life: Minimum 5 years followed by 48 months standby time.

DEVIATIONS/EXCEPTIONS _____

Weight: 0.45kg (1lb.)

DEVIATIONS/EXCEPTIONS _____

AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.1 Biphasic Unit, Physio Control, Lifepak 1000 or approved equal (Continued)

4. GENERAL

Physical Characteristics:

Height: 8.7cm (3.4 in)

DEVIATIONS/EXCEPTIONS _____

Width: 23.4cm (9.2 in)

DEVIATIONS/EXCEPTIONS _____

Depth: 27.7cm (10.9 in) including handle.

DEVIATIONS/EXCEPTIONS _____

Weight: 7.1 lbs. with battery and one set of electrodes.

DEVIATIONS/EXCEPTIONS _____

Case: Soft-side carrying case included

DEVIATIONS/EXCEPTIONS _____

NOTE: Minor deviations in dimensions, not to exceed 20%, will be considered and must be noted.

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.2 Biphasic Unit, Physio Control, Lifepak Express or approved equal

1. DEFIBRILLATOR

Input: ECG via QUIK-COMBO REDI-PAK
pre-connect disposable electrodes.
Standard placement (anterior-lateral or anterior-posterior).
Separate Infant/Child Reduced Energy Defibrillation Electrodes: Must deliver ¼ selected energy. intended for use on children up to 8 years of age or 25 kg (55 lbs)

DEVIATIONS/EXCEPTIONS _____

Electrical

Protection: Input protected against high voltage defibrillator pulses per IEC 60601/EN 60601.

DEVIATIONS/EXCEPTIONS _____

Safety

Classification: Internally powered equipment, IEC 60601-1/EN60601-1, 5.1

DEVIATIONS/EXCEPTIONS _____

Waveform: Biphasic truncated exponential, with voltage and duration compensation for patient impedance.

DEVIATIONS/EXCEPTIONS _____

Output Energy

Sequence: Biphasic, user configurable from 150 to 360 joules, delivered
(Level 1, Level 2, Level 3, Level 3, ...)

DEVIATIONS/EXCEPTIONS _____

Charge Time: With a new, non-rechargeable battery pack, or a new fully charged rechargeable battery pack:

200 joules in less than 9 seconds and to 360 joules in less than 15 seconds.

DEVIATIONS/EXCEPTIONS _____

Controls:

ON/OFF	Turns device power on or off.
SHOCK	Delivers defibrillation energy. Active only when Shock Advisory system advises defibrillation.

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.2 Biphasic Unit, Physio Control, Lifepak Express or approved equal (Continued)

DEVIATIONS/EXCEPTIONS _____

Clock Set: Two switches provided to set the clock.

DEVIATIONS/EXCEPTIONS _____

Display: Two-line, 20-character dot matrix

Low Battery

Indicator: Low Battery Icon: At least 6 discharges remaining with non-rechargeable battery pack.

DEVIATIONS/EXCEPTIONS Text display is optional. _____

Service Indicator: Service Icon

DEVIATIONS/EXCEPTIONS _____

Audible Tones: Coded tones assist user through device operation and alert operator of display messages.

DEVIATIONS/EXCEPTIONS _____

Voice Prompts: Prompt user through complete operation sequence.

DEVIATIONS/EXCEPTIONS _____

5. EVENT DOCUMENTATION

Type: Internal digital memory.

DEVIATIONS/EXCEPTIONS _____

Memory Capacity: 20 minutes audio recording – OPTIONAL . ECG and event log of operator/device actions; At least 20 minutes if unit is configured with audio recording and audio recording setup option is ON. At least 20minutes if configured with audio recording and audio recording setup option is OFF. At least 20 minutes if not configured with audio recording.

DEVIATIONS/EXCEPTIONS _____

Report Types: CODE SUMMARY report, Event Log report, Test Log report.

DEVIATIONS/EXCEPTIONS _____

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.2 Biphasic Unit, Physio Control, Lifepak Express or approved equal (Continued)

Capacity: 100 Event Log events, 10 Test Log device tests (assuming no fault codes).

DEVIATIONS/EXCEPTIONS _____

Communications: Options: Direct connection to personal computer with cable or IrDa reader; print direct with EPSON ESC/P protocol for printers with 9-pin printheads, inkjet or laser printer or through IrDa transfer.

DEVIATIONS/EXCEPTIONS _____

Data Review: LIFENET system compatible. Options; DATA TRANSFER Express information management program; CODE-STAT SUITE data management system.

DEVIATIONS/EXCEPTIONS _____

6. ENVIRONMENTAL

Note: All performance specifications defined assume that the unit has been stored (two hours Minimum) at the operating temperature prior to operation.

DEVIATIONS/EXCEPTIONS _____

Operating Temperature: 0 to +50° C (+32 to +122° F)

DEVIATIONS/EXCEPTIONS _____

Storage Temperature: -30 to +65° C* (-22 to +149° F) without battery and electrodes.

-30 to +65° C* (-22 to +149° F) with battery and electrodes, maximum exposure time limited to one week.

DEVIATIONS/EXCEPTIONS _____

Atmospheric Pressure: 760mmHG to 429mmHg, 0 to 15,000 ft above sea level.

DEVIATIONS/EXCEPTIONS _____

Relative Humidity: 10 to 95% (non-condensing)

DEVIATIONS/EXCEPTIONS _____

Water Resistance: IEC 60529/EN 60529 IPX4 "Splash proof" with electrodes or connector cover installed.

DEVIATIONS/EXCEPTIONS _____

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.2 Biphasic Unit, Physio Control, Lifepak Express or approved equal (Continued)

Shock: MIL-STD-810E, Method 516.4, Procedure 1, (40g, 6-9 ms pulse, ½ sine each axis)

DEVIATIONS/EXCEPTIONS _____

Vibration: MIL-STD-810E, Method 514.4

DEVIATIONS/EXCEPTIONS _____

***Note:** See Operating Instructions for information on caring for batteries.

7. BATTERIES

Capacity: Non-removable permanently installed capable of at least twenty 360j shocks when fully charged.

DEVIATIONS/EXCEPTIONS Permanently installed battery preferred but requirement can be waived per OEMS discretion.

Battery Charge

Time: No time requirement.

DEVIATIONS/EXCEPTIONS _____

Recommended Replacement Interval:

2 years or after every use, whichever comes first, using recommended battery maintenance procedures.

DEVIATIONS/EXCEPTIONS If battery icon is displayed the AED battery shall maintain a minimum of 18 moths stand-by usage.

Weight: 0.9kg (1.9 lb.)

DEVIATIONS/EXCEPTIONS _____

Battery Pak Type: Separate charge pack battery charger that maintains the charge of the internal battery.

DEVIATIONS/EXCEPTIONS Unit must have ability to operate without charge-pack installed.

CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS
TECHNICAL SPECIFICATIONS

Item No.2 Biphasic Unit, Physio Control, Lifepak Express or approved equal (Continued)

Shelf Life: 2years

DEVIATIONS/EXCEPTIONS_____

8. GENERAL

Physical Characteristics:

Height: 10.7cm (4.2 in)

DEVIATIONS/EXCEPTIONS_____

Width: 20.3cm (8.0 in)

DEVIATIONS/EXCEPTIONS_____

Depth: 24.1cm (9.5 in) including handle.

DEVIATIONS/EXCEPTIONS_____

Weight: 4.5 lbs. with battery and electrodes.

DEVIATIONS/EXCEPTIONS_____

Case: Soft-side carrying case included

DEVIATIONS/EXCEPTIONS_____

NOTE: Minor deviations in dimensions, not to exceed 20%, will be considered and must be noted.

BID QUOTATION REPLY SECTION
CONTRACT NO. 07-411-RP
AUTOMATED EXTERNAL DEFIBRILLATORS

Please fill out the attached forms fully and completely and return with your bid in a sealed envelope clearly displaying the contract number to Government Support Services by **Tuesday, May 1, 2007, 1:00 p.m. EDT** at which time bids will be opened.

Bids shall be submitted to:

**STATE OF DELAWARE
GOVERNMENT SUPPORT SERVICES
CONTRACTING SECTION
100 ENTERPRISE PLACE - SUITE 4
DOVER DE 19904**

PUBLIC BID OPENINGS

The public bid opening insures the citizens of Delaware that contracts are being bid fairly on a competitive basis and comply with Delaware procurement laws. The agency conducting the opening is required by law to publicly open the bids at the time and place specified and the contract shall be awarded within thirty (30) days thereafter. The main purpose of the bid opening is to reveal the name(s) of the bidders(s), not to serve as a forum for determining the apparent low bidders. The disclosure of additional information, including prices, shall be at the discretion of the contracting agency until such time that the responsiveness of each bid has been determined.

After receipt of a fully executed contract(s), the Delaware public and all bidders are invited to make an appointment with the contracting officer in order to review pricing and other non-confidential information.

NOTE: ONLY THE BIDDER'S NAME WILL BE READ AT THE BID OPENING

CONTRACT NO.: 07-411-RP
 AUTOMATED EXTERNAL DEFIBRILLATORS
BID QUOTATION

<u>DESCRIPTION</u>	<u>BID QUANTITIES</u>	
1. Bi-Phasic Public Safety AED Manufacturer & Model No. <hr/>	1-20	\$ _____ EA
	21-50	\$ _____ EA
	51-100	\$ _____ EA
	101-250	\$ _____ EA
	251+	\$ _____ EA
2. Bi-Phasic Public Access AED Manufacturer & Model No. <hr/>	1-20	\$ _____ EA
	21-50	\$ _____ EA
	51-100	\$ _____ EA
	101-250	\$ _____ EA
	251+	\$ _____ EA
3. Public Safety Replacement Defibrillation Pads - each Manufacturer & Model No. <hr/>		\$ _____ EA
4. Public Access Replacement Charge-Pak kit. (1 set electrodes/1 charge stick) (2 set electrodes/1 charge stick) Manufacture & Model No. <hr/>		\$ _____ EA
		\$ _____ EA
5. Infant/Child Electrodes (Starter Kit) (Replacement Kit) Manufacturer & Model No. <hr/>		\$ _____ EA
		\$ _____ EA
6. LP500 Lithium replacement battery. Manufacturer & Model No. <hr/>		\$ _____ EA
7. Public Safety replacement battery. Manufacturer & Model No. <hr/>		\$ _____ EA
8. Surface mount alarmed wall Cabinet. Manufacturer & Model No. <hr/>		\$ _____ EA

9. All Other Associated
Components or Accessories
Price List Dated

Discount Off Manufacturer's
List Price

TRAINED PERSONNEL INFORMATION

(See Special Provision No.26)

NAME:

PHONE NO.:

DELIVERY

Ship Stock _____ days ARO

Ship Non-Stock _____ days ARO

COMPANY

DATE

STATE OF DELAWARE
OFFICE OF MANAGEMENT AND BUDGET
GOVERNMENT SUPPORT SERVICES
CONTRACTING SECTION
100 ENTERPRISE PLACE – SUITE 4
DOVER, DELAWARE 19904

NO BID REPLY FORM

BID #07-411-RP

BID TITLE: AUTOMATED EXTERNAL DEFIBRILLATORS

To assist us in obtaining good competition on our Request for Bids, we ask that each firm that has received an invitation, but does not wish to bid, state their reason(s) below and return in a clearly marked envelope displaying the contract number. This information will not preclude receipt of future invitations unless you request removal from the Bidder's List by so indicating below, or do not return this form or bona fide bid.

Unfortunately, we must offer a "No Bid" at this time because:

_____ 1. We do not wish to participate in the bid process.

_____ 2. We do not wish to bid under the terms and conditions of the Request for Bid document. Our objections are:

_____ 3. We do not feel we can be competitive.

_____ 4. We cannot submit a Bid because of the marketing or franchising policies of the manufacturing company.

_____ 5. We do not wish to sell to the State. Our objections are: _____

_____ 6. We do not sell the items/services on which Bids are requested.

_____ 7. Other: _____

FIRM NAME

SIGNATURE

_____ We wish to remain on the Bidder's List **for these goods or services.**

_____ We wish to be deleted from the Bidder's List **for these goods or services.**

CONTRACT NO.: 07-411-RP
TITLE: AUTOMATED EXTERNAL DEFIBRILLATORS
OPENING DATE: Tuesday, May 1, 2007 1:00 p.m. EDT

NON-COLLUSION STATEMENT

This is to certify that the undersigned bidder has neither directly nor indirectly, entered into any agreement, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this bid submitted this date to Government Support Services.

It is agreed by the undersigned bidder that the signed delivery of this bid represents the bidder's acceptance of the terms and conditions of this Invitation to Bid including all specifications and special provisions.

NOTE: Signature of the authorized representative **MUST** be of an individual who legally may enter his/her organization into a formal contract with the State of Delaware, Government Support Services.

COMPANY NAME _____

Check one)	
<input type="checkbox"/>	Corporation
<input type="checkbox"/>	Partnership
<input type="checkbox"/>	Individual

NAME OF AUTHORIZED REPRESENTATIVE
(Please type or print) _____

SIGNATURE _____ TITLE _____

COMPANY ADDRESS _____

PHONE NUMBER _____ FAX NUMBER _____

EMAIL ADDRESS _____

FEDERAL E.I. NUMBER _____ STATE OF DELAWARE LICENSE NUMBER _____

COMPANY CLASSIFICATIONS: CERT. NO. _____	(circle one)		(circle one)		(circle one)	
	Women Business Enterprise (WBE)	Yes No	Minority Business Enterprise (MBE)	Yes No	Disadvantaged Business Enterprise (DBE)	Yes No

[The above table is for information and statistical use only.]

PURCHASE ORDERS SHOULD BE SENT TO:
(COMPANY NAME) _____

ADDRESS _____

CONTACT _____

PHONE NUMBER _____ FAX NUMBER _____

EMAIL ADDRESS _____

AFFIRMATION: Within the past five years, has your firm, any affiliate, any predecessor company or entity, owner, Director, officer, partner or proprietor been the subject of a Federal, State, Local government suspension or debarment?

YES _____ NO _____ if yes, please explain _____

THIS PAGE SHALL BE SIGNED, NOTARIZED AND RETURNED FOR YOUR BID TO BE CONSIDERED

SWORN TO AND SUBSCRIBED BEFORE ME this _____ day of _____, 20 _____

Notary Public _____ My commission expires _____

City of _____ County of _____ State of _____

GOVERNMENT SUPPORT SERVICES

DEFINITIONS AND GENERAL PROVISIONS

The attached Definitions and General Provisions apply to all contracts and are part of each invitation to bid. The requirement to furnish a bid bond and performance bond is applicable unless waived in the Special Provisions. Should the General Provisions conflict with the Special Provisions, the Special Provisions shall prevail. Bidders or their authorized representatives are required to fully acquaint themselves as to State procurement laws and regulations prior to submitting bid.

DEFINITIONS

Whenever the following terms are used, their intent and meaning shall be interpreted as follows:

STATE: The State of Delaware

AGENCY: Contracting State Agency as noted on cover sheet.

DESIGNATED OFFICIAL: The agent authorized to act for the Agency.

BID INVITATION: The "bid invitation" or "invitation to bid" is a packet of material sent to vendors and consists of General Provisions, Special Provisions, specifications, and enclosures.

GENERAL PROVISIONS: General Provisions are instructions pertaining to contracts in general. They contain, in summary, requirements of laws of the State, policies of the Agency, and instructions to vendors.

SPECIAL PROVISIONS: Special Provisions are specific conditions or requirements peculiar to the contract under consideration and are supplemental to the General Provisions. Should the Special Provisions conflict with the General Provisions, the Special Provisions shall prevail.

BIDDER OR VENDOR: Any individual, firm, or corporation formally submitting a proposal for the material or work contemplated, acting directly or through a duly authorized representative.

PROPOSAL: The offer of the bidder submitted on the approved form and setting forth the bidder's prices for performing the work or supplying the material or equipment described in the specifications.

SURETY: The corporate body which is bound with and for the contract, or which is liable, and which engages to be responsible for the contractor's payments of all debts pertaining to and for his acceptable performance of the work for which he has contracted.

BIDDER'S DEPOSIT: The security designated in the proposal to be furnished by the bidder as a guaranty of good faith to enter into a contract with the Agency if the work to be performed or the material or equipment to be furnished is awarded to him.

CONTRACT: The written agreement covering the furnishing and delivery of material or work to be performed.

CONTRACTOR: Any individual, firm, or corporation with whom a contract is made by the Agency.

CONTRACT BOND: The approved form of security furnished by the contractors and his surety as a guaranty of good faith on the part of the contractor to execute the work in accordance with the terms of the contract.

SECTION A - GENERAL PROVISIONS

1. **BID INVITATION:**

See "Definitions".

2. **PROPOSAL FORMS:**

The invitation to bid shall contain pre-printed forms for use by the vendor in submitting his bid. The forms shall contain basic information such as description of the item and the estimated quantities and shall have blank spaces for use by the vendor for entering information such as unit bid price, total bid price, etc.

3. **INTERPRETATION OF ESTIMATES:**

- a. The attention of bidders is called to the fact that, unless stated otherwise, the quantities given in the proposal form are to be considered to be approximate only and are given as a basis for the comparison of bids. The Agency may increase or decrease the amount of any item as may be deemed necessary or expedient, during the period of the contract.
- b. An increase or decrease in the quantity for any item is not sufficient ground for an increase or decrease in the unit price.

4. **SILENCE OF SPECIFICATIONS:**

The apparent silence of the specifications as to any detail, or the apparent omission from it of detailed description concerning any point, shall be regarded as meaning that only the best commercial practice is to prevail and only material and workmanship of the first quality are to be used. Proof of specifications compliance will be the responsibility of the vendor.

5. **EXAMINATION OF SPECIFICATIONS AND PROVISIONS:**

The bidder shall examine carefully the proposal and the contract forms for the material contemplated. The bidder shall investigate and satisfy himself as to the conditions to be encountered, quality and quantities of the material to be furnished, and the requirements of the Special Provisions and the contract. The submission of a proposal shall be conclusive evidence that the bidder has made examination of the aforementioned conditions.

6. **PREPARATION OF PROPOSAL:**

- a. The bidder's proposal shall be written in ink or typewritten on the form provided.
- b. If items are listed with a zero quantity, bidder shall state unit price **ONLY** (intended for open end purchases where estimated requirements are not known). The proposal shall show a total bid price for each item bid and the total bid price of the proposal excluding zero quantity items.

7. **PRICES QUOTED:**

The prices quoted are those for which the material will be furnished F.O.B. Ordering Agency and include all charges that may be imposed during the period of the contract.

8. **DISCOUNT:**

No qualifying letter or statements in or attached to the proposal, or separate discounts will be considered in determining the low bid except as may be otherwise herein noted. Cash or separate discounts should be computed and incorporated into unit bid price(s).

9. **SAMPLES OR BROCHURES:**

Samples or brochures may be required by the agency for evaluation purposes. They shall be such as to permit the Agency to compare and determine if the item offered complies with the intent of the specifications.

10. **PROPOSAL GUARANTY; BID BOND:**

- a. Each bidder shall submit with his proposal a guaranty in sum equal to at least 10% of the total value of his bid, according to Delaware Code Title 29, Section 6927(a).
- b. This bid bond shall be submitted in the form of good and sufficient bond drawn upon an insurance or bonding company authorized to do business in the State of Delaware, to the State of Delaware for the benefit of the Agency, or a certified check drawn on a reputable banking institution and made payable to the Agency in the requirement amount. If Agency bond form is not utilized, the substituted bond forms must conform to the minimum of conditions specified in the Agency bond form.

11. **DELIVERY OF PROPOSALS:**

Proposals shall be delivered in sealed envelopes, and shall bear on the outside the name and address of the bidder as well as the designation of the contract. Proposals forwarded by U.S. Mail shall be sent first class to the address listed below. Proposals forwarded by delivery service other than the U.S. Mail or hand delivered must be delivered to the address listed below. All bids must clearly display the bid number on the envelope.

State of Delaware
Office of Management and Budget
Government Support Services
Contracting Section
100 Enterprise Place – Suite 4
Dover, DE 19904

All proposals will be accepted at the time and place set in the advertisement. Bidder bears the risk of delays in delivery. Proposals received after the time set for public opening will be returned unopened.

12. **WITHDRAWAL OF PROPOSALS:**

A bidder may withdraw his proposal unopened after it has been deposited, if such a request is made prior to the time set for the opening of the proposal.

13. **PUBLIC OPENING OF PROPOSALS:**

The bids shall be publicly opened at the time and place specified by the Agency. Bidders or their authorized representatives are invited to be present.

14. **PUBLIC INSPECTION OF PROPOSALS:**

If the bidder designates a portion of its bid as confidential, it shall isolate and identify in writing the confidential portions. The bidder shall include with this designation a statement that explains and supports the firm's claim that the bid items identified as confidential contain trade secrets or other proprietary data.

15. **DISQUALIFICATION OF BIDDERS:**

Any one or more of the following causes may be considered as sufficient for the disqualification of a bidder and the rejection of his proposal or proposals:

- a. More than one proposal for the same contract from an individual, firm, or corporation under the same or different names.
- b. Evidence of collusion among bidders.
- c. Unsatisfactory performance record as evidenced by past experience.
- d. If the unit prices are obviously unbalanced either in excess or below reasonable cost analysis values.
- e. If there are any unauthorized additions, interlineation, conditional or alternate bids or irregularities of any kind which may tend to make the proposal incomplete, indefinite, or ambiguous as to its meaning.
- f. Non-attendance of mandatory pre-bid meetings may be cause of disqualification.

SECTION B - AWARD AND EXECUTION OF CONTRACT

1. CONSIDERATION OF BIDS:

- a. After the proposals have been opened, the bids will be tabulated and the results will be made available to the public. Tabulations of the bids will be based on the correct summation of items at the unit price bid.
- b. The right is reserved to waive technicalities, to reject any or all bids, or any portion thereof, to advertise for new proposals, to proceed to do the work otherwise, or to abandon the work, if in the judgment of the Agency or its agent, the best interest of the State will be promoted thereby.

2. MATERIAL GUARANTY:

Before any contract is awarded, the successful bidder may be required to furnish a complete statement of the origin, composition and manufacture of any or all of the material to be used in the contract together with such samples as may be requested for the purpose of testing.

3. AWARD OF CONTRACT:

Within thirty days from the date of opening proposals, the contract will be awarded or the proposals rejected.

4. EXECUTION OF CONTRACT:

- a. The bidder to whom the award is made shall execute a formal contract and bond within twenty days after date of official notice of the award of the contract.
- b. If the successful bidder fails to execute the required contract and bond, as aforesaid, within twenty days after the date of official notice of the award of the contract, his proposal guaranty shall immediately become forfeited as liquidated damages. Award will then be made to the next lowest qualified bidder of the work or re-advertised, as the Agency may decide.

5. REQUIREMENT OF CONTRACT BOND:

- a. Successful bidders shall furnish bond, simultaneously with the execution of the formal contract, to the State of Delaware for the benefit of the Agency with surety in the amount of 100% of the total contract award or as otherwise provided in the Special Provisions. Said bonds shall be conditioned upon the faithful performance of the contract.
- b. The bond forms shall be provided by the Agency and the surety shall be acceptable to the Agency.

6. **WARRANTY:**

The successful bidder(s) shall be required to extend any policy guarantee usually offered to the general public, FEDERAL, STATE, COUNTY, or MUNICIPAL governments, on material in this contract against defective material, workmanship, and performance.

7. **THE CONTRACT(S):**

The contract(s) with the successful bidder(s) will be executed with the Office of Management and Budget, Government Support Services acting for all participating agencies.

8. **RETURN OF BIDDER'S DEPOSIT:**

The deposits shall be returned to the successful bidder upon the execution of the formal contract. The deposits of unsuccessful bidders shall be returned to them immediately upon the awarding of the contract or rejection of their bids.

9. **INFORMATION REQUIREMENT:**

The successful bidder's shall be required to advise the Office of Management and Budget, Government Support Services of the gross amount of purchases made as a result of the contract.

10. **CONTRACT EXTENSION:**

The State reserves the right to extend this contract on a month-to-month basis for a period of up to three months.

11. **TERMINATION FOR CONVENIENCE:**

Contracts shall remain in effect for the time period and quantity specified unless the contract is terminated by the State. The State may terminate the contract at any time by giving written notice of such termination and specifying the effective date thereof, at least sixty (60) days before the effective date of termination.

12. **TERMINATION FOR CAUSE:**

If, for any reasons, or through any cause, the Contractor fails to fulfill in timely and proper manner his obligations under this Contract, or if the Contractor violates any of the covenants, agreements, or stipulations of this Contract, the State shall thereupon have the right to terminate this contract by giving written notice to the Contractor of such termination and specifying the effective date thereof, at least 5 days before the effective date of such termination. In that event, all finished or unfinished documents, data, studies, surveys, drawings, maps, models, photographs, and reports or other material prepared by the Contractor under this Contract shall, at the option of the State, become its property, and the Contractor shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents and other materials which is usable to the State.

SECTION C - GENERAL

1. **AUTHORITY OF AGENCY:**

On all questions concerning the interpretation of specifications, the acceptability and quality of material furnished and/or work performed, the classification of material, the execution of the work, and the determination of payment due or to become due, the decision of the Agency shall be final and binding.

2. **LAWS TO BE OBSERVED:**

The contractor is presumed to know and shall strictly comply with all National, State, or County laws, and City or Town ordinances and regulations in any manner affecting the conduct of the work. The contractor shall indemnify and save harmless the State of Delaware, the Agency, and all Officers, Agency and Servants thereof against any claim or liability arising from or based upon the violation of any such laws, ordinances, regulations, orders, or decrees whether by himself or by his employees.

3. **PERMITS AND LICENSES:**

All necessary permits, licenses, insurance policies, etc. required by local, State or Federal laws, shall be provided by the contractor at his own expense.

4. **PATENTED DEVICES, MATERIAL AND PROCESSES:**

- a. The contractor shall provide for the use of any patented design, device, material, or process to be used or furnished under this contract by suitable legal agreement with the patentee or owner, and shall file a copy of this agreement with the Agency.
- b. The contractor and the surety shall hold and save harmless the State of Delaware, the Agency, the Director, their Officers or Agents from any and all claims because of the use of such patented design, device, material, or process in connection with the work agreed to be performed under this contract.

5. **EMERGENCY TERMINATION OF CONTRACT:**

- a. Due to restrictions which may be established by the United States Government on material, or work, a contract may be terminated by the cancellation of all or portions of the contract.
- b. In the event the contractor is unable to obtain the material required to complete the items of work included in the contract because of restrictions established by the United States Government and if, in the opinion of the Agency, it is impractical to substitute other available material, or the work cannot be completed within a reasonable time, the incomplete portions of the work may be cancelled, or the contract may be terminated.

6. **TAX EXEMPTION:**

- a. Material covered by this proposal is exempt from all FEDERAL and STATE TAXES. Such taxes shall not be included in prices quoted.
- b. Any material which is to be incorporated in the work or any equipment required for the work contemplated in the proposal may be consigned to the Agency. If the shipping papers show clearly that any such material is so consigned, the shipment will be exempt from the tax on the transportation of property under provisions of Section 3475 (b) of the Internal Revenue Code, as amended by Public Law 180 (78th Congress). All transportation charges shall be paid by the contractor. Each bidder shall take his exemption into account in calculating his bid for his work.

7. **OR EQUAL (PRODUCTS BY NAME):**

Specifications of products by name are intended to be descriptive of quality or workmanship, finish and performance. Desirable characteristics are not intended to be restrictive. Substitutions of products for those named will be considered provided the vendor certifies that the function, characteristics, performance and endurance qualities of the material offered is equal or superior to that specified.

8. **BASIS OF AWARD:**

The Office of Management and Budget, Government Support Services will award this contract to the lowest responsible bidder(s) which in their judgment best serves the interest of the State of Delaware in accordance with Delaware Code Title 29, Section 6923(k). Personnel with experience and technical background may be utilized by the Office of Management and Budget, Government Support Services in making judgment. In case of error in price extension, the unit price(s) shall prevail.

9. **INVOICING:**

After the awards are made, the agencies participating in the bid may forward their purchase orders to the successful bidder(s) in accordance with State Purchasing Procedures. The State will generate a payment voucher upon receipt of an invoice from the vendor.

SECTION D - EQUAL OPPORTUNITY

1. EQUALITY OF EMPLOYMENT OPPORTUNITY ON PUBLIC WORKS:

During the performance of any contract for public works financed in whole or in part by appropriation of the State of Delaware, the contractor agrees as follows:

- a. The contractor will not discriminate against any employee or applicant for employment because of race, creed, color, sex, age, or national origin. The contractor will take affirmative action to ensure that applicants are employed and that employees are treated equally during employment without regard to their race, creed, color, sex, age, or national origin. Such action shall include, but not be limited to the following: advertising, lay-off or termination, rates of pay or other forms of compensation, and selection for training including apprenticeships. The contractor agrees to post in conspicuous places, notices to be provided by the contracting agency setting forth the provisions of this non-discrimination clause.
- b. The contractor will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to race, creed, color, sex, age, or national origin.
- c. The term "contractor for public works" means construction, reconstruction, demolition, alteration, and/or repair work, maintenance work, and paid for in whole or in part out of the funds of a public body except work performed under a vocational rehabilitation program. The manufacture or furnishing of materials, articles, supplies or equipment is not a public work within the meaning of this subsection unless conducted in connection with and at the site of the public work.

Revised 11/28/05



State of Delaware

Office of Minority and Women Business Enterprise Certification Application



Complete application and mail to:

Office of Minority and Women Business Enterprise (OMWBE)
Haslet Armory
122 William Penn Street
Dover, DE 19901
Telephone: (302)739-4206 Fax: (302)739-1965
Email: deomwbe@state.de.us
Website: www.state.de.us/omwbe

Important Information Please Read!

Is my firm eligible?

A minority and/or women owned business (sole-proprietorship, partnership, corporation or joint venture) must meet the following criteria:

- a) Minority groups include: African Americans, Asian/Pacific Americans, Hispanic Americans, Native Americans, and Subcontinent Asian Americans.
 - b) At least 51 percent owned, controlled and actively managed by minority group members or by women.
 - c) Serving a for profit business with “useful business functions.”
- An out-of-state company must first **be certified in its home state** before it can be considered for certification in Delaware. This must be a state-level certification, if available.
 - There is no fee for processing your application. In addition, free assistance is available. If you have questions about the application or your company’s qualifications, call (302)739-4206.
 - If your business is certified by **Delaware Department of Transportation (DelDOT) City of Wilmington, Minority Supplier Development Council (MSDC), Women Business Enterprise National Council (WBENC) and located in Delaware**, there is a specialized shortened application. You must also attach a copy of your certification and mail all documents to the OMWBE.
 - Also, please note that it is extremely important to provide other certifying agency documentation. This can expedite the certification process.

Document Request checklist

- **Unless otherwise indicated, copies of documents are sufficient.**
- **Any deficiency may delay the certification process.**
- **Certification generally takes four to six weeks.**
- **An on-site visit.** *(The OMWBE office may schedule an on-site visit once the completed application and appropriate supporting documentation have been received).*

Documents to attach to your application	Sole Prop	Part/LLP	Corp/S-Corp	LLC	OMWBE Use
Notarized Minority and Women Business Enterprise Affidavit form	Yes	Yes	Yes	Yes	
Copy of birth certificate, permanent resident card, passport or tribal memberships	Yes	Yes	Yes	Yes	
Last two years of your firm's tax returns (gross receipts). If not available, last two years W2 and/or 1099 forms for all owners, directors, officers and senior management.	Yes	Yes	Yes	Yes	
Copy of MBE/WBE certification from home state, if company headquarters are not in Delaware. (must be a state level certification, if available)	Yes	Yes	Yes	Yes	
Copies of any relevant licenses, certificates of training and degrees held by the company or its owners/employees	Yes	Yes	Yes	Yes	
Partnership Agreement, including any amendments, buy-out rights as well as any profit sharing arrangements		Yes			
Articles of Incorporation with all amendments		Yes			
Minutes of the last annual shareholders meeting		Yes			
By-laws and By-law Amendments		Yes			
Copy of most recent Stock Ledger		Yes			
Copy of Certificate of Organization				Yes	
Copy of Operating Agreement				Yes	

Delaware Minority and/or Women Business Enterprise Certification

Certification Application

The following is the application for Minority and/or Women Business Enterprise (MWBE) certification with the State of Delaware. All questions must be answered. Please type or print clearly.

Questions that do not apply to your firm should be marked N/A in the space provided.

The Affidavit on page 14 must be signed and notarized by a Notary Public. Faxed copies of the Affidavit will only be accepted if the notary seal has the stamped seal with the expiration date visible. Otherwise, mail the original Affidavit with the raised seal to our office.

Please return the completed application with signature and required notarization to the address below:

**Office of Minority and Women
Business Enterprise
Haslet Armory
122 William Penn Street
Dover, DE 19901**

Phone: (302) 739-4206

Fax: (302) 739-1965

Web site: www.state.de.us/omwbe

Definitions

Minority and/or Women Business Enterprise

A Minority and Women Business Enterprise is a business that is at least 51 percent owned, controlled and actively managed by minority and/or women group members who are United States citizens or persons lawfully admitted to the United States for permanent residence.

The business must be a for-profit business and currently be performing a useful function.

Minorities – United States citizens or permanent residents who are African Americans, Asian/Pacific Americans, Hispanic Americans, Native Americans, Subcontinent Asian Americans, or as defined herein:

African (Black) Americans. All persons having origins from any of the Black groups of Africa and all persons having origins in any of the original peoples of the Cape Verde Islands.

Asian/Pacific Americans. All persons having origins from any of the original peoples of the Far East, Asia, or the Pacific Islands, including China, Japan, Korea, Samoa, Philippine Islands, and Hawaii. Guam, the U.S. Trust Territories of the Pacific or the Northern Marianas.

Hispanic Americans. Persons having origins from any of the Spanish-speaking peoples of México, Puerto Rico, Cuba, Central or South America, or the Caribbean Islands.

Native Americans. All persons having origins from the original peoples of North America and who are recognized as Native Americans by a tribe or tribal organization.

Subcontinent Asian Americans. All persons whose ancestors originated in India, Pakistan or Bangladesh.

Certification - A determination by the OMWBE that a for-profit business entity is a Minority Business Enterprise (MBE) and/or Women Business Enterprise (WBE).

Definitions

Ownership

The minority or woman ownership interest in the firm must be real, substantial and continuing and shall go beyond the pro forma ownership of the business as reflected in its ownership documents. The minority and women owners shall enjoy the customary incidents of ownership and shall share in the risks and profits commensurate with their ownership interest as demonstrated both by an examination of the substance and form of arrangements.

Control

Control will be exemplified by possession of the requisite knowledge and expertise to run the particular business. Control includes the authority to determine the direction of a business, including but not limited to capital investments and all other financial transactions; property acquisitions; day-to-day decisions; contract negotiations; legal matters; selection and hiring of officers, directors, and employees; operating responsibility; cost-control; income and dividend matters; and the rights of other shareholders or partners.

The minority and/or women owners must hold the highest officer position in their companies, example chief executive officer or president.

The minority and/or women must demonstrate that they possess the experience, expertise and knowledge to operate their particular types of business.

Expertise limited to office management, administration, or bookkeeping functions unrelated to the principal business activities of the company is insufficient to demonstrate control. Women and/or minority owners must also verify that they hold any licenses or certification required by the type of business in which they are engaged.

Definitions

Minority Business Enterprise (MBE) - A for profit business in which at least 51% of the beneficial ownership interest and control are held by a minority or minorities. In the case of a corporation, minorities must hold at least 51% of voting interest.

Minority & Women Business Enterprise (MWBE) - A for-profit business in which at least 51% of beneficial interest and control is held by minority women or by an equal combination of minorities and women. In the case of a corporation, women and minorities must also hold at least 51% of voting interest.

Women Business Enterprise (WBE) - A for-profit business in which at least 51% of beneficial interest and control is held by women. In the case of a corporation, women must also hold at least 51% of the voting interest.

Useful Business Function

A useful business function is one, which results in the provision of materials, supplies, equipment or services to consumers in the State. A business acting as a conduit to transfer funds to a non-minority business does not constitute a useful business function unless doing so is a normal industry practice.

Benefits of Certification

Current certified minority and/or women owned firms are eligible to be listed in the State of Delaware Directory of Minority and Women Owned Businesses which is circulated to all state and local government agencies.

Recertification

At the ends of three years from original certification date, firms must submit the recertification affidavit to remain actively visible in the State of Delaware's Minority and/or Women Business Enterprise database.

Eligibility

A minority and women owned business (sole-proprietorship, partnership, corporation or joint venture) must meet the following criteria:

- a) Belong to a minority group: African Americans, Asian/Pacific Americans, Hispanic Americans, Native Americans, and Subcontinent Asian Americans. *(Please reference above definitions)*
- b) At least 51 percent owned, controlled and actively managed by minority group members or by women.
- c) Serving a for profit business with "useful business functions." *(Please reference above definitions)*

Reasons for denial *(please note the below may include but not be limited to)*

- a) A business located in a state other than Delaware must first obtain state-level certification in its home state, if such certification is available. "Home state" is defined as the state the company's headquarters are located.
- b) All securities, which constitute ownership and/or control of a corporation for the purpose of establishing it as a MWBE, must be held directly by minorities or women. No securities held in trust, or by a guardian for a minor, shall be considered as held by a minority or women in determining the ownership or control of a corporation.
- c) If the business operations do not reflect the ownership shown on paper.

- d) Firm is not a for-profit business
- e) Firm has provided false or misleading information
- f) Control will not be deemed to exist in cases of simple majority or absentee ownership, or when a non-minority/non-female owner or employee of the firm is disproportionately responsible for its operation.
- g) The firm shall not be subject to any formal or informal restrictions through, for example through, by-laws provisions, partnership agreements, or charter requirements for cumulative voting rights or otherwise that prevents the minority and women owners, without the cooperation or vote of any owner who is not a minority or women for making a business decision of the firm.
- h) If the owners of the firm who are not minorities or women are disproportionately responsible for the operation of the firm, then the firm is not controlled by minorities and shall not be considered as MWBE within the meaning of the definition. Where the actual management of the firm is contracted out to individuals other than the owner, those person who have the ultimate power to hire and fire the managers, can, for the purpose of this
- i) The certification application was submitted incomplete.

How to Apply

- Applications and additional information are available by calling the Office of Minority and Women Business Enterprise at (302) 739-4206 or visiting the web site www.state.de.us/omwbe
- Complete an application for certification and provide required documentation (ethnic status of minority owner(s), financial records, on-going business activity, etc.)
- Provide access to its business facilities and key personnel for state certification on-site visit.

WHERE TO APPLY:

Submit completed applications to:
Office of Minority and Women Business Enterprise
Haslet Armory
122 William Penn Street
Dover, DE 19901

Frequently Asked Questions

Q: Does certification cost money?

A: No

Q: Are there any set asides for MWBEs?

A: No

Q: Does my certification expire?

A: At the end of three years from original certification date.

Q: Will I be notified of all procurement opportunities?

A: No, however, the OMWBE will continue to research bid opportunities and assist in your effort. We are consistently working on ways to improve communication but strongly encourage you to visit the respective resources.

Q: What is the best way to communicate with the OMWBE?

A: Email. Please check your email daily for procurement opportunities.

Q: Do I have to register with any other agency?

A: Yes. There are multiple agencies that have their own bidders list. Please check OMWBE's web site for each respective agency. For example, Government Support Services and the Department of Technology and Information have vendor registration processes.

State of Delaware Minority and/or Women Business Enterprise Application
All completed applications must be returned with the appropriate requested documents listed.

Please type or print clearly

OMWBE use only: Application Date:

Mail application to:
 Office of Women and Minority Business Enterprise
 Haslet Armory
 122 William Penn Street
 Dover, DE 19901

If you have any questions regarding the completion of this application, please contact us at (302) 739-4206.

**Note – This section must be filled out in its entirety for the application to be processed.
 Incomplete applications will not be processed.**

1. Business Name(s), Contact Information, Federal Employee Identification Number or Social Security Number(EIN/SSN)			
Legal Name of Firm:			
Doing Business As (If applicable):			
Federal E.IN or SSN:		E-Mail Address:	
Address line 1:			
Address line 2:			
City		State	Zip Code
Country			
Telephone Number:		Extension:	Fax Number:
Company Web Site Address:			
Corp <input type="checkbox"/>	LLC* <input type="checkbox"/>	S Corp <input type="checkbox"/>	Partnership <input type="checkbox"/>
LLP** <input type="checkbox"/>	Sole Proprietor <input type="checkbox"/>	Joint Venture <input type="checkbox"/>	
Date firm was established?			
Date firm began doing business (date of first contract or sale)			

* Limited Liability Corporation

** Limited Liability Partnership

2. Primary owner applicant information				
Name:		Title:		
Home Address:		City:	State:	Zip Code:
Country:				
Telephone Number:		Extension:	Fax Number:	
E-Mail Address:				
Date owner acquired controlling interest?				
Sex: <input type="checkbox"/> M <input type="checkbox"/> F		Ethnic Group:		
U.S. Citizen or Permanent Resident: <input type="checkbox"/> No <input type="checkbox"/> Yes				

3. Firm is applying as:			
Minority Business Enterprise		Women Business Enterprise	
<input type="checkbox"/> African American	<input type="checkbox"/> Asian American	<input type="checkbox"/> African American	<input type="checkbox"/> Asian American
<input type="checkbox"/> Hispanic American	<input type="checkbox"/> Native American	<input type="checkbox"/> Hispanic American	<input type="checkbox"/> Native American
<input type="checkbox"/> Subcontinent Asian	<input type="checkbox"/> Other	<input type="checkbox"/> Subcontinent Asian	<input type="checkbox"/> White American
		<input type="checkbox"/> Other	

4. Describe, in detail, what product(s) and/or services your business provides. Attach additional pages and/or the company's catalog or inventory list, if needed.

5. Five digit North American Industry Classification System (NAICS) Code(s):
(To assist you in determining your NAICS Code(s) go to www.census.gov/naics)

1.	2.	3.	4.	5.	6.
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6. Type of Business

<input type="checkbox"/> Building trade	<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Other
<input type="checkbox"/> Consultant	<input type="checkbox"/> Supplier	
<input type="checkbox"/> Generalized service	<input type="checkbox"/> Highway Construction	
<input type="checkbox"/> Licensed professional services		

7. Provide the following information for: 1) all business owners, 2) corporate directors (if incorporated), 3) officers, and 4) senior management. If more space is needed, attach additional pages.

Name	Title	Date Appointed	Gender	Ethnicity
Officers of the Company				
Board of Directors				

8. Is any owner or board member of the business, an owner or former owner of another firm engaged in the same or similar type of enterprise?

No Yes (If yes, identity below)

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9. Are there any written, oral, or implied agreements between persons associated in any manner with the firm concerning its ownership and/or operation? (check one) No Yes

10. Please list the gross receipts of last two years

(A) Year Ending:	Gross Receipts:
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(B) Year Ending:	Gross Receipts:
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11. Number of employees

Full time:

Part time:

Seasonal (approximate):

12. List names and titles of persons who perform the following functions. If more than one, indicate what percent each person handles.

	Name	Ethnicity	Gender
Financial Decisions			
Estimating & Bidding			
Negotiating & Contract Execution			
Personnel Management			
Field/Production Operations Supervisor			
Office Management			
Marketing/Sales			
Purchasing of Major Equipment			
Authorized to Sign Company Checks (for any purpose)			

16. Has this firm or other firm(s) owned by any of its current owners or officers ever been denied certification by the OMWBE or any other certifying entity (check one)? No; Yes *(If yes, provide the name of the certifying organization and the reason(s) given for denial, below. Attach copies of any relevant documents (letters, appeal documents, etc.).*

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17. Debarment

Is this company, or any other company owned in full or part by any of this company's owners and/or officers, currently debarred from doing business with the State of Delaware? No; Yes.

18. Is the Business certified as a M/W/BE with any other certifying agency? If yes, provide the name(s) of the certifying organization(s), below, and attach letters or other documents verifying such certification.

No Yes

Name	Date Certified	Expiration Date
a.		
b.		
c.		
d.		
e.		
f.		

19. How did you hear about the Office of Minority and Women Business Enterprise:

<input type="checkbox"/> OMWBE staff speak at an event sponsored by another organization	<input type="checkbox"/> OMWBE staff at a trade show or expo
<input type="checkbox"/> OMWBE's web site	<input type="checkbox"/> Materials published by OMWBE
<input type="checkbox"/> Referred by another organization	<input type="checkbox"/> Referred by the owner of an MBE or WBE
<input type="checkbox"/> Delaware state employee	<input type="checkbox"/> Other, please explain briefly:

Optional Questions

You are not required to answer the following questions and the answers will not affect your company's eligibility for certification. However, the answers will help OMWBE to identify business opportunities that may be suited to your company. Answers may be estimated; exact figures aren't necessary.

For all companies
How many years has your company been conducting business with you as owner?
How many contracts, subcontracts, and/or sales has your company completed during the last 12 months?
What is the largest contract, subcontract, or sale your company completed in the past 24 months?
Has your company done any business with government? <input type="checkbox"/> No; <input type="checkbox"/> Yes
If yes, what level of government (check all that apply): <input type="checkbox"/> Federal; <input type="checkbox"/> State; <input type="checkbox"/> Local
Has your company done any business with government in the State of Delaware? <input type="checkbox"/> No; <input type="checkbox"/> Yes
Number of government contracts, subcontracts, or sales completed (estimate):
For Construction-Related Companies Only (not including suppliers of construction materials)
What is your company's bonding capacity? \$ _____ (indicate "unknown" if you do not know)
What % of your business is direct contracting?
What % of your business is subcontracting?

State of Delaware Minority and/or Women Business Enterprise Affidavit

Hereafter, "the Business" refers to

_____ Business Name

I understand the illegal nature of receiving public or private funds or other property as a consequence of false representation as to the minority status of the business and do herein certify under penalty imposed by Delaware statutes that the information provided is correct and said information herein may be used for the purposes of certifying the business as a Minority and/or Women Business Enterprise. Any false representation will be grounds for denying certification or initiating decertification in the future.

I agree to make available for inspection to the MWBE office any such materials that may be required to substantiate the degree of minority and women ownership and control of the business. I agree to arrange for on-site inspections of the business' facilities in order to verify information provided in this document.

I agree to provide written information relative to any future change in ownership and/or management of the business to the MWBE office within two weeks of the occurrence of the change. I acknowledge that failure to timely submit required change of status documentation might result in the decertification of the business.

I understand that the certification expiration is three years following the initial date of certification. I further understand that the business must apply for recertification prior to the expiration.

_____ Type or Print Name of Owner

_____ Signature of Owner _____ Date

_____ Title

Subscribed and sworn to before me this _____ day of _____ a.d.

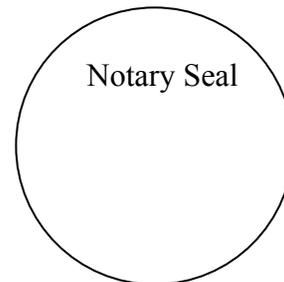
Month, Year

Signed _____ NOTARY PUBLIC IN AND FOR THE

County of _____

State _____

My Commission Expires _____ Date



Insert Date

Delaware MEP
400 Stanton-Christiana Road - Suite A-158
Newark, DE 19713

To Whom It May Concern:

Government Support Services currently has the following procurement opportunity available and would appreciate your efforts in notifying Delaware companies who may be interested in reviewing the contract specifications and submitting a bid.

1. Contract Description: Enter Contract Name
2. Contact Person: Insert Contract Officer's Name
Phone No. Enter Phone Number
3. Contract No. Enter Contract Number
4. Bid Deadline: Insert Bid Opening Date
5. Bid Opening Location: **Government Support Services, Contracting Section,
100 Enterprise Place, Suite 4, Dover, DE 19904. All bids must clearly
display the contract number on the sealed envelope.**

Sincerely,

Insert Contract Officer's Name
State Contract Procurement Officer