STATE OF DELAWARE



DELAWARE HEALTH AND SOCIAL SERVICES

DIVISION OF MANAGEMENT SERVICES

"DMS - Serving Those Who Serve Delaware"

SPECIFICATIONS AND CONTRACT DOCUMENTS NO. 7247

FOR

Mobile Dental Clinic Truck with 2 Operatories
Gross Vehicle Weight below 26,000 lbs.
(No CDL Required)
Lease to Buy

Required for Use By

Division of Public Health Bureau of Oral Health and Dental Services Mobile Dentistry Program 655 South Bay Road, Suite 218 Blue Hen Corporate Center Dover, Delaware 19901

DepositWAIVED**Performance Bond**WAIVED

Date Due: August 25, 2008

11:00A.M. Local Time

There will be a mandatory Pre-bid Meeting on Monday, August 4, 2008 at 1:30 PM for questions and answers only, at Delaware Health and Social Services Campus, Main Administration Bldg., Room 198, 1901 N. DuPont Hwy., New Castle, DE 19720.

Delaware Health and Social Services
Main Administration Building – South Loop
Division of Management Services
Procurement Branch
1901 N. DuPont Highway
New Castle, Delaware 19720

INVITATION TO BID # 7247

Sealed bids for a Mobile Dental Clinic Truck with 2 Operatories are requested by the DPH Bureau of Oral Health and Dental Services.

A mandatory Pre-bid Meeting will be held on **Monday, August 4, 2008 at 1:30 PM** for questions and answers only, at the Herman M. Holloway Sr. Health and Social Services Campus, Main Administration Bldg., Room 198, 1901 N. DuPont Hwy., New Castle, DE 19720.

Directions to the mandatory pre-bid meeting are available at:

www.dhss.delaware.gov/dhss/main/maps/holloway/campsmap.htm

<u>PLEASE NOTE:</u> All bidders who wish to bid <u>must</u> be present at the mandatory pre-bid meeting. No bids will be accepted from bidders who either did not attend the mandatory pre-bid meeting or who are more than fifteen (15) minutes late.

In the event that state offices are closed on August 4, 2008 due to weather-related or other emergencies, the pre-bid meeting will be cancelled. The pre-bid meeting will be reposted at a later date on the website.

Sealed bids will be accepted at:

Delaware Health & Social Services
Main Administration Building - South Loop
Division of Management Services, Procurement (Second Floor) - Room # 262
1901 N. DuPont Highway
New Castle, Delaware 19720

until 11:00 A.M. local time on August 25, 2008 at which time they will be opened and recorded.

Please review the DHSS General Rules and Conditions and the DHSS General Requirements, which appear on the DHSS website.

The following forms must be included with your bid:

- 1.) Bidder Signature Form
- 2.) Vendor Certification Form
- 3.) Office of Minority and Women Business Enterprise Form

All of these documents can be accessed on the DHSS website:

http://www.dhss.delaware.gov/dhss/rfp/dhssrfp.htm

<u>PLEASE NOTE:</u> The following paragraphs from the General Requirements hereby become part of the General Terms and Conditions of this bid.

1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 16.

NOTE TO VENDORS

- Only one bid will be accepted by a bidder.
- Your bid <u>must be signed</u> and all information on the signature page completed. If you do not intend to submit a bid, send an e-mail to the buyer stating that you do not intend to bid on this contract and would like to remain on the mailing list.
- Include a detailed response to the specifications.
- Bid totals <u>must</u> include delivery, installation, warranty, service agreement, training, and/or upgrades or **your bid will not be accepted.**
- Agency will review all bid proposals and evaluate same.
- This bid may be extended up to three (3) years.

DELIVERY INSTRUCTIONS

- Your bid <u>must</u> have on the outside envelope the DHSS four (4) digit ITB contract number. IF THIS IS OMITTED YOUR BID WILL IMMEDIATELY BE REJECTED.
- Under no circumstances will a bid be accepted that is late, delivered to the wrong building, signed for by a person other than a member of the procurement staff. To ensure that your bid is in the procurement office on the date and time specified, there are three (3) recommended methods of delivering bid proposals:
 - Hand Deliver
 - Federal Express
 - o UPS

FOR FURTHER BID INFORMATION PLEASE CONTACT:

Buyer: Sylvia T. Adams

Delaware Health and Social Services

DMS – Procurement Branch

Main Bldg., 2nd Floor, Room 262

1901 N. DuPont Highway New Castle, DE 19720

(302) 255-9297

sylvia.adams@state.de.us

ADDITIONAL TERMS AND CONDITIONS

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. This may be accomplished by written purchase order, telephone, fax or computer on-line systems.

Billing:

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

Payment:

The agencies or school districts involved will authorize and process for payment each invoice within thirty (30) days after the date of receipt. 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.

Product Substitution:

All items delivered during the life of the contract shall be of the same type and manufacture as specified unless specific approval is given by DHSS-DMS-Procurement to do otherwise. Substitutions may require the submission of written specifications and product evaluation prior to any approvals being granted.

Hold Harmless:

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

Force Majeure:

Neither the contractor 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.

ITEM DESCRIPTION: Mobile Dental Clinic Truck with 2 Operatories, Total Length 37'-40'. Gross Vehicle Weight below 26,000 lbs (No CDL Required).

SPECIFICATION 1: Vehicle Cab and Chassis:

- a. Year: 2008
- b. Engine: Minimum: 6.0LV8 Diesel Engine Maximum: 6.6L V8 Diesel Engine
- c. Wheelbase: 300" minimum 308" maximum
- d. Brakes: Power 4 Wheel Disc Brakes 4 Wheel Anti-Lock Brake System (ABS)
- e. Power Train: Heavy Duty
- f. Tires: 7; including duals on vehicle rear, spare tire; minimum 22.5" x 7.0"- maximum 22.5" x 8.25". In compliance with F.M.V.S.S.
- g. Color: Gloss White
- h. Suspension: Air Ride
- i. Shock Absorbers: Heavy Duty Gas Shock Absorbers
- j. Front axle: Heavy Duty Minimum 9000 lbs. Maximum 12,000 lbs.
- k. Rear Axle: Heavy Duty Minimum 13,500 lbs. Maximum 19,500 lbs.
- 1. Engine Cooling System: Heavy Duty
- m. Battery: Heavy Duty Minimum: 3 year warranty Maximum: Lifetime
- n. Alternator: 150 AMP (Heavy Duty) or Most Adequate for Vehicle
- Transmission: Automatic, Heavy Duty size and torque adequately compatible with Engine Horsepower
- p. Front Bumper: Standard Heavy Duty
- q. Cab: Standard Cut-A-Way Vehicle
- r. Fuel Tank: Minimum: Minimum 60 gallons- Maximum 80 gallons
- s. Climate Control: Manual for air conditioning and heat

SPECIFICATION 1: Vehicle Cab and Chassis (Continued):

- t. Steering Column: Tilt
- u. Power Steering
- v. Driver/Passenger Air bags
- w. Floor Covering: Standard for a Cut-A-Way Vehicle Cab
- x. Lighting: Overhead interior dome light
- y. Windows: Minimum: Manual Maximum: Power
- z. Door Locks: Content Theft Alarm with Minimum: Manual key opening-Maximum: remote keyless entry
- aa. Seats: Bucket Vinyl (black) (Color is substitutable) with F.M.V.S.S. approved seatbelts
- bb. Keys: Electronically coded and matched to vehicle, 3 Sets
- cc. Power Outlets: 2 Minimum
- dd. Radio: AM/FM Clock
- ee. Video Camera for Backing Up Standard (Black and White)
- ff. Vehicle jack with lug wrench

SPECIFICATIONS 2: Dental Clinic Cabin:

- a. Cabin Construction Material: Manufactured from Aluminum, Plywood and Fiberglass or Equivalent
- b. Cabin Dimensions: Approximately 31' L 8' W 7' H
- c. Personnel/Patient Entrance Door: 30" Door with window with exterior manual key opening
- d. Personnel Entrance/Rear Door (Emergency Exit) with window: 30" Door
- e. Wheel Chair Access Entrance Door with window American with Disabilities Act (ADA) approved standard wheelchair lift accessible door.
- f. Wheel Chair Lift Dimensions Approximately 4' W 1' Deep 5' Tall

SPECIFICATIONS 2: Dental Clinic Cabin (Continued):

- g. Personnel Pass Through from Vehicle Driver area to Cabin Approximately 5' W and 4' Tall,
 Minimum Curtain Maximum Door
- h. Clinic Cabin Insulation: Full Insulation in Ceilings and Floors
- i. Clinic Cabin Floor Covering Hospital/Commercial Grade: Vinyl Material
- j. Black Water Tank: Minimum 20 Gallon Maximum 45 Gallon
- k. Alarm System: Clinic Cabin will include a content theft alarm system integrated with Cab/Chassis content theft alarm.

Waiting Room

- 1. Waiting Room Dimensions: Approximately 7' L 8' W 7' H
- m. Waiting Room Electrical Outlets 3
- n. Waiting Room Overhead Lights 3
- o. Waiting Room Desk with chair (strapped for mobile use) Dimensions –

 Approximately 45" L X 24" W X 18" Deep
- p. Waiting Room Bench Seating: Accommodates Up 3 adult patients –Approximately 48" L X 20" Deep X 17"H
- q. Waiting Room Window with Screen: Approximately 20" W X 30" H
- r. Appropriate Wiring for Computer Connectivity of (2) monitors for (2) rear treatment consoles and (1) desktop/laptop

Rear Dental Operatory

- s. Rear Operatory Dimensions: Approximately 13' L 8' W 7' H
- t. Rear Operatory Overhead Lights 4
- u. Rear Operatory Electrical Outlets 5

Rear Dental Operatory (Continued):

- v. Rear Operatory Storage Area Dimensions (Overhead) 1 anti-rattle cabinet:

 Approximately 4' L 1' Deep 1' H
- w. 1 Sink: Approximately 44" L X 20" Deep X 36" Tall with Counter Top with 3 Drawers for Storage Below. Drawer Dimensions: 3 Approximately 12" W X 18" Deep
- x. Grey Water Tank Minimum 15 Gallon Maximum 30 Gallon
- y. Rear Operatory Window with Screen: 20" W X 30" H
- Z. One (1) Track Mounted 15" Flat Screen Television/Monitor in Rear Operatory
 (Above Head of Patient Chair) Wired to DVD/VCR located in overhead compartment of Front Cabin
- aa. One A-dec 6300 Chair Mounted Light or One Midmark Chair Mounted Light or chair mounted light that is equivalent in quality and operational use.
- bb. One Soniclean M150 Recessed Ultrasonic Cleaner with Basket or ultrasonic cleaner that is equivalent in quality and operational use.
- cc. One A-dec 500 Dental Chair or One Midmark UltraComfort Dental Chair or dental chair that is equivalent in quality and operational use (Color TBD).
- dd. One A-dec rear instrument delivery systems w/ A-dec 500 at 12'o'clock or One Midmark dentist and assistant's instrument delivery system (153706-003CM), side or floor mounted; or instrument delivery system that is equivalent in quality and operational use.
- ee. One A-dec 5562 12 o'clock treatment cabinet or One Midmark freestanding flex workstation column (DM-FWC001) or cabinet/column equivalent in quality/operational use. Must be wired for (2) computer monitors for installation at a later date.
- ff. One Belmont X-Ray Unit with 20" Arm or X-Ray Unit that is equivalent in quality/operational use.

Rear Dental Operatory (Continued):

gg. Digital Panoramic System Wiring and Reserved Space for Separate Installation - Cat 6 wiring for panoramic system connectivity. Wiring must be compatible with most brands of portable digital panoramic systems that are or will be available on the market in the near future. The wiring must be compatible with the select model and make of the panoramic system and the vehicle space reserved for future installation of the panoramic system must be suitable for the system's dimensions. Wiring must be installed in a manner that it will not interfere with the daily clinical activities that will take place within the vehicle before the digital panoramic system is installed.

Front Dental Operatory:

- hh. Front Operatory Dimensions: Approximately 10' L 8' W 7' H
- ii. Rear Operatory Overhead Lights 4
- ii. Rear Operatory Electrical Outlets 6
- kk. Front Operatory Above Storage Area Dimensions 1 anti-rattle cabinet:

 Approximately 4' L 1' Deep 1' H
- II. 1 Sink: Approximately 41" L X 20" Deep X 36" Tall with Counter Top with 3 Drawers for Storage Below. Drawer Dimensions: 3 Approximately 12" W X 18" Deep

mm.Grey Water Tank – Minimum 20 Gallon – Maximum 40 Gallon

- nn. Countertop with Dry Vac Below Dimensions: Approximately 3' L 2' Deep 3' Tall
- oo. Front Operatory Above Storage Dimensions 1 anti-rattle cabinetry:

 Approximately 3' L by 1' Deep 1' Tall
- pp. Front Operatory Window with Screen: 20" W X 30" H
- qq. Power Generation: One (1) 7.5 KW Commercial Gas Generator or Diesel Generator
- rr. One (1) Water Heater Standard for Size and Operation of Vehicle
- ss. Clinic Climate Control System: HVAC System

Front Dental Operatory (Continued):

- tt. One (1) Track Mounted 15" Flat Screen Television/Monitor in Front Operatory

 (Above Head of Patient Chair) wired to DVD/VCR located in overhead compartment in

 Front Cabin
- uu. Dimensions of Refrigerator Stored above Vehicle Cab: Approximately 20" Deep X 18" W X 21" High
- vv. DVD/VCR above Vehicle Cab wired to 2 TV's in each (2) Operatory.
- ww. One A-dec 6300 Chair Mounted Light or One Midmark Chair Mounted Light or chair mounted light that is equivalent in quality and operational use.
- xx. One Soniclean M150 Recessed Ultrasonic Cleaner with Basket or ultrasonic cleaner that is equivalent in quality and operational use.
- yy. Midmark Ultraclave M-9 or an ultraclave equivalent in quality and operational use
- zz. One A-dec 500 Dental Chair or One Midmark UltraComfort Dental Chair or dental chair that is equivalent in quality and operational use (Color TBD).
- aaa. One A-dec 500 Dental Chair or One Midmark UltraComfort Dental Chair or dental chair that is equivalent in quality and operational use (Color TBD).
- bbb. One A-dec rear instrument delivery systems w/ A-dec 500 at 12'o'clock or One Midmark dentist and assistant's instrument delivery system (153706-003CM), side or floor mounted; or instrument delivery system that is equivalent in quality and operational use.
- ccc. One A-dec 5562 12 o'clock treatment cabinet or One Midmark freestanding flex workstation column (DM-FWC001) or cabinet/column equivalent in quality/operational use. Must be wired for (2) computer monitors for installation at a later date.
- ddd. One Belmont X-Ray Unit with 20" Arm or X-Ray Unit that is equivalent in quality/operational use.
- eee. One Vac Pac Assistant Instrument most suitable for optimal use with other equipment

Front Dental Operatory (Continued):

fff. One Tech West Dry Vacuum Pump (2 User Simultaneously) or Dry Vacuum Pump that is equivalent in quality and operational use.

ggg. Fresh Water Tank: Minimum 30 Gallon - Maximum 55 Gallon

SPECIAL CRITERIA

- a. Vehicle will be equipped with an AC/DC battery pack system that will allow for appliances to continue running when vehicle engine is not operational, system will not draw power from engine starting batteries and cut off switch will be mounted in the driver's compartment. Battery pack system will include a manual cut off switch also mounted in the driver's compartment.
- b. Vehicle will comply with all applicable Federal Safety Standards
 - 1. Fire Extinguisher 1
 - 2. Smoke Detector 2
 - 3. Carbon Monoxide Detector 1
 - 4. All wiring conforms to applicable safety standards and codes
- c. Vehicle will conform to the requirements of the Delaware Motor Vehicle Code.
- d. Vehicle will be equipped with a land line power supply plug in and 50' electric line to plug vehicle into a 125 volt power supply during hours of non operation if necessary.
- e. The company's business reputation and experience at similar projects constructing a comparable vehicle utilizing the equipment that is within the specifications will be considered. You must provide 3 references of customers who are currently operating a dental mobile vehicle constructed by your company.

f. DELIVERY

- 1. Vehicle must be delivered on DHSS property prior to payment and lease being booked. The lease will be obtained outside of this bid.
- 2. Vehicle will be delivered to the Division of Public Health at a location to be determined in the City of Dover, Delaware 19901. Vendor will contact the Division of Public Health, Bureau of Oral Health and Dental Services, State Dental Director (Dr. Greg McClure) at 302-741-2960 seventy-two (72) hours in advance of delivery. Vehicle delivery will occur Monday through Friday between the hours of 8:30 a.m. and 3:30 p.m. In the event that the State Dental Director is not contactable, the following Point Of Contact will be notified of the date time of delivery: Isaac Daniels, Management Analyst II at 302-741-2966.
- 3. Vehicle will be clean, lubricated and service ready for immediate use upon delivery.
- 4. Vehicle will be protected to 20 degrees Fahrenheit below zero with permanent antifreeze upon delivery.

Special Criteria (Continued)

- 5. Vehicle fuel tank will contain a minimum of 20 gallons of fuel upon delivery.
- 6. Vehicle will include all operator manuals for the vehicle cab, cabin, appliances, and installed dental equipment upon delivery.
- 7. Vehicle will include upon delivery the proper form(s) to apply for a Delaware Title and License including the original Manufacturers Statement of Origin, Mileage Disclosure Statement signed by the vendor and notarized. All title papers will be properly executed and the application for title will indicate State of Delaware, Division of Public Health 417 Federal Street, Dover, Delaware 19901.
- 8. Mileage upon delivery will not exceed 250 miles, (waiver can be obtained provided mileage is adjusted for OEM warranty).

g. WARRANTY:

- 1. Vehicle cab and chassis:
- a. Warranted for a period of three (3) years and unlimited mileage for parts and labor to correct problems with materials or workmanship; warranty will include but is not limited to free towing to the nearest Original Equipment Manufacturer (OEM) dealership, no deductible on warranty repairs or labor. Warranty does not include normal maintenance i.e. oil changes and tire rotation. Warranty will include protection on all body sheet-metal components against rust and corrosion for a period of five (5) years, unlimited mileage.
- b. Power train warranty will be for a minimum of three (3) years or 100,000 at no additional cost.
- c. Transmission 3 year, unlimited mileage
- d. Diesel Engine 5 year, 100,000 miles. Which ever comes first.

2. Clinic Cabin:

Will be warranted for a minimum of thirty six (36) months – warranty will cover all manufacturer defects in material and workmanship that occur under normal use. Normal use being defined as the daily operation of a mobile clinic in an urban and rural setting providing preventive and restorative dental services. All appliances and cabinetry installed in the unit will be warranted for a period of thirty six (36) months through their respective manufacturer. The winning vendor of the Mobile Dental Clinic will provide the individual appliance manufacturer warranty cards upon delivery. The Program will be responsible for completing and forwarding the warranty cards to the respective manufacturers to activate warranties.

3. Winning vendor will identify authorized warranty repair dealers with in a one hundred fifty (150) mile radius of Dover Delaware and will coordinate all warranty repairs to vehicle and its subcomponents to include transportation of vehicle to and from repair site.

Special Criteria (Continued):

h. TRAINING:

Successful vendor will provide a minimum of six hours new equipment training to at least six (6) but no more than ten (10) Division of Public Health employees and/or their designees within eight working days of delivery of the vehicle. Training will include but is not limited to preventative, operator's maintenance; vehicle, appliance, subsystem maintenance and operation, as well as dental equipment operation.

i. DIAGRAM:

Each bidder submitting a bid for the Mobile Dental Clinic will submit a diagram of their proposed vehicle to include all measurements dimensions and the location of appliances and special equipment listed in the above specifications.

REMARK: PLEASE ADHERE TO THE ABOVE SPECIFICATIONS AS LISTED IN THIS COMPETITIVE SEALED BID. DEVIATIONS FROM THESE SPECIFICATIONS WILL NOT BE ACCEPTED.

TOTAL COST PAGE

(Must be all inclusive)

Vendor Name:	
Product(s) Cost	\$
Delivery Cost:	\$
Installation:	\$
Service agreement:	\$
Training:	\$
Warranty:	\$
Upgrades:	\$
Other:	\$
Total Cost:	\$

All Bidders:

Please include 2 Originals and 4 Copies of each of your bids. This should include any pamphlets, or additional materials you want to be taken for consideration.