

COLUMBUS CONSOLIDATED GOVERNMENT ANNUAL CONTRACT ROUTING MEMORANDUM

DATE: May 11, 2020

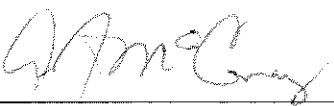
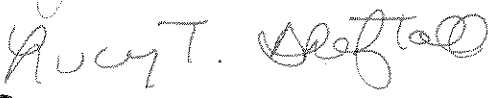
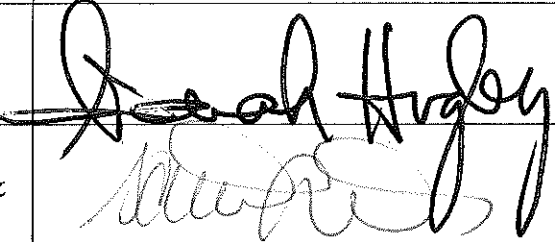

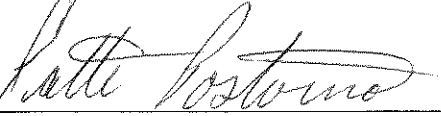
SUBJECT: Breathing Apparatus (Annual Contract); RFB No. 20-0041

FROM: Patti Postorino, Purchasing Division

Please route for appropriate signatures, copies of the attached contract with Fireline, Inc. (Contractor). The firm will provide the Columbus Fire and EMS Department with self-contained breathing apparatus with mask-mounted regulators, stealth cylinders, and replacement parts and other related services. The term of this contract shall be for two (2) years with the option to renew for three (3) additional twelve-month periods. Contract renewal is contingent upon the mutual agreement of the City and the Contractor. Funds are budgeted each fiscal year for this on-going expense:

Fire and EMS Department: LOST-Public Safety-Fire & EMS - Public Safety-LOST - Other Equipment; 0102-410-9900-LOST-7762; and General Fund – Fire & EMS – Logistics/Support – Operating Materials 0101-410-9900-LOGI-6728.

Council authorized this contract per Resolution No. 104-20, dated April 28, 2020 (copy is attached).

Signatories	Signatures Required (<i>No initials please</i>)	Date
Purchasing Division Manager Signature of Approval		5/11/20
City Attorney: Signature required on Contracts		5/15/20
City Manager: Signature required on Contracts		5/15/2020
Clerk of Council: Signature Required on Contracts & Attest/Seal		5-20-2020
Buyer: Process / Distribute		05/20/2020

After all signatures have been applied, please contact Purchasing Division (ext - 3070) for distribution.

CONTRACT

THIS CONTRACT, executed this 20th day of May 2020, by and between the **Consolidated Government of Columbus, Georgia**, hereinafter called the "City", and **Fireline, Inc.**, hereinafter called the "Contractor".

WITNESSETH:

That in consideration of the mutual covenants, obligations, and terms set-forth in the attached proposal and specifications, the parties hereby agree as follows:

1. That the Contractor met all proposal requirements and was evaluated most responsive for providing **Breathing Apparatus (Annual Contract)**, per RFB No. 20-0041, and was awarded the Contract by Columbus City Council on Tuesday, April 28, 2020, Resolution No. 104-20, for the contract term of two years, beginning May 1, 2020 through April 30, 2022, for furnishing the same in accordance with the specifications prepared by the City and the proposal of the Contractor.

2. The Contractor will, at its own cost and expense, furnish all tools, materials and labor required to be furnished, provide all related services required, and meet all other requirements or conditions imposed, all strictly in accordance with the City's Business Requirements, the City's Request for Bids, dated January 14, 2020 (and all addenda thereto), the Contractor's bid dated February 12, 2020 and the proposal clarification documents which are attached hereto as exhibits "A", "B", "C" and "D" respectively, and which are by reference made a part hereof to the same extent as if fully set out herein.

3. On the faithful performance of this Contract by the Contractor, the City will pay the Contractor in accordance with the terms and on the conditions stated in this Contract and the exhibits attached to and by reference made a part hereof.

FORM 3**CONTRACT SIGNATURE PAGE
BREATHING APPARATUS (ANNUAL CONTRACT)
RFB No. 20-0041**

THE UNDERSIGNED HEREBY DECLARES THAT HE HAS/THEY HAVE CAREFULLY EXAMINED THE SPECIFICATIONS HEREIN REFERRED TO AND WILL PROVIDE ALL EQUIPMENT, TERMS AND SERVICES TO THE CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA.

Hollye McDonel
Witness as to the signing of the contract

Hien Nguyen 3.2.2020
Signature of Authorized Representative /Date

William Rogers
Witness as to the signing of the contract

HIEN NGUYEN
Print Name and Title of Signatory

(Corporate seal, if applicable)

FireLine, Inc.
Company Name

Company Ordering Address**Company Payment Address**

125 Patrick Industrial Lane
Winder, GA 30680

125 Patrick Industrial Lane
Winder, GA 30680

Contact Hien Nguyen

Contact Hollye McDonel

Email _____

Email Salesinfo@firelineinc.com

Telephone 770.868.4448

Telephone 770.868.4448

Fax 770.868.4455

Fax 770.868.4455

CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA

Accepted this 15th day of May 2020

APPROVED AS TO LEGAL FORM:

Isalah Hugley
Isalah Hugley, City Manager

Clifton C. Fay Assistant City Attorney
Clifton C. Fay, City Attorney

ATTEST:

EXECUTION AUTHORIZED

Sandra T. Davis
Sandra T. Davis, Clerk of Council

By Resolution No. 104-20
Sandra T. Davis
Clerk of Council

[Grab your reader's attention with a great quote from the document or use this space to emphasize a key point. (To place this text box anywhere on the page, just drag it.)

RESOLUTION

NO. 104-20

A RESOLUTION AUTHORIZING THE ANNUAL CONTRACT WITH FIRELINE, INC. (WINDER, GA) FOR THE PURCHASE OF MSA BREATHING APPARATUS, ON AN "AS NEEDED" BASIS, FOR THE ESTIMATED AMOUNT OF \$238,350.00; ONE (1) POSICHECK III YEARLY CALIBRATION IN THE AMOUNT OF \$1,200.00; ACCESSORIES AND REPAIR PARTS (AS NEEDED) IN THE AMOUNT OF \$6,845.00; AND SPARE MASKS (AS NEEDED) IN THE AMOUNT OF \$13,200.00. THE FIRE AND EMS DEPARTMENT ANTICIPATES SPENDING APPROXIMATELY \$15,000.00 ANNUALLY BASED ON PRIOR YEARS' USAGE.

WHEREAS, this equipment will be used by the Fire & EMS Department personnel when entering burning structures; and,

WHEREAS, the term of contract shall be for two (2) years, with option to renew for three (3) additional twelve (12) month periods. Contract renewal is contingent upon the mutual agreement of the City and the Contractor.

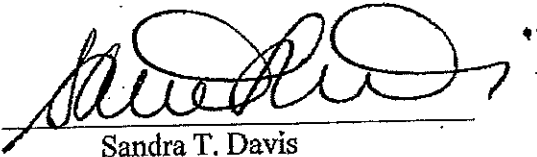
NOW, THEREFORE, THE COUNCIL OF COLUMBUS, GEORGIA, HEREBY RESOLVES AS FOLLOWS:

That the City Manager is hereby authorized to execute an annual contract with Fireline, Inc. (Winder, GA) for the purchase of MSA breathing apparatus, on an "as needed" basis, for the estimated contract value of \$238,350.00; one (1) Posichack III Yearly Calibration in the amount of \$1,200.00; Accessories and Repair Parts (as needed) in the amount of \$6,845.00; and Spare Masks (as needed) in the amount of \$13,200.00. Funds are budgeted each fiscal year for this ongoing expense: LOST-Public Safety- Fire & EMS – Public Safety-LOST – Other Equipment; 0102-410-9900-LOST-7762; and General Fund – Fire & EMS – Logistics/Support – Operating Materials; 0101-410-9900-LOGI-6728.

Introduced at a regular meeting of the Council of Columbus, Georgia, held the 28th day of April, 2020 and adopted at said meeting by the affirmative vote of ten members of said Council.

Councilor Allen	voting	<u>YES</u>
Councilor Barnes	voting	<u>YES</u>
Councilor Crabb	voting	<u>YES</u>
Councilor Davis	voting	<u>YES</u>
Councilor Garrett	voting	<u>YES</u>
Councilor House	voting	<u>YES</u>
Councilor Huff	voting	<u>YES</u>
Councilor Thomas	voting	<u>YES</u>
Councilor Thompson	voting	<u>YES</u>
Councilor Woodson	voting	<u>YES</u>

Resolution No. 104-20

A stylized, cursive handwritten signature in black ink, appearing to read 'Sandra Davis'.

Sandra T. Davis
Clerk of Council

A cursive handwritten signature in black ink, appearing to read 'B. H. Henderson III'.

B. H. "Skip" Henderson, III
Mayor

EXHIBIT A

*Columbus Consolidated Government
Breathing Apparatus (Annual Contract)*

RFB No. 20-0041

Business Requirements



FIREINC-01

DDINGLER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/11/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brand & Britt Insurance Agency 20 Grayson New Hope Rd. Suite A Grayson, GA 30017	CONTACT NAME: Deanea Dingler	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
INSURED Fireline, Inc. 725 Patrick Industrial Lane Winder, GA 30680	E-MAIL ADDRESS: ddingler@brandandbritt.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A : Utica National Assurance Company	NAIC # 10687
	INSURER B : Utica Mutual Insurance Company	25976
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			5056488	5/24/2019	5/24/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			5156724	5/24/2019	5/24/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N N/A If yes, describe under DESCRIPTION OF OPERATIONS below			5044793	5/24/2019	5/24/2020	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Garage & Dealers			5156724	5/24/2019	5/24/2020	Dealer's Blanket 2,500,000
B	Business Auto			5156724	5/24/2019	5/24/2020	Limit 2,500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
"RFB No. 20-0041 Breathing Apparatus (Annual Contract)"

CERTIFICATE HOLDER

CANCELLATION

Columbus Consolidated Government, Purchasing Division
P O Box 1340
Columbus, GA 31902-1340

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Deanea Dingler

FORM 5

Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service	Request for Taxpayer Identification Number and Certification ▶ Go to www.irs.gov/FormW9 for instructions and the latest information.	Give Form to the requester. Do not send to the IRS.
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Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Fireline Inc</div>	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ </div> <div> <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Other (see instructions) ▶ </div> </div> <p style="font-size: 0.8em;">Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p>	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) See instructions. <div style="text-align: center; font-family: cursive; font-size: 1.2em;">725 Patrick Ind. Lane</div>	Requester's name and address (optional)
	6 City, state, and ZIP code <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Winder, GA 30680</div>	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later. Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.	
Social security number <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	or Employer identification number <div style="border: 1px solid black; padding: 2px; font-family: cursive; font-size: 1.2em;">58-2171297</div>

Part II Certification Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and 3. I am a U.S. citizen or other U.S. person (defined below); and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.	
Sign Here	Signature of U.S. person ▶ <div style="font-family: cursive; font-size: 1.2em;">Joy H. Hines</div>
	Date ▶ <div style="font-family: cursive; font-size: 1.2em;">2/6/2020</div>

General Instructions Section references are to the Internal Revenue Code unless otherwise noted. Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9 . Purpose of Form An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following. • Form 1099-INT (interest earned or paid)	• Form 1099-DIV (dividends, including those from stocks or mutual funds) • Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) • Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) • Form 1099-S (proceeds from real estate transactions) • Form 1099-K (merchant card and third party network transactions) • Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) • Form 1099-C (canceled debt) • Form 1099-A (acquisition or abandonment of secured property) Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN. If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.
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Search by TIN

Check for imported payees with non-matching TIN data and verify new payees

TIN Matching allows you to verify your Payee data against the IRS TIN Matching database to verify if you r

Sovos can take care of your mismatched TINs & B-Notices

Sovos offers the ability to automatically mail the appropriate forms to your mismatched payees and request corrected information. The responses come directly to you, and the W-9/B-Notice solicitations are saved for your reference in File Manager. Depending on your subscription, additional fees may apply.

[Print & Mail W-9 Solicitations](#)

[Print & Mail B-Notices](#)

The W9 Solicitation button has been disabled as you have already sent your solicitations.

Mismatched I

TIN

<

Individual TIN Lookup

Verify individual Payee Social Security and Employer ID numbers.

Name:

TIN:

[Verify Payee](#)

TIN Status: PASS

OFAC Check: PASS

DMF Check: PASS

[Back to Home](#)


BARROW COUNTY
Georgia
Economic and Community Development

 30 N. Broad Street
 Winder, GA 30680
 Occupational Tax Certificate
 2020

 License Number
 520

Business Name: FIRELINE INC

Mailing Address: 725 PATRICK INDUSTRIAL LN
 WINDER, GA 30680

Phone: 770-868-4448

Business Location: 725 PATRICK INDUSTRIAL LN WINDER GA 30680

Issue Date: 11/07/2019

Expires: 12/31/2020

Only valid at this location and when conforms to Barrow County Ordinances. This is to certify that the person or firm named herein has paid into my hands minimum payment of occupational tax as set out herein and benefit of the county aforesaid, and is licensed to engage in the business listed on this certificate.

EXEMPT YES / NO

N

E-VERIFY#

112687

Category: SERVICE ESTABLISHMENT EQUIPMEN

Type: FIREFIGHTING EQUIPMENT ,SUPPLI

NAICS: 423850

Total Received: 395.00

POST IN A CONSPICUOUS PLACE

THIS LICENSE IS NOT TRANSFERABLE

MLICV

License Copy


BARROW COUNTY
Georgia
Economic and Community Development

 30 N. Broad Street
 Winder, GA 30680

 License Number
 520

Category: SERVICE ESTABLISHMENT EQUIPMEN

Type: FIREFIGHTING EQUIPMENT ,SUPPLI

NAICS: 423850

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EXEMPT YES / NO

N

E-VERIFY#

112687

Business Name: FIRELINE INC

Mailing Address: 725 PATRICK INDUSTRIAL LN
 WINDER, GA 30680

Phone: 770-868-4448

Total Received: 395.00

EXHIBIT B

*Columbus Consolidated Government
Breathing Apparatus (Annual Contract)*

RFB No. 20-0041

Request for Bids

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340
706-225-4087, Fax 706-225-3033
www.columbusga.org

Date: January 14, 2020

REQUEST FOR BIDS: RFB No. 20-0041	Qualified vendors are invited to submit sealed bids, subject to conditions and instructions as specified for the furnishing of: BREATHING APPARATUS (ANNUAL CONTRACT)
GENERAL SCOPE	Provide the Columbus Fire and EMS Department with self-contained breathing apparatus with mask-mounted regulators, stealth cylinders, and replacement parts and other related services. The contract term will be for two years with the option to renew for three additional twelve-month periods.
DUE DATE	FEBRUARY 12, 2020 - 2:30 PM (Eastern) Bids must be received and date/time stamped on or before the due date by the Finance Department/Purchasing Division, 5th Floor - Government Center, 100 10th St, Columbus, GA. Bids will be opened during the 3:00 p.m. hour in the Conference Room of the Purchasing Division. Bidders are not required, but are invited, to attend the bid opening.
ADDENDA	<u>IMPORTANT INFORMATION</u> Any and all addenda will be posted on the Purchasing Division's web page, at https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm . It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a quote.
"NO BID" RESPONSE	Refer to the form on page 3 if you are not interested in this invitation.

Andrea J. McCorvey
Purchasing Division Manager



IMPORTANT INFORMATION

e-Notification

The City uses the Georgia Procurement Registry e-notification system. You must register with the Team Georgia Market Place/Georgia Procurement Registry to receive future procurement notifications via <http://doas.ga.gov/state-purchasing/suppliers/getting-started-as-a-supplier>.

If you have any questions or encounter any problems while registering, please contact the Team Georgia Marketplace Procurement Helpdesk:

Telephone: 404-657-6000

Fax: 404-657-8444

Email: procurementhelp@doas.ga.gov

STATEMENT OF "NO BID"

Notify the Purchasing Division if you do not intend to submit a bid:

Email: BidOpportunities@ColumbusGA.org
Fax: 706-225-3033
Attn: Patti Postorino
Buyer

We, the undersigned decline to bid on your RFB NO. 20-0041 for BREATHING APPARATUS (ANNUAL CONTRACT) for the following reason(s):

- ☐ Specifications too "tight", i.e. geared toward one brand or manufacturer only (explain below)
- ☐ There is insufficient time to respond to the Invitation for Bids.
- ☐ We do not offer this product or service.
- ☐ We are unable to meet specifications.
- ☐ We are unable to meet bond requirements.
- ☐ Specifications are unclear (explain below).
- ☐ We are unable to meet insurance requirements.
- ☐ Other (specify below)

Comments: _____

COMPANY NAME: _____

AGENT: _____

DATE: _____

EMAIL: _____

GENERAL PROVISIONS

THESE GENERAL PROVISIONS SHALL BE DEEMED AS PART OF THE BID SPECIFICATIONS. The provisions of the Procurement Ordinance for the Consolidated Government of Columbus, Georgia as adopted and amended by Council shall apply to all invitations for bids and award of all contracts and is specifically incorporated herein by this reference. A copy of the ordinance is on file in the Purchasing Division.

1. TERM "CITY." The term "City" as used throughout these documents will mean Consolidated Government of Columbus, GA.

2. PREPARATION OF FORM. Bid proposals shall be submitted on the forms provided by the City. All figures must be written in ink or typewritten. Figures written in pencil or erasures are not acceptable. However, mistakes may be crossed out, corrections inserted adjacent thereto, initialed in ink by the person signing the proposal. If there are discrepancies between unit prices quoted and extensions, the unit price will prevail. Failure to properly sign forms, in ink, will render bid incomplete.

3. EXECUTION OF THE BID PROPOSAL. Execution of the bid proposal will indicate the bidder is familiar and in compliance with all local laws, regulations, ordinances, site inspections, licenses, dray tags, etc.

4. BID SUBMISSION. Bids must be submitted in a sealed envelope or package. The exterior of the envelope or package must reference the bidder's name and address, the bid number, bid title, and must indicate the contents represent a "bid" or "no bid" submission. Failure to properly identify the bid submission may result in rejection of the bid.

5. BID DUE DATE. The bid submission must arrive in the Purchasing Division on or before the stated due date and time. Upon receipt, bids will be time and date stamped. Bids will remain sealed and secured until the stated due date and time for the bid opening.

6. BID OPENING. The Purchasing Division Manager or Purchasing staff appointee will open bids. The bid amount and other pertinent information as determined by the Purchasing Division Manager will be read and recorded. The bids as recorded at the bid opening represent draft tabulation and may include incorrect price extensions or transcription errors, and are subject to change if conflicting information is discovered during analysis of the bid responses. A bid tabulation will be made available to bidders after extensions have been checked and all other specification compliance has been determined. **In the essence of time, bidders may not be allowed to review bids at the bid opening. However, bidders will be allowed to make appointments to review the bids at a later date.**

7. LATE BIDS. It is the responsibility of the bidder to ensure bids are submitted by the specified due date and time. Bids received after the stated date and time will be returned, unopened, to the bidder. The official clock to determine the date and time will be the time/date stamp located in the Finance Department. All bids received will be time and date stamped by the official clock. The City will not be held responsible for the late delivery of bids due to the U.S. Mail Service, or any other courier service.

8. RECEIPT OF ONE SEALED BID. In the event only one sealed bid is received, no formal bid opening shall take place. First, the Purchasing Division shall conduct a survey of vendors to inquire of "no bid" responses and non-responsive vendors. If, from the survey, it is determined by the Purchasing Division that specifications need revision, the one bid received will be returned, unopened, to the responding vendor, with a letter of explanation and a new bid solicitation prepared. If it is determined that other vendors need to be contacted, the bid due date will be extended, and the one bid received will remain sealed until the new bid opening date. The vendor submitting the single bid will receive a letter of explanation. **If it is determined the one bid received is from the only responsive, responsible bidder, then the bid shall be opened by the Purchasing Division Manager or designee, in the presence of at least one other witness. The single bid will be evaluated by the using agency for award recommendation.**

9. RECEIPT OF TIE BIDS. In the event multiple responsive, responsible bidders are tied for the lowest price and all other terms and requirements are met by the all tied bidders, the award recommendation shall be as follows:

- a. Award to the local bidder, if one of the bidders has its principal place of business in Columbus, Georgia.
- b. If all or none of the bidders has its principal place of business in Columbus, Georgia, then award the bid to the bidder who has received the award previously.
- c. If neither bidder received the award previously, and neither of the tied bidders has its principal place of business in Columbus, Georgia, then the bid award shall be equally divided between the tied bidders.

- d. If it is not feasible to divide the award, and if all or none of the tied bidders has its principal place of business in Columbus, Georgia, and neither was awarded the bid previously, then all bids will be rejected and the bid will be re-advertised.

10. RECEIPT OF MULTIPLE BIDS. Unless otherwise stated in the bid specifications, the City will accept one and only one bid per vendor. Any unsolicited multiple bid(s) will not be considered. If prior to the bid opening, more than one bid is received from the same vendor, the following will occur: (1) the bidder will be contacted and required to submit written acknowledgment of the bid to be considered; (2) the additional bid(s) will be returned to the bidder unopened. If at the bid opening more than one bid is enclosed in a single bid package, the City will consider the vendor non-responsive and bids will be returned to the bidder.

11. CONDITION AND PACKAGING. Unless otherwise defined in the bid specifications, it is understood and agreed that any item offered or furnished shall be new, in current production and in first class condition, that all containers shall be new and suitable for storage or shipment, and that prices include standard commercial packaging.

12. FREIGHT/SHIPPING/HANDLING CHARGES. All freight, shipping, and handling charges shall be included in the bid price. The City will pay no additional charges.

13. CORRECTION OR WITHDRAWAL OF BID/CANCELLATION OF AWARDS. Corrections or withdrawals of inadvertently erroneous bids before or after bid opening, or cancellation of awards of contracts based on such bid mistakes may be permitted where appropriate. Mistakes discovered before bid opening may be modified or bid withdrawn by written notice received in the Office of Purchasing prior to the time of the bid opening. After bid opening, no changes in bid prices or other provisions of bids prejudicial to the interest of the City or fair competition shall be permitted. In lieu of bid correction, a low bidder alleging a material mistake of fact may be permitted to withdraw its bid if the mistake is clearly evident, or if the bidder submits evidence that clearly and convincingly demonstrates that a mistake was made. All decisions to permit corrections or withdrawals of bids or to cancel awards or contracts based on bid mistakes will be supported by the written determination of the Purchasing Officer.

14. ADDENDA AND INTERPRETATIONS. If it becomes necessary to revise any part of this bid, a written addendum will be provided to all bidders. The City is not bound by any oral representations, clarifications, or changes made to the written specifications by City employees, unless such clarification or change is provided to the bidders in written addendum form from the Purchasing Officer. Bidders will be required to acknowledge receipt of the addenda (if applicable) in their sealed bid proposal. The vendor may provide an initialed copy of each addendum or initial the appropriate area on the bid form (pricing page). Failure to acknowledge receipt of the addenda (when applicable) will render bid incomplete. **It is the bidder's responsibility to ensure that they have received all addenda.**

15. BID EVALUATION AND AWARD. During the evaluation of bids, the City reserves the right to request clarification of bid responses and to request the submission of references, if deemed necessary for a complete evaluation of bid responses. Award will be made to the responsive and responsible bidder whose bid is most economical according to criteria designated in the solicitation. The determination of the lowest responsive and responsible bidder may involve all or some of the following factors: prices, conformity to specifications, financial ability to meet the contract, previous performance, facilities and equipment, availability of repair parts, experience, delivery promise, terms of payment, compatibility as required, other cost, and other objective and accountable factors, if any, (which are further described in the specifications). The City shall be the judge of the factors and will make the award in the best interest of the City.

16. TIME FOR CONSIDERATION. Bids must remain in effect for at least sixty (60) days after date of receipt to allow for evaluation.

17. BID SECURITY AND PERFORMANCE BOND. Bid security (Bid Bond) shall be required for all competitive sealed bids for construction contracts when the price is estimated by the Purchasing Officer to exceed \$10,000. Bid security shall be a bond provided by a surety company authorized to do business in the State, or in the form of a certified check. Such bonds may also be required on construction contracts under \$10,000 or other procurement contracts when circumstances warrant. Bid security shall be in an amount equal to at least five percent (5%) of the bid amount. The City will accept a copy of a bid bond at the bid opening. However, if a copy of a bid bond is submitted, the bidder must submit to the Purchasing Division the identical original document within five (5) days after the bid opening. **If the original document is not received within the five (5) days, the bid will not be considered.** When a construction contract is

awarded in excess of \$25,000, the successful bidder will be required to furnish a **Performance Bond** executed by a surety company authorized to do business in the State. The performance bond shall be equal to one hundred percent (100%) of the price specified in the bid.

18. SUBCONTRACTING. Should bidder intend to subcontract all or any part of the work specified, name(s) and address(es) of sub-contractor(s) must be provided in bid proposal (use additional sheet if necessary). The bidder shall be responsible for subcontractor(s) full compliance with the requirements of the bid specifications. **THE COLUMBUS CONSOLIDATED GOVERNMENT WILL NOT BE RESPONSIBLE FOR PAYMENTS TO SUBCONTRACTORS.**

19. DISQUALIFICATION OF BIDDERS AND REJECTION OF BIDS. Bidders may be disqualified and rejection of bid proposals may be recommended by the City for any (but not limited) to the following reasons:

- (A) Receipt after the time limit for receiving bid proposals as stated in the bid invitation.
- (B) Any irregularities contrary to the General Provisions or bid specifications.
- (C) Unbalanced unit price or extensions.
- (D) Unbalanced value of items.
- (E) Failure to use the proper forms furnished by the Consolidated Government.
- (F) Failure to complete the proposal properly
- (G) Omission of warranty, product literature, samples, acknowledgment of addenda or other items required to be included with bid proposal.
- (H) Failure to properly sign forms in ink.

The City reserves the right to waive any minor informality or irregularity. The City reserves the right to reject any and all bids.

20. BRAND NAMES "OR EQUAL". Whenever in this invitation any particular material, process and/or equipment are indicated or specified by patent, proprietary or brand name of manufacturer, such wording will be deemed to be used for the purpose of facilitating description of the material, process and/or equipment desired by the City. It is not meant to eliminate bidders or restrict competition in any bid process. Any manufacturers' names, drawings, trade names, brand names, specifications and/or catalog numbers used herein are for the purpose of description and establishing general quality levels. Bidders may propose equivalent equipment, services or manufacturer. Any proposal that is equivalent to or surpasses stated specifications will be considered. Determination of equivalency shall rest solely with the City.

Note: Due to existing equipment, specific manufacturers may be required to facilitate compatibility.

21. ASSIGNMENT OF CONTRACTUAL RIGHTS. It is agreed that the successful bidder will not assign, transfer, convey or otherwise dispose of the contract or its right, title or interest in or to the same, or any part thereof, without previous consent of the City and any sureties.

22. DISCOUNTS. Terms of payments offered will be reflected in the space provided on the bid proposal form. Cash discounts will be considered net in the bid evaluation process. All terms of payment (cash discounts) will be taken and computed from the date of delivery of acceptable material or services, or the date of receipt of the invoice, whichever is later.

23. TAXES. The City is exempt from State Retail Tax and Federal Excise Tax. Tax Exemption No. GA Code Sec. 48-8-3. Federal ID No. 58-1097948.

24. FEDERAL, STATE AND LOCAL LAWS. All bidders will comply with all Federal, State, and Local laws and ordinances, relative to conducting business in Columbus, Georgia.

25. BID INCLUSIONS. When bid inclusions are required, such as warranty information, product literature/specifications, references, etc. The inclusions should reference all aspects of the specific equipment or service proposed by the bidder. Do not include general descriptive catalogs. References to literature or other required inclusions submitted previously do not satisfy this provision. Bids found to be in non-compliance with these requirements will be subject to rejection.

26. NON-COLLUSION. By signing and submitting this bid, bidder declares that its agents, officers or employees have not directly or indirectly entered into any agreements, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this bid. In the event, said bidder is found guilty of collusion, the company and agents will be removed from the City's bid list for one full year and any current orders will be canceled.

27. INDEMNITY. The successful bidder agrees, by entering into this contract, to defend, indemnify and hold City harmless from any and all causes of action or claims of damages arising out of or under this contract.

28. DISADVANTAGED BUSINESS ENTERPRISE. Disadvantaged Business Enterprises (minority or women owned businesses) will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of race, color, creed, sex, sexual orientation, gender identity or national origin in consideration for an award. It is the policy of the City that disadvantaged business enterprises and minority business enterprises have an opportunity to participate at all levels of contracting in the performance of City contracts to the extent practical and consistent with the efficient performance of the contract.

29. AFFIRMATIVE ACTION PROGRAM - NON-DISCRIMINATION CLAUSE. The City has an Affirmative Action Program in connection with Equal Employment Opportunities. The successful bidder will comply with all Federal and State requirements concerning fair employment and employment of the handicapped, and concerning the treatment of all employees, and will not discriminate between or among them by reason of race, color, age, religion, sex, sexual orientation, gender identity, national origin or physical handicap.

30. AWARDS TO LOCAL BUSINESSES. Except for construction contracts, awards will be made to responsive and responsible local businesses proposing a cost not more than two percent (2%) above the low bid or quote for contracts involving an expenditure of \$25,000.00 or less and made to responsive and responsible local businesses proposing a cost not more than one percent (1%) above the low bid or quote for contracts involving an expenditure greater than \$25,000.00. (Ordinance No. 95-5). ****STATE OR FEDERALLY FUNDED PROJECTS EXCLUDED****

31. RIGHT TO PROTEST. A protest with respect to an Invitation for bids or Request for Proposals shall be submitted in writing no less than five (5) days prior to the opening of bids or the closing date of proposals to the Purchasing Officer. If the matter is not resolved, then an appeal may be filed with the City Manager or City Council.

32. FAILURE TO QUOTE. Vendors choosing not to submit a bid are requested to return a **Statement of "No Bid"**.

33. PRODUCT/EQUIPMENT DEMONSTRATION - SITE VISIT. During the evaluation of bids, the City reserves the right to request a demonstration or site visit of the product, equipment or service offered by a bidder. The demonstration or site visit shall be at the expense of the bidder. Bidders who fail to provide demonstration or site visit, as requested, will be considered non-responsive.

34. CANCELLATION PROVISIONS. When such action is in the best financial interest of the City, contracts for supplies to be purchased or services to be rendered under an annual (term) contract basis may be canceled and re-advertised at the discretion of the Purchasing Officer and in accordance with contract terms.

After the receipt of a product or piece of equipment, it is found that said item does not perform as specified and required, payment for said product or equipment will be withheld. The successful vendor will be notified of the non-performance in writing. After notification, the successful vendor will have ten (10) calendar days, from the date of notification, to deliver product or equipment that performs satisfactorily. If a satisfactory product is not delivered within 10 calendar days, from the notification date, the City will cancel the contract (purchase order) and award to the next low, responsive, responsible bidder. The vendor will be responsible for the pick-up or shipment of the unsatisfactory equipment or product.

35. QUESTIONS. Questions concerning specifications must be submitted, in writing, at least 5 (five) working days (Monday-Friday) prior to receipt date. Questions received less than five working days prior to receipt date will not be considered.

36. SAMPLES. When samples are required to be included with the proposal response, the bidder will be responsible for the following:

- 1) **Unless otherwise specified**, bidders are required to submit exact samples of item(s) bid. Do not submit sample of "like" item(s).
- 2) Affix an identification label to each individual sample to include bidder's name, bid name and number.
- 3) Make arrangements for the return of sample after the bid award. All shipping costs will be the responsibility of the bidder. If bidder does not make arrangements for return of sample, within 60 days after award, the sample will be discarded.

37. GOVERNING LAW. The parties agree that this Agreement shall be governed by the laws of Georgia, both as to interpretations and performance.

38. PAYMENT DEDUCTIONS. The City reserves the right to deduct, from payments to awarded vendor(s), any amount owed to the City for various fees, to include, but not limited to: False Alarm fees, Ambulance fees, Occupation License Fees, Landfill fees, etc.

39. PAYMENT TERMS. The City's standard payment term is usually net 30 days, after successful receipt of goods or services. Payment may take longer if invoice is not properly documented or not easily identifiable, goods/services are not acceptable, or invoice is in dispute.

NOTICE TO VENDORS

Columbus Council, by Ordinance 92-60 has prohibited any business that is owned by any member of Columbus Council or the Mayor, or any business in which any member of Columbus Council or the Mayor has a substantial pecuniary interest from submitting a bid for goods or services to the Consolidated Government of Columbus, Georgia.

Likewise, by Ordinance 92-61, no business which is owned by any member of any board, authority or commission, subordinate or independent entity, or any business in which any member of any board, authority or commission, subordinate or independent entity has substantial pecuniary interest may submit a bid to the Consolidated Government if such bid pertains to the board, authority or commission.

DO YOU HAVE QUESTIONS, CONCERNS OR NEED CLARIFICATION ABOUT THIS SOLICITATION?

COMMUNICATION CONCERNING ANY SOLICITATION CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITTEN FORM AND ADDRESSED TO THE PURCHASING DIVISION.

ALL QUESTIONS OR CLARIFICATIONS CONCERNING THIS SOLICITATION SHALL BE SUBMITTED IN WRITING. THE CITY WILL NOT ORALLY OR TELEPHONICALLY ADDRESS ANY QUESTION OR CLARIFICATION REGARDING BID/PROPOSAL SPECIFICATIONS. IF A VENDOR VISITS OR CALLS THE PURCHASING DIVISION WITH SUCH QUESTIONS, HE OR SHE WILL BE INSTRUCTED TO SUBMIT THE QUESTIONS IN WRITING.

ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. BIDDERS SHALL NOT CONTACT CITY EMPLOYEES, DEPARTMENT HEADS, USING AGENCIES, EVALUATION COMMITTEE MEMBERS OR ELECTED OFFICIALS WITH QUESTIONS OR ANY OTHER CONCERNS ABOUT THE SOLICITATION. QUESTIONS, CLARIFICATIONS, OR CONCERNS SHALL BE SUBMITTED TO THE PURCHASING DIVISION IN WRITING. IF IT IS NECESSARY THAT A TECHNICAL QUESTION NEEDS ADDRESSING, THE PURCHASING DIVISION WILL FORWARD SUCH TO THE USING AGENCY, WHO WILL SUBMIT A WRITTEN RESPONSE.

THE PURCHASING DIVISION WILL FORWARD WRITTEN RESPONSES TO THE RESPECTIVE BIDDER OR IF IT BECOMES NECESSARY TO REVISE ANY PART OF THIS SOLICITATION, A WRITTEN ADDENDUM WILL BE ISSUED TO ALL BIDDERS.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE BIDDERS IN A WRITTEN ADDENDUM FROM THE PURCHASING MANAGER.

BIDDERS ARE INSTRUCTED TO USE THE ENCLOSED "QUESTION/CLARIFICATION FORM" TO FAX OR EMAIL QUESTION.

ANY REQUEST, AFTER A SOLICITATION HAS CLOSED AND PENDING AWARD, MUST ALSO BE SUBMITTED IN WRITING TO THE PURCHASING DIVISION.

QUESTION/CLARIFICATION FORM

DATE: _____

TO: Patti Postorino, Buyer
Email BidOpportunities@ColumbusGA.org or
Fax 706-225-3033

RE: RFB No. 20-0041; Breathing Apparatus (Annual Contract)

Questions/clarification requests must be submitted at least five (5) business days before the due date:

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page.

From: _____

Company Name

Representative

Complete Address

Telephone Number

**GENERAL SPECIFICATIONS
BREATHING APPARATUS (ANNUAL CONTRACT)
RFB No. 20-0041**

I. SCOPE

The Consolidated Government of Columbus Georgia (City) is soliciting bids from firms to provide self-contained breathing apparatus with mask-mounted regulators, spare air cylinders, and replacement parts and other related services. The breathing apparatus will be used by the Fire & EMS Department. This contract may also be utilized by any other City agency requiring the goods or services. ***The City reserves the right to add additional related items during the term of the contract. Quotes will be obtained from contracted vendor(s) for any add on items.***

This is a requirement type contract which will permit the purchase of items in the quantities to be designated at the time the orders are placed. The City may purchase more, less, none, or all of the items. The City reserves the right to reject any and/or all bids. Should the successful bidder not be able to supply the required item(s), the City reserves the right to purchase from other sources.

II. TERM OF CONTRACT

A. The term of contract shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor.

Notice of intent to renew will be given to the contractor in writing by the Purchasing Division Director, normally sixty days before the expiration date of the current contract. This notice shall not be deemed to commit the City to a Contract renewal.

It should be noted that multi-year contracts may be continued each fiscal year only after funding appropriations and programs approval has been granted by the Council of the Consolidated Government of Columbus, Georgia. In the event that the necessary funding is not approved, then the affected multi-year contract becomes null and void, effective July 1st of the fiscal year for which such approval has been denied.

B. Termination for Convenience

For the protection of both parties, either party giving 30 days prior notice in writing to the other party may cancel this contract.

III. ESCALATION CLAUSE

Contract pricing shall remain fixed for the initial two (2) year term of the contract. After the initial term, Contractor may request a price escalation by submitting a fully documented request (i.e. documentation from manufacturers illustrating the necessity to implement price increases).

Request for price increases, without documentation, shall not be considered. Such escalation shall not exceed a five percent (5%) increase. The using department(s) and the Purchasing Manager will review the request and shall approve or disapprove the increases based on budget constraints and other price comparisons.

If for any reason the contractor has a price increase that exceeds five percent (5%), the price increase will be evaluated on a case-by-case basis. The City and the Contractor will have the option to discuss and make adjustments to the requested increase. If either party declines

approval of the adjustments, the contract will be considered cancelled on the scheduled expiration date of the contract.

IV. BRAND NAMES

It is not the intent of Columbus Consolidated Government (City) to restrict competition in any purchasing process. Any manufacturers' names, drawings, trade names, brand names, information and/or catalog numbers used herein are for purpose of description and establishing general quality levels. Such references are not intended to be restrictive; any equivalent products of any manufacturer may be offered. Any bid that is equivalent to or surpasses these specifications will be considered; determination of equivalency shall rest solely with the City. *NOTE: Specific manufacturers may be required to accommodate compatibility with existing equipment. Therefore, it is requested that bid responses be submitted in accordance with the specifications provided.*

V. COOPERATIVE CONTRACT PURCHASE OPTION

The City reserves the right to make purchases via any comparable Cooperative Contract, if the contract cost is lower and meets the City's requirements.

VI. QUESTIONS/ADDENDA

Questions and requests for clarification must be submitted **within five (5) business days of the due date** (see pages 9 & 10). Changes to the specifications (if any) will be provided in the form of an addendum, which will be posted on the web page of the Finance Department/Purchasing Division of Columbus Consolidated Government at https://www.columbusga.org/finance/purchasing/docs/opportunities/Bid_Opportunities.htm. It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a quote.

VII. INDEMNITY CLAUSE

The Contractor covenants to save, defend, hold harmless, and indemnify the City, and all of its officers, departments, agencies, agents, and employees (collectively the "City") from and against any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees), charges, liability, or exposure, however caused, resulting from, arising out of, or in any way connected with the Contractor's intentional, negligent, or grossly negligent acts or omissions in performance or nonperformance of its work called for by the Contract Documents.

VIII. BID SUBMISSION REQUIREMENTS

Each bidder shall include the following information with bid submission. Bidder shall submit **THE ORIGINAL AND ONE (1) IDENTICAL COPY**. The City reserves the right to request any omitted information **WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE**. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete":

- A. **Communication Concerning This Solicitation:** (Form 1)
- B. **Bid Form / Pricing Page** (Form 2)
- C. **Contract Signature Page:** (Form 3) Provide all required information
- D. **Product Literature:** Provide descriptive literature for proposed product.
- E. **Provide Proof of MSA Dealer:** Vendor must provide a statement of confirmation on MSA letterhead that vendor is an authorized MSA dealer for Columbus, GA.
- F. **Catalogs:** Provide two (2) copies of current catalogs that includes repair parts.

- G. **Warranty:** Warranty information printed on the manufacturer's letterhead.
- H. **Sample Invoice:** Provide a Sample Invoice depicting the itemized billing format that will be used for this contract.
- I. **Addenda:** Vendors must include acknowledgment of receipt of addenda (if any) in their sealed bid. Provide an initialed copy of each addendum or initial the appropriate area on bid form (pricing page). Addenda will be posted at https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm
- Vendors are responsible for periodically visiting the web page, to check for addenda, prior to the bid due date and before submitting a bid.***
- J. **Business License:** Vendors located in Muscogee County shall submit a current copy of their City of Columbus Business License (Occupation License). If the business is not located in Muscogee County and has proof of being properly licensed by a municipality in Georgia, and paid applicable occupation taxes in that city, the vendor will not be required to pay occupation taxes in Columbus, Georgia.
- If the business location is not in Georgia, vendor must provide a current copy of their active Articles of Incorporation from the State and/or a current business license from the City/State in which business is located.
- If you have questions regarding this requirement, please contact Yvonne Ivey, Revenue Manager: 706-225-3091.
- K. **Insurance Checklist / Certificate of Insurance (Form 4)**
- L. **W-9 Rev 2018 Request for Taxpayer Identification Number and Certification (Form 5)**

Bids must be delivered sealed in an envelope or package. The envelope or package should reference the bidder's name, full address and the bid number and/or bid name. Mail or hand-deliver bid to:

Columbus Consolidated Government
Purchasing Division

RE: RFB No. 20-0041; Breathing Apparatus (Annual Contract)

(Mail) P. O. Box 1340
Columbus, GA 31902-1340

(Deliver) 5th Floor – Finance Department
100 10th Street
Columbus, Georgia 31901

IX. AWARD/ORDERING/DELIVERY/INVOICE

- A. **Award:** This bid shall be awarded in total to one vendor. The City reserves the right to reject any and all bids not submitted according to specifications.
- B. **Ordering:** The items will be procured on an "as needed" basis by purchase order.
- C. **Delivery:** The item(s) shall be delivered to the location on the purchase order. The items shall be delivered within 30 days after order has been placed. Delivery is the responsibility of the successful bidder. Freight shall be included in the bid price; add on freight will not be authorized.

A shipping ticket shall accompany orders when deliveries are made. The user should verify all orders at the time of delivery. Any shortages must be adjusted on the invoice upon delivery.

- D. Invoices: After receipt of goods/services and upon satisfactory delivery, the successful vendor shall forward invoice(s) to the following address:

Columbus Consolidated Government
Accounting Division
P. O. Box 1340
Columbus, Georgia 31902-1340

The invoice(s) shall reference the bid number (RFB No. 20-0041) and/or purchase order number.

X. TERMINATION OF CONTRACT

Default: If the contractor refuses or fails to perform any of the provisions of this contract with such diligence as will ensure its completion within the time specified in this contract, or any extension thereof, otherwise fails to timely satisfy the contract provisions, or commits any other substantial breach of this contract, the Purchasing Division Director may notify the contractor in writing of the delay or non-performance and if not cured within ten (10) days or any longer time specified in writing by the Purchasing Division Director, such director may terminate the contractor's right to proceed with the contract or such part of the contract as to which there has been delay or a failure to properly perform.

In the event of termination in whole or in part the Purchasing Division Director may procure similar supplies or services, from other sources, in a manner and upon terms deemed appropriate by the Purchasing Division Director. The contractor shall continue performance of the contract to the extent it is not terminated and shall be liable for excess costs incurred in procuring similar goods or services.

Compensation: Payment for completed supplies delivered and accepted by the city shall be at the contract price. The City may withhold from amounts due the contractor such sums as the Purchasing Director deems to be necessary to protect the City against loss because of outstanding liens or claims of former lien holders and to reimburse the City for the excess costs incurred in procuring similar goods and services.

Excuse for Nonperformance or Delayed Performance: Except with respect to defaults of subcontractors, the contractor shall not be in default by reason of any failure in performance of this contract in accordance with its terms, if the contractor has notified the Purchasing Division Director within 15 days after the cause of the delay and the failure arises out of causes such as: acts of God; acts of public enemy; acts of the City and any other governmental entity in its sovereign or contractual capacity; fires; floods; epidemics; quarantine restrictions; strikes or other labor disputes; freight embargoes; or unusually severe weather. If the failure to perform is caused by the failure of a subcontractor to perform or to make progress, and if such failure arises out of causes similar to those set forth above, the contractor shall not be deemed to be in default, unless the supplies or services to be furnished by the subcontractor were reasonably obtainable from other sources in sufficient time to permit the contractor to meet the contract requirements.

Upon request of the contractor, the Purchasing Division Director shall ascertain the facts and extent of such failure, and, if such director determines that any failure to perform was occasioned by any one or more of the excusable causes, and that, but for the excusable cause, the contractor's progress and performance would have met the terms of the contract, the delivery schedule shall be revised accordingly.

TECHNICAL SPECIFICATIONS
BREATHING APPARATUS (Annual Contract)
RFB No. 20-0041

FIREHAWK ® M7XT AIR MASK
(4500 PSIG AIR MASKS)

I. APPROVALS:

1. The apparatus shall be approved by the National Institute for Occupational Safety and Health (NIOSH), under 42 CFR, Part 84 for chemical, biological, radiological, and nuclear protection (CBRN) with a 30-, 45- or 60-minute –rated service life and compliant with all requirements of the National Fire Protection Association's 2013 Edition of NFPA-1981 Standard on Open-Circuit Self-Contained Breathing Apparatus.
2. Units Equipped with an integrated PASS device must meet requirements of NFPA 1982, 2013 Edition.
3. Units equipped with an emergency egress system shall also comply with the NFPA 1983 Standard on Fire Service Life Safety Rope and System Components, 2012 Edition; Type: Escape.
4. Units Equipped with an accountability system must meet minimum requirements for FCC part 15 and part 90.

SPECIFIC REQUIREMENTS

II. FACEPIECE:

1. The facepiece shall be available in three sizes in Hycar™ Rubber (small, medium and large).
2. Two sizes of removable nosecup; nosecup shall contain a voice collector system that enhances unamplified speech transmission.
3. The facepiece shall have an inhalation check valve and exhalation valve to prevent exhaled air from entering and contaminating the mask-mounted regulator.
4. The facepiece shall have a speaking diaphragm with aluminum-coated membrane suitably protected and located centrally on the facepiece for optimal voice projection.
5. The lens shall be field-replaceable and of a non-shatter type and shall fit all three sizes of the facepiece.

6. The facepiece head harness shall be a flame-and heat-resistant Kevlar assembly featuring a suspension with five points of attachment and four points of adjustment.
7. The facepiece shall be I-HUD-ready.
8. An optional flame-and heat-resistant PBI neck strap shall be offered to carry the facepiece in a ready position for quick donning.

III. INTERNAL HUD SYSTEM:

1. The Heads-Up-Display, I-HUD System shall be wireless to eliminate snag hazards and provide modularity for easy maintenance.
2. The I-HUD System shall prevent the ability to cross-talk among firefighters.
3. The I-HUD System shall be immune to radio frequency interference (RFI) and must function properly in close proximity of fire service hand-held radios.
4. The I-HUD shall provide the user with the remaining volume of air in his/her cylinder in 25% increments through a series of 3 colored LEDs.
 - Three green lights 76 to 100% cylinder volume
 - Two green lights 51 to 75% cylinder volume
 - Two flashing amber lights 36 to 50% cylinder volume
 - Flashing red light 0 to 35% cylinder volume
5. Internal HUD shall be contoured to fit securely within facepiece to reduce snag hazards.
6. The I-HUD receiver shall display remaining air pressure, battery life warning and PASS device pre-alarm and EVACUATE indicators.
7. The I-HUD system shall allow the user to select between two modes of operation,
1) continuous lights on mode or 2) an intermittent lights on mode for power conservation.
8. The I-HUD shall incorporate a photoelectric sensor that senses ambient light conditions, automatically adjusting the display to one of 16 pre-programmed light intensities.
9. The I-HUD shall be field removable and replaceable without use of tools.
10. Three buddy lights shall be visible from the outside of a firefighter's facepiece.
11. The I-HUD receiver shall have a green test button.
12. The I-HUD battery should last four to eight months using a single CR2 battery.

IV. UNIVERSAL RESCUE CONNECTION:

1. The system shall be capable of:
 - a. Refill in immediately dangerous to life or health (IDLH) atmospheres.
 - b. Transfiling between two SCBA wearers (connection allows for donation and receipt of air), providing an emergency breathing system (EBS) while maintaining NIOSH approvals.
 - c. Quickly refilling (approximately one minute) an SCBA cylinder from a mobile compressor, cascade system or RIT Pack.
 - d. Extending the wearer's air supply over longer duration when a remote cascade system or other compressed gas source is located in a remote area.

V. FIRST-STAGE REGULATOR:

1. Reduces the cylinder pressure to an outlet pressure not to exceed 100 psi. Regulator outlet pressure must be adjustable.
2. The pressure reducer shall incorporate a downstream flow to ensure fail-safe in an open position.
3. Regulator redundancy shall be achieved by two inter-nested long-life springs.
4. The regulator body shall be constructed of a high-strength heat-treated aluminum alloy, and plated with a Teflon hard coat anodize to minimize corrosion and wear of internal components.
5. There shall not be more than 14 individual replacement parts on the regulator.
6. The regulator shall be mounted on a slide bracket to facilitate easy cylinder attachment and to prevent binding of high-pressure hose.
7. The regulator must not require any special tools for disassembly.

VI. MASK-MOUNTED REGULATOR: (PUSH-TO-CONNECT):

1. The second-stage regulator shall not obstruct or reduce the field of vision of the wearer when installed on the facepiece.
2. The second-stage regulator must be equipped with Positive Protection Tetraplex Shield membrane that covers the diaphragm, preventing against permeation of CBRN agents.
3. When doffing the regulator, the disengagement of the regulator from the facepiece must simultaneously stop the flow of air and release the regulator.

4. The regulator must be equipped with a variable flow bypass.
5. The second-stage regulator must be labeled with a CBRN notation.
6. An over-the-shoulder air-supply hose shall be routed through a shoulder strap tunnel from the first- stage regulator.
7. As an option, the detachable regulator must have a push-to-connect attachment to the facepiece. This option of the regulator shall feature a non-indexing design, capable of mounting to the facepiece in any orientation. In this configuration, the regulator must rotate freely when connected to the facepiece, maximizing the user's freedom of head movement.

VII. PRIMARY LOW PRESSURE WARNING DEVICE:

1. An audible bell alarm shall be an air-actuated, self-cocking, continuous ringing audible warning bell automatically operating when air pressure in the supply cylinder reaches approximately 35% of the rated service life.
2. An audible bell alarm must cover multiple levels of frequencies to cover all hearing levels.

VIII. CYLINDERS:

1. Cylinders with 4500 psig operating pressure must be available in 30-, 45- and 60-minute durations.
2. Cylinders must be available in two operating pressures; 4500 psig and 5500 psig.
3. The cylinder shall be constructed of a deep-drawn, seamless aluminum liner that is fully wound over its entire surface (except for the thick neck area) with high-strength carbon fiber filaments impregnated with epoxy resin.
4. The cylinder shall contain a closing valve that shall incorporate a pressure gauge to indicate the pressure in the cylinder at all times. The pressure gauge face shall be luminescent. The hand wheel shall be at a 90° angle from the longitudinal plane of the cylinder.
5. The valve shall incorporate a flow control insert to limit the airflow over the first half rotation of the hand wheel, minimizing propulsion thrust in the event that the cylinder is mishandled.
6. The cylinder shall have a minimum two-inch wide luminescent band to enhance visibility of the wearer.

IX. EMERGENCY EGRESS RESCUE BELT (OPTIONAL):

1. In addition to meeting the NFPA 1983 standard, the rescue belt must be NIOSH-certified and NFPA 1981-2012 edition-compliant as a component of the SCBA.
2. Complete system to include Air-shield pouch, carabiner or Crosby hook with sewn-in connection and F4 Sterling auto-locking descender.
3. Shall be available with 50-ft. FireTech 32 rope or an aramid/nylon blend.
4. As a safety feature, the rope shall be detachable under load by the user, with a pull-to release knot at the end of the rescue rope.
5. As a safety feature, the rope assembly shall have two end-of-rope flags, one at 15 feet and the second at 10 feet.
6. Shall be available with double-action waist belt buckle.
7. Rescue system shall have web management system for reduced snag hazards.
8. The rope assembly shall be available as a replacement part.

X. PASS DEVICE:

1. The PASS device is a combination integrated PASS device and HUD Transmitter that shall be contained in a single enclosure and shall be easily replaced in the event of fire ground damage.
2. The PASS device unit must be immune to radio frequency interference (RFI) and must function properly in the close proximity of fire service hand-held radios.
3. The unit shall be capable of storing up to 25 hours of use information in the form of sessions that are generated each time the SCBA is pressurized. The sessions must indicate the day, time, user's name, cylinder pressure, duration of use, and time of alarm (PASS and thermal) for each pressurization of the SCBA stored on a minute-by-minute basis.
4. The sessions must provide the option of downloading to a personal computer for addition to maintenance records, or for use in incident investigations.
5. The PASS device must utilize a perimeter seal (sonic weld) to provide the highest level of protection against water ingress.
6. The PASS device must be equipped with buddy lights on the front and back of the firefighter. The purpose of the buddy lights is to easily identify firefighters that are in immediate need of assistance. Buddy lights are positioned to face one towards the firefighter and one away from the firefighter.

7. The power module shall be equipped with dual sound emitters. The sound emitters shall perform at a minimum of 95 dBa after heat emersion of five minutes at 500° Fahrenheit.
8. The PASS device must be equipped with time remaining display and an optional thermal sensor. The time remaining function must update calculations every 30 seconds based on the user's previous three minutes of air consumption. The initial calculation will appear after three minutes.
9. The PASS device and power module shall be powered by four C-cell batteries.
10. The expected service life of the batteries shall be six to eight months on average for units without telemetry, and four to six months on average with telemetry.
11. If equipped with telemetry, the unit shall have the capability of electronically storing the user's name into memory through an ID tag.

XI. EMERGENCY ESCAPE BREATHING SUPPORT SYSTEM:

1. As an option, an emergency escape breathing support system must be accommodated by the SCBA.
2. The system must be available with a common SCBA quick-disconnect fitting.
3. The system shall connect to the intermediate pressure side of the SCBA, downstream of the first-stage regulator.
4. The system shall have both male and female connections.

XII. WEIGHT:

1. The weight of a basic SCBA (less cylinder) shall not exceed 13 lbs. 4 oz.
2. The weight of the cylinder and valve assemblies (empty) shall not exceed:

<u>CYLINDER TYPE</u>	<u>WEIGHT</u>
Carbon-wrapped L30	8 lbs. 0 oz.
Carbon-wrapped H30-SL	7 lbs. 4 oz.
Carbon-wrapped H45	9 lbs. 7 oz.
Carbon-wrapped H45-SL	9 lbs. 10 oz.
Carbon-wrapped H60-SL	11 lbs. 12 oz.

TECHNICAL SPECIFICATIONS (continued)
MSA G1 SCBA Product Specification
4500 and 5500 psig

I. Approvals

1. 1. Apparatus shall be approved by the National Institute for Occupational Safety and Health (NIOSH), under 42 CFR, Part 84
2. for chemical, biological, radiological, and nuclear protection (CBRN) with 30-, 45-, 60-minute-rated service life
3. and compliant with all requirements of the National Fire Protection Association's 2018 Edition of NFPA-1981
4. Standard on Open-Circuit Self-Contained Breathing Apparatus
5. 2. Units equipped with integrated PASS device must meet requirements of NFPA 1982, 2018 edition
6. 3. Units equipped with emergency egress system shall also comply with NFPA 1983 Standard on Fire Service Life Safety
7. Rope and System Components, 2017 Edition; Type: Escape
8. 4. Units equipped with accountability system must meet minimum requirements for FCC part 15 and part 90

II. Specific Requirements

Facepiece

1. Facepiece shall have removable inhalation check valve to prevent exhaled air from entering and contaminating regulator (demand valve).
2. Facepiece shall have open port to provide minimal breathing resistance when regulator is not attached
3. Facepiece shall not contain electronic components
4. Facepiece shall provide means to display to user with visual indicators for HUD
5. Facepiece shall have icon for HUD system status indicators
6. Facepiece shall have regulator attachment that does not bear any weight on lens
7. Facepiece shall have effective field of view of 86% and overlapping field of view of 122% without attached component
8. Facepiece shall be available in three sizes in Hycar Rubber (small, medium, large)
9. Facepiece shall have nose cup comprised of silicone rubber and available in three sizes (small, medium, large)
10. Facepiece shall have three head harness options constructed of flame/heat resistant assembly: Kevlar Head Harness
4-pt. adjustable, Kevlar 5-pt. adjustable and rubber 5-pt. adjustable
11. Facepiece shall have universal lens that can be used with all three facepiece sizes, shall be comprised of non-shatter type material and shall be field-replaceable
12. Lens shall be hard-coated on outside and anti-fog coated on inside
13. Facepiece shall have optional flame/heat-resistant fabric or rubber neck strap to carry facepiece in ready position for quick donning
14. Facepiece shall have removable speaking diaphragm with aluminum-coated membrane, suitably protected and located

centrally on facepiece for optimal voice projection

15. Facepiece shall have exhalation valve that is to be serviceable without special tools
16. Facepiece shall be capable of water submersion for cleaning and disinfection
17. Facepiece provides RFID chip for optional asset & maintenance tracking

Mask-Mounted Regulator (Demand Valve): Push-to-Connect

1. When doffing regulator, regulator disengagement shall simultaneously stop air flow and release regulator
2. Regulator shall house electronic module that functions as microphone and HUD system
3. Regulator shall be equipped with variable flow bypass
4. Regulator shall not have exposed wiring in order to prevent snags and increase product durability
5. Regulator shall have two cover options: hard cover or purge cover
6. Regulator shall have fewer than 35 parts that are easily replaceable without special tools
7. Regulator shall have two options for air-supply hose:
 - 1) Continuous hose from pressure reducer to regulator
 - 2) Quick-connect hose that terminates on shoulder in front of user
8. Regulator must be equipped with positive protection Tetraplex Shield membrane that covers diaphragm, preventing permeation of CBRN agents
9. Regulator shall have RFID chip for optional asset & maintenance tracking

Heads-Up Display (HUD)

1. Heads-Up Display (HUD) System shall be integrated within regulator, eliminating snag hazards and increasing product durability
2. HUD shall be powered from central power system
3. HUD System shall eliminate cross-talk among firefighters
4. HUD System shall be immune to radio frequency interference (RFI) and must function properly in close proximity to fire service hand-held radios
5. HUD System shall separate pressure indicators from status indicators:
 - 1) Left: status indicators
 - 2) Right: pressure indicators
6. HUD system shall provide user with remaining cylinder air volume, available in four increments through series of four colored LEDs:
 - 1) Four green lights 76-100% cylinder volume
 - 2) Three green lights 51-75% cylinder volume
 - 3) Two flashing amber lights 36-50% cylinder volume
 - 4) One flashing red light 0-35% cylinder volume
7. HUD status indicators shall be icon-based and display battery life warning, PASS alarms, EVACUATE indicator, and secondary alarm indicator
8. HUD shall incorporate photoelectric sensor that senses ambient light conditions, automatically adjusting display to one of multiple pre-programmed light intensities
9. Buddy lights shall be visible from outside of firefighter's facepiece
10. HUD system shall allow user to select from four modes of operation:
 - 1) Continuous pressure mode that shall always have pressure LEDs on
 - 2) Intermittent pressure mode that shall turn on first three increments when reached for 20 seconds
 - 3) Oscillating pressure mode that shall brighten and dim LEDs every 20 seconds
 - 4) Mixed pressure mode that shall turn on first two increments when reached for 20 seconds and last two increments are in continuous mode
11. HUD shall be field-removable and replaceable without use of special tools

Universal Air Connection (UAC)

1. System shall be capable of:

- 1) Refill within immediately dangerous to life or health (IDLH) atmospheres
- 2) Transfiling between two SCBA wearers (connection allows for donation and receipt of air), providing emergency breathing system (EBS) while maintaining NIOSH approvals
- 3) Quickly refilling (approximately one-minute duration) SCBA cylinder from mobile compressor, cascade system or RIT pack
- 4) Extending wearer's air supply over longer duration when remote cascade system or other compressed gas source is located within remote area

2. Primary UAC shall be illuminated when supply pressure reaches Low Pressure Warning Alarm or can be configured to optional medium pressure warning alarm

3. SCBA shall have secondary options for UAC to be mounted on user's waist

4. Transfiling is possible only with 4500 & 2216 psig

Pressure Reducer (First-Stage Regulator) with Primary Low-Pressure Warning Device

1. Pressure reducer shall incorporate downstream valve to ensure fail-safe design when in open position

2. Pressure reducer shall incorporate bell alarm mechanism

3. Bell alarm mechanism shall be an air-actuated, continuously ringing audible warning alarm, automatically operating when supply cylinder air pressure reaches approximately 35% of rated service life

4. Bell alarm mechanism shall cover multiple levels of frequencies to cover all hearing levels

5. Bell alarm mechanism shall be user-accessible while wearing SCBA

6. Pressure reducer reduces cylinder pressure to outlet pressure not to exceed 115 psi; outlet pressure must be adjustable

7. Pressure reducer shall have flow capacity of 700 liters per minute at full pressure

8. Pressure reducer shall have two options for cylinder connection type: threaded or quick-connect

9. Quick-connect connection shall not be removable from cylinder while under pressure

10. Pressure reducer shall have one option for cylinder connection location: remote connection

11. Pressure reducer shall be capable of converting from threaded to quick-connect or vice versa

12. Pressure reducer body shall be constructed of high-strength aluminum alloy and anodized with Teflon hard coat to minimize corrosion and wear of internal and external components

13. Pressure reducer shall be sealed system that does not allow moisture to enter valve components

14. Pressure reducer shall have no more than 42 individual regulator replacement parts

15. Pressure reducer shall not require special tools for disassembly

16. Pressure reducer shall have two accessory ports, one medium pressure and one high pressure

Cylinders

1. Cylinders with 4500 psig operating pressure must be available in 30-, 45- and 60-minute durations. Cylinders with 5500 psig operating pressure must be available in 30-, 45-, and 60-minute durations

2. Cylinders must be available in two operating pressures: 4500 psig and 5500 psig

3. Cylinder shall be constructed of deep-drawn, seamless aluminum liner that is fully wound over entire surface (except for thick neck area) with high-strength carbon fiber filaments impregnated with epoxy resin

4. Cylinder shall contain cylinder valve that shall incorporate pressure gauge to indicate cylinder pressure at all times. Pressure gauge face shall be luminescent. Hand wheel shall be placed at 90° angle from cylinder axis.

5. Remote connection available as threaded or quick connect

6. Cylinder valve shall incorporate flow control insert to limit air flow over hand wheel's first half-rotation, minimizing propulsion thrust in event that cylinder is mishandled

7. Cylinder valve shall incorporate CGA thread that can be converted to quick-connect cylinder without special tools
8. Cylinder shall have bracket and boot that can be user-installed and provide positioning and added security of cylinder to backplate.
9. Cylinder shall be available with locking handwheel option.

Emergency Egress Rescue Belt (Optional)

1. In addition to meeting NFPA 1983 standard, rescue belt must be NIOSH-certified and NFPA 1981-2018 edition-compliant as SCBA component
2. Rescue system shall include Ara-shield pouch, carabiner or Crosby hook with sewn-in connection and F4 Sterling auto-locking descender
3. Rope shall be available with 50-ft. FireTech 32 rope or aramid/nylon blend
4. Rope shall be detachable under user load, with pull-to-release knot at end of rescue rope as safety feature
5. Rope assembly shall have two end-of-rope flags, one at 15 feet and second at 10 feet
6. Rescue system shall have double-action waist belt buckle as safety feature
7. Rescue system shall have web management system for reduced snag hazards
8. Rope assembly shall be available as replacement part
9. Rescue system shall be capable of quickly detaching from SCBA as safety feature

PASS Device

1. PASS device shall contain power, control and battery modules
2. Power module shall provide power to all electronic SCBA components from battery module and act as central power system
3. Power module shall act as central command center, distributing all information and data among electronic components
4. Battery module shall be powered by six C-cell batteries or one lithium-ion rechargeable battery
5. PASS device shall design for battery level check and removal of batteries while SCBA remains in jump seat
6. Power module shall be capable of illuminating UAC fitting when supply cylinder reaches 35% of rated service time
7. Control module shall have analog and digital display for added redundancy. Analog gauge must be positioned above digital display as viewed by user
8. Control module shall be equipped with full color graphical display. Display shall be reprogrammable and capable of future integrations. Display's background color coordinates with HUD pressure status.
9. Control module shall automatically provide information to user when placed in upright position. Device can be manually activated by pressuring reset button
10. PASS device shall use single line to connect power and control module
11. Control module shall have two reset buttons that perform same function no matter which button is pressed
12. Control module shall have alarm button to activate full alarm and is to be illuminated
13. PASS device shall be capable of being reprogrammed to fire department standard operating procedures (SOP). Using PC software program, configuration tag can be created and tagged on each device needed. Reprogramming options are as follows:
 - 1) Medium pressure alarm.
 - 2) Pressure drop alarm.
 - 3) Primary temperature alarm.
 - 4) Secondary temperature alarm.
 - 5) Audible low-pressure alarm

14. PASS device shall be equipped with buddy lights on firefighter's front and back and viewable from 360° view; two buddy lights on front of user and four buddy lights in back of user
15. PASS device shall have colored buddy lights: green (pressure above 50% and no alarms), yellow (pressure between 36 and 50%) or red (below 36% or alarms are active).
16. Power module shall be equipped with dual sound emitters; sound emitters shall perform at minimum 100 dBa in room temperature
17. PASS device shall be capable of storing up to 36 hours of use information in event log form that are generated each time SCBA is pressurized. Event logs must indicate on/off cycles, alarms, alarm reset, and tagging events
18. PASS device shall be capable of storing periodic logs. Periodic logs must indicate cylinder pressure for each SCBA pressurization stored at 30-second intervals
19. PASS device's event and periodic logs shall provide ability to download to personal computer for maintenance records or for use in incident investigations
20. PASS device shall be immune to radio frequency interference (RFI) and must function properly in close proximity of fire service hand-held radios
21. PASS device shall have optional time-remaining display. Time remaining function must update calculations every 30 seconds based upon user's previous three minutes of air consumption. Initial calculation will appear after three minutes. Calculations can be made to zero pressure, low pressure alarm or medium pressure alarm
22. PASS device shall employ gasket perimeter seal to provide highest protection level against water ingress, while providing ability to upgrade or repair electronics
23. PASS device shall be capable of electronically storing user's name into memory via ID tag
24. PASS device shall be removable with no more than two screws
25. Control module shall have service mode that provides ability to see number of hours used, connect to PC and firmware versions
26. Control module shall incorporate rubber boot for added protection and is to be replaceable
27. Power and Control Modules shall have RFID chip for optional asset & maintenance tracking

Speaker Module

1. Speaker module shall provide amplified speech that removes inhalation breath noise
2. Speaker module shall provide at minimum, 70 dBa output
3. Speaker module shall turn on and off with PASS device
4. Speaker module shall be powered by central power system
5. Speaker module shall be positioned on chest and attached to shoulder straps.
6. Speaker module shall be capable of being mounted on either left or right shoulder strap
7. Speaker module shall easily be attached and removed without special tools
8. Speaker module shall have light to indicate that device is powered on
9. Speaker module shall have on/off button to allow user to manually power off as needed

Emergency Escape Breathing Support System

1. As option, emergency escape breathing support system must be accommodated by SCBA
2. System must be available with common SCBA quick-disconnect fitting
3. System shall connect to intermediate pressure side of SCBA, downstream of pressure reducer
4. System shall have both male and female connections
5. System shall have universal (Rectus) fitting

Carrier and Harness

1. Shoulder harness shall have separate left and right pads for easier and less costly replacement
2. Shoulder harness shall have retro-reflective markings for better visibility within low light conditions
3. Shoulder harness shall have localized friction pads on shoulders to prevent slippage
4. Shoulder harness shall be available in standard and serviceable tunnel
5. Shoulder harness shall have improved color stability up to 600°F
6. Shoulder harness shall be capable of washing at least 40 times while maintaining color fastness
7. Shoulder harness shall have optional chest strap
8. Harness design shall have Kevlar webbing
9. Shoulder harness shall have accessory attachment point available for facepiece or pouch and can be easily moved from one shoulder strap to the other
10. Shoulder harness shall differentiate pad inside from pad outside by color; pad inside is grey and outside is black
11. Waist pad shall be available in three options:
 - 1) Basic – basic pad with straps attaching directly to backplate
 - 2) Adjustable swiveling – standard pad attached to metal bracket that has three positions and automatically centers
 - 3) Rescue Belt II System
12. Adjustable swiveling waist pad shall be one-handed operation and can be performed while on user's back
13. Backplate shall be capable of accepting all three waist pad designs
14. Backplate shall have two side handles and one top handle that are accessible with gloved hand.
15. Backplate side handles shall be capable of 500 lbs. of static force
16. Backplate top handle shall be capable of 1000 lbs. of static force
17. Backplate cylinder band shall be available in metal
18. Waist pad shall be of rigid construction to allow for easy donning and support
19. Waist straps shall be double-pull forward design
20. Harness design shall have regulator keeper for storage that can be attached to waist strap or chest strap
21. Regulator keeper shall allow regulator to be connected at any angle

Weight

1. Weight of SCBA shall not exceed 24 lbs.
2. Weight of facepiece (without regulator, with communications) shall not exceed 1.4 lbs
3. Weight of cylinder and valve assemblies (empty) shall not exceed:

Cylinder Type	Weight
Carbon-wrapped L30	8 lbs. 0 oz.
Carbon-wrapped H30-SL	7 lbs. 4 oz.
Carbon-wrapped H45	9 lbs. 7 oz.
Carbon-wrapped H45-SL	9 lbs. 10 oz.
Carbon-wrapped H60-SL	11 lbs. 12 oz.

Asset and Maintenance Tracking Software

1. Should work on both desktop as well as mobile device
2. Must have the ability to track and report on assets including but not limited to SCBA, Facepieces, Cylinders, and Parts
3. Must have the ability to track and report on Maintenance, including but not limited to Work Orders, cylinder fill and which fill station was used, cylinder hydro static testing, SCBA flow tests
4. Must also have the ability to track and report on Fit Tests

5. Must also have the ability to track and report on Purchase Orders
6. Must have the ability to alert the user on any upcoming fit tests, cylinder hydro static testing, and SCBA overhaul that may be needed
7. Information must be stored in a manner that is updated seamlessly and instantly across all devices

Power Source

1. All components of the SCBA must be powered from single power source
2. Power source must have the ability to interchange between alkaline and rechargeable without making adaptations to the SCBA itself
3. Alkaline battery must be powered by six C cell batteries
4. Alkaline battery must weigh no more than 1lbs. 5oz.
5. Rechargeable battery must weigh no more than 1lb.
6. Rechargeable battery must recharge from full discharge in less than 7 hours
7. Rechargeable battery recharge temperature range must fall between 32°F and 104°F.
8. Rechargeable battery will have full charge capabilities for no less than 300 cycles.
9. Rechargeable battery Charger must be a smart charger which will rapid charge, analyze condition, and switch to trickle charge mode when charge is complete
10. Rechargeable battery Charger must have charging indication lights

Integrated Thermal Imaging Camera

1. Must have option for thermal imaging camera to be integrated into control module color display
2. Must have 220 x 176 resolution
3. Integrated Thermal Imaging Camera must have option for 5 user selected color palettes available on control module color display
4. Must be powered by central power source
5. Must have 30 hZ refresh rate
6. Thermal Imaging Camera must add no more than 4.2 oz. in additional weight to the SCBA
7. Thermal Imaging Camera must add no more than 1.25" in additional length to the SCBA

Upgradeability

1. Must be Bluetooth® enabled
2. Must be able to receive updates to firmware via a Bluetooth® connection
3. Control module must have Bluetooth® icon visible to display connection status
4. Must have the ability to upgrade standard control module to integrated thermal imaging camera control module

FORM 1

COMMUNICATION CONCERNING THIS SOLICITATION

THIS PAGE MUST BE SIGNED AND RETURNED WITH THE VENDOR'S BID/PROPOSAL. FAILURE TO INCLUDE THIS FORM WILL AUTOMATICALLY RENDER VENDOR'S RESPONSE NON-RESPONSIVE.

.....

ALL QUESTIONS OR CLARIFICATIONS CONCERNING THIS SOLICITATION SHALL BE SUBMITTED IN WRITING. THE CITY WILL NOT ORALLY OR TELEPHONICALLY ADDRESS ANY QUESTION OR CLARIFICATION REGARDING BID/PROPOSAL SPECIFICATIONS. IF A VENDOR VISITS OR CALLS THE PURCHASING DIVISION WITH SUCH QUESTIONS, HE OR SHE WILL BE INSTRUCTED TO SUBMIT THE QUESTIONS IN WRITING.

ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. BIDDERS SHALL NOT CONTACT CITY EMPLOYEES, DEPARTMENT HEADS, USING AGENCIES, EVALUATION COMMITTEE MEMBERS, INCLUDING NON-CCG EMPLOYEES, CONTRACTED PERSONNEL ASSOCIATED WITH THIS PARTICULAR PROJECT (I.E. ARCHITECTS, ENGINEERS, CONSULTANTS), OR ELECTED OFFICIALS WITH QUESTIONS OR ANY OTHER CONCERNS ABOUT THE SOLICITATION. QUESTIONS, CLARIFICATIONS, OR CONCERNS SHALL BE SUBMITTED TO THE PURCHASING DIVISION IN WRITING. IF IT IS NECESSARY THAT A TECHNICAL QUESTION NEEDS ADDRESSING, THE PURCHASING DIVISION WILL FORWARD SUCH TO THE USING AGENCY, WHO WILL SUBMIT A WRITTEN RESPONSE.

THE PURCHASING DIVISION WILL FORWARD WRITTEN RESPONSES TO THE RESPECTIVE BIDDER. IF IT BECOMES NECESSARY TO REVISE ANY PART OF THIS SOLICITATION, A WRITTEN ADDENDUM WILL BE ISSUED TO ALL BIDDERS.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE BIDDERS IN A WRITTEN ADDENDUM FROM THE PURCHASING MANAGER.

BIDDERS ARE INSTRUCTED TO USE THE ENCLOSED "QUESTION/CLARIFICATION FORM" TO FAX OR EMAIL QUESTION. QUESTIONS AND REQUESTS FOR CLARIFICATION MUST BE SUBMITTED AT LEAST FIVE (5) BUSINESS DAYS BEFORE THE DUE DATE.

ANY REQUEST/CONCERN/PROTEST, AFTER A SOLICITATION HAS CLOSED AND PENDING AWARD, MUST ALSO BE SUBMITTED IN WRITING TO THE PURCHASING DIVISION.

I agree to forward all communication about this solicitation, in writing, to the Purchasing Division. I understand that communication with other persons, other than the Purchasing Division, will render my Bid/Proposal response non-responsive and I will no longer be considered in the solicitation process.

Vendor Name: _____

Print Name of Authorized Agent: _____

Signature of Authorized Agent: _____

FORM 2

BID FORM BREATHING APPARATUS (ANNUAL CONTRACT) RFB NO. 20-0041

IMPORTANT INFORMATION:

PLEASE SUBMIT ONE (1) ORIGINAL AND ONE (1) IDENTICAL COPY OF EACH BID.

By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, **WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE**. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete". Use the following check-list to verify the items are included in sealed bid:

- ☐ Communication Concerning This Solicitation (Form 1) ☐ Bid Form (Form 2)
☐ Contract Signature Page (Form 3) ☐ Insurance (Form 4) ☐ W-9 Rev 2018 (Form 5)
☐ Product Literature ☐ Proof of MSA Dealer ☐ Catalogs
☐ Warranty ☐ Sample Invoice ☐ Business License

Initial below to acknowledge receipt of the following addenda (if any):

Addendum No. 1 _____ Addendum No. 2 _____ Addendum No. 3 _____

ESTIMATED QUANTITY	DESCRIPTION	MANUFACTURING	UNIT COST*	EXTENDED COST*
30	FireHawk M7XT 4500 PSIG Air Masks Self Contained Breathing Apparatus with Mask-Mounted Regulators, Complete Unit	A-M7XTHD13C0B11AAB0	\$	\$
30	Spare Mask for above	10149288	\$	\$
30	(MSA G1 SCBA Air Mask) (4500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators		\$	\$
30	MSA 4500 PSI, 45 Min, Carbon Fiber, Stealth Cylinder	816115	\$	\$
30	(MSA G1 SCBA Air Mask) (5500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators		\$	\$
30	MSA 5500 PSI, 45 Min, Carbon Fiber Stealth Cylinder		\$	\$
TOTAL CONTRACT VALUE				\$
Discount for replacement parts _____ % discount.				
1	POSICHEK III YEARLY CALIBRATION	Honeywell	\$	\$
*All shipping, delivery, and/or shipping charges must be included unit prices. The City will pay no additional shipping, delivery, and/or shipping charges.				

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all services and terms of the Columbus Consolidated Government.

Vendor Business Name _____ Email Address _____
 Authorized Signature _____ Print Name _____ Date _____
 If certified as a DBE or WBE, list the certifying agency: _____

FORM 3

CONTRACT SIGNATURE PAGE BREATHING APPARATUS (ANNUAL CONTRACT) RFB No. 20-0041

THE UNDERSIGNED HEREBY DECLARES THAT HE HAS/THEY HAVE CAREFULLY EXAMINED THE SPECIFICATIONS HEREIN REFERRED TO AND WILL PROVIDE ALL EQUIPMENT, TERMS AND SERVICES TO THE CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA.

Witness as to the signing of the contract

Signature of Authorized Representative /Date

Witness as to the signing of the contract

Print Name and Title of Signatory

(Corporate seal, if applicable)

Company Name

Company Ordering Address

Company Payment Address

Contact _____

Contact _____

Email _____

Email _____

Telephone _____

Telephone _____

Fax _____

Fax _____

CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA

Accepted this ____ day of _____ 20 ____

APPROVED AS TO LEGAL FORM:

Isaiah Hugley, City Manager

Clifton C. Fay, City Attorney

ATTEST:

Sandra T. Davis, Clerk of Council

[Grab your reader's attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

FORM 4**SOLICITATION ID: RFB No. 20-0048****BREATHING APPARATUS (Annual Contract)****INSURANCE CHECKLIST****CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND
ENDORSEMENTS INDICATED BY "X"**

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	
	Comprehensive General Liability:		
X	2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	3. Independent Contractors and Sub - Contractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	Automobile Liability:		
X	7. Owned/Hired/Non-Owned Vehicles/ Employer non ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	
	Other:		
X	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	
X	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	
	10. Personal and Advertising Injury Liability	\$1 Million each offense, \$1 Million annual aggregate	
	11. Professional Liability	\$1 Million per occurrence/claim	
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
	14. Medical Malpractice	\$1 Million per occurrence/claim	
	15. Medical Professional Liability	\$1 Million per occurrence/claim	

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
	16. Dishonesty Bond		
	17. Builder's Risk	Provide Coverage in the full amount of contract	
	18. XCU (Explosive, Collapse, Underground) Coverage		
	19. USL&H (Long Shore Harbor Worker's Compensation Act)		
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment Liability	\$2 Million per occurrence/claim	
X	22. Carrier Rating shall be Best's Rating of A-VII or its equivalents		
X	23. Notice of Cancellation, non-renewal or material change in coverage shall be provided to City at least 30 days prior to action.		
X	24. The City shall be named Additional Insured on all policies		
X	25. Certificate of Insurance shall show Bid Number and Bid Title		
	26. Pollution:	\$2 Million per occurrence/claim	

*If offeror's employees will be using their privately-owned vehicles while working on this contract and are privately insured, please state that fact in the **Bidders Limits/Response** column of the insurance checklist.

BIDDER'S STATEMENT:

If awarded the contract, I will comply with contract insurance requirements and provide the required Certificate(s).

BIDDER NAME: _____

AUTH. SIGNATURE: _____

*****COMPLETE THIS PAGE AND RETURN WITH BID*****

FORM 5

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ (Applies to accounts maintained outside the U.S.)	
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
				-				
or								
Employer identification number								
				-				

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

Cat. No. 10231X

Form **W-9** (Rev. 10-2018)

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ³ The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor ³
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

*Note: The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/identitytheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

☒ **CHECKLIST** ☒

**Breathing Apparatus (Annual Contract)
RFB No. 20-0041**

CHECK OFF EACH ITEM AS THE NECESSARY ACTION IS COMPLETED:

___ 1. PRICING HAS BEEN CHECKED.

___ 2. ADDENDA (IF ANY) HAVE BEEN SIGNED.

___ 3. ALL SUBMISSION REQUIREMENTS ARE INCLUDED.

___ 4. THE MAILING ENVELOPE HAS BEEN ADDRESSED TO:

**Columbus Consolidated Government
Purchasing Division – Attn: Patti Postorino
5th Floor, Tower Bldg.
100 10th Street
Columbus, Georgia 31901**

___ 5. THE MAILING ENVELOPE HAS BEEN SEALED **AND** MARKED WITH THE:

BID TITLE: **Breathing Apparatus (Annual Contract)**
BID NUMBER: **RFB 20-0041**
OPENING DATE: **Wednesday, February 12, 2020**

 PLEASE CONSIDER THE ENVIRONMENT 

___ 6. It is not necessary to return all pages of these specifications with bid response.
Please submit only what is required; keep the remaining pages of this document for your records/recycle.

*** Opening date subject to change by Addendum**

This checklist is for informative purposes only and is not intended to be a part of the formal bid document.

EXHIBIT C

*Columbus Consolidated Government
Breathing Apparatus (Annual Contract)*

RFB No. 20-0041

Fireline, Inc.

Bid Submission

☒ **CHECKLIST** ☒

**Breathing Apparatus (Annual Contract)
RFB No. 20-0041**

CHECK OFF EACH ITEM AS THE NECESSARY ACTION IS COMPLETED:

X 1. PRICING HAS BEEN CHECKED.

X 2. ADDENDA (IF ANY) HAVE BEEN SIGNED.

X 3. ALL SUBMISSION REQUIREMENTS ARE INCLUDED.

X 4. THE MAILING ENVELOPE HAS BEEN ADDRESSED TO:

**Columbus Consolidated Government
Purchasing Division – Attn: Patti Postorino
5th Floor, Tower Bldg.
100 10th Street
Columbus, Georgia 31901**



___ 5. THE MAILING ENVELOPE HAS BEEN SEALED **AND** MARKED WITH THE:

BID TITLE: **Breathing Apparatus (Annual Contract)**
BID NUMBER: **RFB 20-0041**
OPENING DATE: **Wednesday, February 12, 2020**

 PLEASE CONSIDER THE ENVIRONMENT 

___ 6. It is not necessary to return all pages of these specifications with bid response.
Please submit only what is required; keep the remaining pages of this document for your records/recycle.

*** Opening date subject to change by Addendum**

This checklist is for informative purposes only and is not intended to be a part of the formal bid document.

FORM 1

COMMUNICATION CONCERNING THIS SOLICITATION

THIS PAGE MUST BE SIGNED AND RETURNED WITH THE VENDOR'S BID/PROPOSAL. FAILURE TO INCLUDE THIS FORM WILL AUTOMATICALLY RENDER VENDOR'S RESPONSE NON-RESPONSIVE.

.....

ALL QUESTIONS OR CLARIFICATIONS CONCERNING THIS SOLICITATION SHALL BE SUBMITTED IN WRITING. THE CITY WILL NOT ORALLY OR TELEPHONICALLY ADDRESS ANY QUESTION OR CLARIFICATION REGARDING BID/PROPOSAL SPECIFICATIONS. IF A VENDOR VISITS OR CALLS THE PURCHASING DIVISION WITH SUCH QUESTIONS, HE OR SHE WILL BE INSTRUCTED TO SUBMIT THE QUESTIONS IN WRITING.

ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. BIDDERS SHALL NOT CONTACT CITY EMPLOYEES, DEPARTMENT HEADS, USING AGENCIES, EVALUATION COMMITTEE MEMBERS, INCLUDING NON-CCG EMPLOYEES, CONTRACTED PERSONNEL ASSOCIATED WITH THIS PARTICULAR PROJECT (I.E. ARCHITECTS, ENGINEERS, CONSULTANTS), OR ELECTED OFFICIALS WITH QUESTIONS OR ANY OTHER CONCERNS ABOUT THE SOLICITATION. QUESTIONS, CLARIFICATIONS, OR CONCERNS SHALL BE SUBMITTED TO THE PURCHASING DIVISION IN WRITING. IF IT IS NECESSARY THAT A TECHNICAL QUESTION NEEDS ADDRESSING, THE PURCHASING DIVISION WILL FORWARD SUCH TO THE USING AGENCY, WHO WILL SUBMIT A WRITTEN RESPONSE.

THE PURCHASING DIVISION WILL FORWARD WRITTEN RESPONSES TO THE RESPECTIVE BIDDER. IF IT BECOMES NECESSARY TO REVISE ANY PART OF THIS SOLICITATION, A WRITTEN ADDENDUM WILL BE ISSUED TO ALL BIDDERS.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE BIDDERS IN A WRITTEN ADDENDUM FROM THE PURCHASING MANAGER.

BIDDERS ARE INSTRUCTED TO USE THE ENCLOSED "QUESTION/CLARIFICATION FORM" TO FAX OR EMAIL QUESTION. QUESTIONS AND REQUESTS FOR CLARIFICATION MUST BE SUBMITTED AT LEAST FIVE (5) BUSINESS DAYS BEFORE THE DUE DATE.

ANY REQUEST/CONCERN/PROTEST, AFTER A SOLICITATION HAS CLOSED AND PENDING AWARD, MUST ALSO BE SUBMITTED IN WRITING TO THE PURCHASING DIVISION.

I agree to forward all communication about this solicitation, in writing, to the Purchasing Division. I understand that communication with other persons, other than the Purchasing Division, will render my Bid/Proposal response non-responsive and I will no longer be considered in the solicitation process.

Vendor Name: FIRELINE, INC.

Print Name of Authorized Agent: HIEN NGUYEN

Signature of Authorized Agent: Hien Nguyen

FORM 2

BID FORM

BREATHING APPARATUS (ANNUAL CONTRACT)

RFB NO. 20-0041

IMPORTANT INFORMATION:

PLEASE SUBMIT ONE (1) ORIGINAL AND ONE (1) IDENTICAL COPY OF EACH BID.
By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "incomplete". Use the following check-list to verify the items are included in sealed bid:

- ☐ Communication Concerning This Solicitation (Form 1) ☐ Bid Form (Form 2)
☐ Contract Signature Page (Form 3) ☐ Insurance (Form 4) ☐ W-9 Rev 2018 (Form 5)
☐ Product Literature ☐ Proof of MSA Dealer ☐ Catalogs
☐ Warranty ☐ Sample Invoice ☐ Business License

Initial below to acknowledge receipt of the following addenda (if any):

Addendum No. 1 _____ Addendum No. 2 _____ Addendum No. 3 _____

ESTIMATED QUANTITY	DESCRIPTION	MANUFACTURING	UNIT COST*	EXTENDED COST*
30	FireHawk M7XT 4500 PSIG Air Masks Self Contained Breathing Apparatus with Mask-Mounted Regulators, Complete Unit	A-M7XTHD13C0B11AAB0	\$	\$
30	Spare Mask for above	10149288	\$ 440 ⁰⁰	\$ 13,200 ⁰⁰
30	(MSA G1 SCBA Air Mask) (4500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators	A-G1FS-422 MA2C2 LAA 10156459 MASK 10156424-SP (Cylinder)	\$ 5,350 ⁰⁰ \$ 295 ⁰⁰ \$ 1,150 ⁰⁰	\$ 160,500 ⁰⁰ \$ 8,850 ⁰⁰ \$ 34,500 ⁰⁰
30	MSA 4500 PSI, 45 Min, Carbon Fiber, Stealth Cylinder	10156424-SP	\$ 1,150 ⁰⁰	\$ 34,500 ⁰⁰
30	(MSA G1 SCBA Air Mask) (5500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators		\$	\$
30	MSA 5500 PSI, 45 Min, Carbon Fiber Stealth Cylinder		\$	\$

PRICE TO BE GOOD THROUGH FEBRUARY 12-2022 TOTAL CONTRACT VALUE \$ 238,350⁰⁰

Discount for replacement parts 20 % discount. OFF LIST PRICE

1	POSICHEK III YEARLY CALIBRATION	Honeywell	\$ 1,200 ⁰⁰	\$ 1,200 ⁰⁰ PER YEAR
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*All shipping, delivery, and/or shipping charges must be included unit prices. The City will pay no additional shipping, delivery, and/or shipping charges.

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all services and terms of the Columbus Consolidated Government.

Vendor Business Name FIRELINE, INC. Email Address Hnguyen@FIRELINEINC.COM

Authorized Signature Hien Nguyen Print Name HIEN NGUYEN Date 3.24.2020

If certified as a DBE or WBE, list the certifying agency: _____

FORM 2

BID FORM BREATHING APPARATUS (ANNUAL CONTRACT) RFB NO. 20-0041

IMPORTANT INFORMATION:

PLEASE SUBMIT ONE (1) ORIGINAL AND ONE (1) IDENTICAL COPY OF EACH BID.
By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, **WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE**. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete". Use the following check-list to verify the items are included in sealed bid:

- ☐ Communication Concerning This Solicitation (Form 1) ☐ Bid Form (Form 2)
☐ Contract Signature Page (Form 3) ☐ Insurance (Form 4) ☐ W-9 Rev 2018 (Form 5)
☐ Product Literature ☐ Proof of MSA Dealer ☐ Catalogs
☐ Warranty ☐ Sample Invoice ☐ Business License

Initial below to acknowledge receipt of the following addenda (if any):

Addendum No. 1 _____ Addendum No. 2 _____ Addendum No. 3 _____

ESTIMATED QUANTITY	DESCRIPTION	MANUFACTURING	UNIT COST*	EXTENDED COST*
30	FireHawk M7XT 4500 PSIG Air Masks Self Contained Breathing Apparatus with Mask-Mounted Regulators, Complete Unit	A-M7XTHD13C0B11AAB0 NO LONGER AVAILABLE	\$ /	\$ /
30	Spare Mask for above	10149288	\$ 440 ⁰⁰	\$ 13,200 ⁰⁰
30	(MSA G1 SCBA Air Mask) (4500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators	A-G1FS-422MA2C0LAA w/o . Buddy Breathing. A-G1FS-422MA2C2LAA w/ Buddy Breathing	\$	\$
30	MSA 4500 PSI, 45 Min, Carbon Fiber, Stealth Cylinder	816115	\$	\$
30	(MSA G1 SCBA Air Mask) (5500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators	PLEASE SEE ATTACHED QUOTE	\$	\$
30	MSA 5500 PSI, 45 Min, Carbon Fiber Stealth Cylinder		\$	\$
TOTAL CONTRACT VALUE				\$ PLEASE SEE ATTACHED QUOTE.
Discount for replacement parts <u>20</u> % discount. OFF LIST PRICE				
1	POSICHEK III YEARLY CALIBRATION	Honeywell	\$ 1,200 ⁰⁰	\$ 1,200 ⁰⁰
*All shipping, delivery, and/or shipping charges must be included unit prices. The City will pay no additional shipping, delivery, and/or shipping charges.				

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all services and terms of the Columbus Consolidated Government.

FIRELINE INC

Hnguyen@FIRELINEINC.COM
Email Address

Vendor Business Name

Hien Nguyen

HIEN NGUYEN

2.11.2020

Authorized Signature

Print Name

Date

If certified as a DBE or WBE, list the certifying agency: _____

**FireLine**
INC.

725 Patrick Industrial Lane
Winder, GA. 30680
PH: (770) 868-4448
FAX: (770) 868-4455

CUSTOMER QUOTE

DATE	QUOTE #
2/11/2020	345875

BILLING ADDRESS
Consolidated Govt of Columbus Accounting Division P.O. Box 1340 Columbus, GA 31902-1340 Attn: PATRICK FIELDS

SHIPPING ADDRESS
Columbus Fire Dept. 1905 Third Avenue Columbus, GA 31901 Attn : Capt. John Shull

TERMS	REP	FOB
Net 30	HNN	WINDER

ITEM	DESCRIPTION	QTY	UNIT PRICE	TOTAL
MISC. PART *	*** RFP No. 20-0041 BREATHING APPARATUS (ANNUAL CONTRACT) *** PRICE TO BE GOOD THROUGH " FEBRUARY 12 -2022 " *** <u>OPTION ONE:</u> MSA G1 SCBA FIRE SERVICE EDITION P/N: A-G1FS-422MA2COLAR (<u>WITH-OUT BUDDY BREATHING SYSTEM.</u> * 4500 PSI HIGH PRESSURE SYSTEM ,CGA THREADED STYLE CYLINDER CONNECTION. * ADJUSTABLE & SWIVELING LUMBAR PAD SUPPORT AND CHES STRAP. * VOICE AMPLIFICATION SYSTEM AND INTEGRATED PASS ALARM. * RECHARGEABLE BATTERY. * 2018 NFPA COMPLIANT . *** <u>MASK AND CYLINDER ARE SOLD AS SEPARATE ITEMS</u>	30	4,850.00	145,500.00
10156459	MSA G1 FACE MASK W/ 4 POINT ADJUSTMENT HEAD HARNESS - MEDIUM 2-19	30	295.00	8,850.00
10156424-SP	MSA G1 FIRE SERVICE 4500 PSI 45 MIN. CYLINDER 9-18	30	1,150.00	34,500.00
10156424-SP	MSA G1 FIRE SERVICE 4500 PSI 45 MIN. CYLINDER 9-18 *** <u>SPARE CYLINDER</u>	30	1,150.00	34,500.00
QUOTE VALID FOR 30 DAYS. MAY BE EXTENDED PER FIRELINE, INC. APPROVAL		SUBTOTAL \$223,350.00		
30 DAY RETURN CONDITIONS: FireLine, Inc. will make final determination on return authorization. Electrical, hydraulic, special order, and fabricated parts are nonreturnable. Any parts that are returned to FireLine, Inc. without prior authorization or does not meet stated return requirements will be scrapped without notification and credit denied.		SALES TAX (0.0%) \$0.00		
		TOTAL \$223,350.00		



FireLine
INC.

725 Patrick Industrial Lane
Winder, GA. 30680
PH: (770) 868-4448
FAX: (770) 868-4455

CUSTOMER QUOTE

DATE	QUOTE #
2/11/2020	345875

BILLING ADDRESS
Consolidated Govt of Columbus Accounting Division P.O. Box 1340 Columbus, GA 31902-1340 Attn: PATRICK FIELDS

SHIPPING ADDRESS
Columbus Fire Dept. 1905 Third Avenue Columbus, GA 31901 Attn : Capt. John Shull

TERMS	REP	FOB
Net 30	HNN	WINDER

ITEM	DESCRIPTION	QTY	UNIT PRICE	TOTAL
MISC. PART	*** RFP No. 20-0041 BREATHING APPARATUS (ANNUAL CONTRACT) *** PRICE TO BE GOOD THROUGH " FEBRUARY 12 -2022 " *** OPTION TWO : MSA G1 SCBA FIRE SERVICE EDITION P/N: A-G1FS-422MA2C2LAR (WITH BUDDY BREATHING SYSTEM.) * 4500 PSI HIGH PRESSURE SYSTEM ,CGA THREADED STYLE CYLINDER CONNECTION. * ADJUSTABLE & SWIVELING LUMBAR PAD SUPPORT AND CHES STRAP. * VOICE AMPLIFICATION SYSTEM AND INTEGRATED PASS ALARM. * RECHARGEABLE BATTERY. * 2018 NFPA COMPLIANT . *** MASK AND CYLINDER ARE SOLD AS SEPARATE ITEMS	30	5,350.00	160,500.00
10156459	MSA G1 FACE MASK W/ 4 POINT ADJUSTMENT HEAD HARNESS - MEDIUM 2-19	30	295.00	8,850.00
10156424-SP	MSA G1 FIRE SERVICE 4500 PSI 45 MIN. CYLINDER 9-18	30	1,150.00	34,500.00
10156424-SP	MSA G1 FIRE SERVICE 4500 PSI 45 MIN. CYLINDER 9-18 *** SPARE CYLINDER	30	1,150.00	34,500.00

QUOTE VALID FOR 30 DAYS. MAY BE EXTENDED PER FIRELINE, INC. APPROVAL

SUBTOTAL \$238,350.00

SALES TAX (0.0%) \$0.00

TOTAL \$238,350.00

30 DAY RETURN CONDITIONS: FireLine, Inc. will make final determination on return authorization. Electrical, hydraulic, special order, and fabricated parts are nonreturnable. Any parts that are returned to FireLine, Inc. without prior authorization or does not meet stated return requirements will be scrapped without notification and credit denied.



FireLine
INC.

725 Patrick Industrial Lane
Winder, GA. 30680
PH: (770) 868-4448
FAX: (770) 868-4455

CUSTOMER QUOTE

DATE	QUOTE #
2/11/2020	345875

BILLING ADDRESS
Consolidated Govt of Columbus Accounting Division P.O. Box 1340 Columbus, GA 31902-1340 Attn: PATRICK FIELDS

SHIPPING ADDRESS
Columbus Fire Dept. 1905 Third Avenue Columbus, GA 31901 Attn : Capt. John Shull

TERMS	REP	FOB
Net 30	HNN	WINDER

ITEM	DESCRIPTION	QTY	UNIT PRICE	TOTAL
MISC. PART	*** RFP No. 20-0041 BREATHING APPARATUS (ANNUAL CONTRACT) *** PRICE TO BE GOOD THROUGH " FEBRUARY 12 -2022 " *** OPTION THREE : 5000 PSI HIGH PRESSURE SYSTEM MSA G1 SCBA FIRE SERVICE EDITION P/N: A-G1FS-522MA2C0LAR (WITH-OUT BUDDY BREATHING SYSTEM.) * 5000 PSI HIGH PRESSURE SYSTEM ,CGA THREADED STYLE CYLINDER CONNECTION. * ADJUSTABLE & SWIVELING LUMBAR PAD SUPPORT AND CHES STRAP. * VOICE AMPLIFICATION SYSTEM AND INTEGRATED PASS ALARM. * RECHARGEABLE BATTERY. * 2018 NFPA COMPLIANT . *** MASK AND CYLINDER ARE SOLD AS SEPARATE ITEMS	30	5,120.00	153,600.00
10156459	MSA G1 FACE MASK W/ 4 POINT ADJUSTMENT HEAD HARNESS - MEDIUM 2-19	30	295.00	8,850.00
MISC. PART	MSA 5000 PSI HP CARBON CYLINDER / 45 MIN	30	1,250.00	37,500.00
MISC. PART	MSA 5000 PSI HP CARBON CYLINDER / 45 MIN	30	1,250.00	37,500.00

QUOTE VALID FOR 30 DAYS. MAY BE EXTENDED PER FIRELINE, INC. APPROVAL

30 DAY RETURN CONDITIONS: FireLine, Inc. will make final determination on return authorization. Electrical, hydraulic, special order, and fabricated parts are nonreturnable. Any parts that are returned to FireLine, Inc. without prior authorization or does not meet stated return requirements will be scrapped without notification and credit denied.

SUBTOTAL	\$237,450.00
SALES TAX (0.0%)	\$0.00
TOTAL	\$237,450.00

**FireLine**
INC.

725 Patrick Industrial Lane
Winder, GA. 30680
PH: (770) 868-4448
FAX: (770) 868-4455

CUSTOMER QUOTE

DATE	QUOTE #
2/11/2020	345879

BILLING ADDRESS
Consolidated Govt of Columbus Accounting Division P.O. Box 1340 Columbus, GA 31902-1340 Attn: PATRICK FIELDS

SHIPPING ADDRESS
Columbus Fire Dept. 1905 Third Avenue Columbus, GA 31901 Attn : Capt. John Shull

TERMS	REP	FOB
Net 30	HNN	WINDER

ITEM	DESCRIPTION	QTY	UNIT PRICE	TOTAL
	*** RFP No. 20-0041 BREATHING APPARATUS (ANNUAL CONTRACT) *** PRICE TO BE GOOD THROUGH " FEBRUARY 12-2022 . *** ACCESSORIES AND REPAIR PARTS :			
MISC. PART	MSA P/N: 10156459 / G1 FACE MASK	1	295.00	295.00
MISC. PART	MSA P/N: 10156424-SP / SPARE 4500 PSI - 45 MIN CYLINDER	1	1,150.00	1,150.00
MISC. PART	MSA P/N : 10185509 / SPARE 5000 PSI - 45 MIN CYLINDER	1	1,250.00	1,250.00
10158385	MSA G1 BATTERY CHARGER (SIX BAY CHARGERS THAT CAN CHARGE A BATTERY FROM 0-100% IN SIX HOURS) 1-19	1	675.00	675.00
10148741-SP	MSA G1 RECHARGEABLE BATTERY PACK 10-19	1	330.00	330.00
10148740-SP	MSA , G1 , AKALINE BATTERY PACK (TO BE USED ON G1 SCBA. 5-19	1	280.00	280.00
10083436	MSA M7 HARNESS PLATE WITH CYLINDER BAND . 6-19	1	195.00	195.00
10149288	MSA ULTRA ELITE XT MASK, 2013 NFPA - MEDIUM 2-20	1	440.00	440.00
10149310	MSA ULTRA ELITE XT MASK, 2013 NFPA - SMALL 2-20	1	440.00	440.00
10149332	MSA ULTRA ELITE XT MASK, 2013 NFPA - LARGE 2-20	1	440.00	440.00
816115	MSA STEALTH LOW PRESSURE 30+ CYLINDER	1	1,350.00	1,350.00
FRT. TBA	FREIGHT (TBA) + S/H CHARGES TO BE ADDED AT FINAL INVOICE	1	0.00	0.00

QUOTE VALID FOR 30 DAYS. MAY BE EXTENDED PER FIRELINE, INC. APPROVAL

SUBTOTAL

30 DAY RETURN CONDITIONS: FireLine, Inc. will make final determination on return authorization. Electrical, hydraulic, special order, and fabricated parts are nonreturnable. Any parts that are returned to FireLine, Inc. without prior authorization or does not meet stated return requirements will be scrapped without notification and credit denied.

SALES TAX (0.0%)**TOTAL**



FireLine
INC.

725 Patrick Industrial Lane
Winder, GA. 30680
PH: (770) 868-4448
FAX: (770) 868-4455

CUSTOMER QUOTE

DATE	QUOTE #
2/11/2020	345879

BILLING ADDRESS
Consolidated Govt of Columbus Accounting Division P.O. Box 1340 Columbus, GA 31902-1340 Attn: PATRICK FIELDS

SHIPPING ADDRESS
Columbus Fire Dept. 1905 Third Avenue Columbus, GA 31901 Attn : Capt. John Shull

TERMS	REP	FOB
Net 30	HNN	WINDER

ITEM	DESCRIPTION	QTY	UNIT PRICE	TOTAL
	*** COLUMBUS FIRE RESCUE ALSO GET 20 % OFF LIST PRICE FOR ALL OF THE REPLACEMENT OR REPAIR PARTS FOR THE MSA SCBA .			
QUOTE VALID FOR 30 DAYS. MAY BE EXTENDED PER FIRELINE, INC. APPROVAL		SUBTOTAL \$6,845.00		
30 DAY RETURN CONDITIONS: FireLine, Inc. will make final determination on return authorization. Electrical, hydraulic, special order, and fabricated parts are nonreturnable. Any parts that are returned to FireLine, Inc. without prior authorization or does not meet stated return requirements will be scrapped without notification and credit denied.		SALES TAX (0.0%) \$0.00		
		TOTAL \$6,845.00		

FORM 4**SOLICITATION ID: RFB No. 20-0048****BREATHING APPARATUS (Annual Contract)****INSURANCE CHECKLIST****CERTIFICATE OF INSURANCE MUST SHOW ALL COVERAGE AND
ENDORSEMENTS INDICATED BY "X"**

CSL = Combined Single Limit; BI = Bodily Injury; PD=Property Damage

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
X	1. Worker's Compensation and Employer's Liability	STATUTORY REQUIREMENTS	
	Comprehensive General Liability:		
X	2. General Liability Premises/Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	3. Independent Contractors and Sub - Contractors	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	4. Products Liability	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	5. Completed Operations	\$1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
X	6. Contractual Liability (Must be shown on Certificate)	\$ 1 Million CSL BI/PD each occurrence, \$1 Million annual aggregate	
	Automobile Liability:		
X	7. Owned/Hired/Non-Owned Vehicles/ Employer non ownership	\$1 Million BI/PD each Accident, Uninsured Motorist	
	Other:		
X	8. Miscellaneous Errors and Omissions	\$1 Million per occurrence/claim	
X	9. Umbrella/Excess Liability	\$1 Million Bodily Injury, Property Damage and Personal Injury	
	10. Personal and Advertising Injury Liability	\$1 Million each offense, \$1 Million annual aggregate	
	11. Professional Liability	\$1 Million per occurrence/claim	
	12. Architects and Engineers	\$1 Million per occurrence/claim	
	13. Asbestos Removal Liability	\$2 Million per occurrence/claim	
	14. Medical Malpractice	\$1 Million per occurrence/claim	
	15. Medical Professional Liability	\$1 Million per occurrence/claim	

Required Coverage(s)		Limits (Figures denote minimums)	Bidders Limits/Response
	16. Dishonesty Bond		
	17. Builder's Risk	Provide Coverage in the full amount of contract	
	18. XCU (Explosive, Collapse, Underground) Coverage		
	19. USL&H (Long Shore Harbor Worker's Compensation Act)		
	20. Contractor Pollution Liability	\$2 Million per occurrence/claim	
	21. Environmental Impairment Liability	\$2 Million per occurrence/claim	
X	22. Carrier Rating shall be Best's Rating of A-VII or its equivalents		
X	23. Notice of Cancellation, non-renewal or material change in coverage shall be provided to City at least 30 days prior to action.		
X	24. The City shall be named Additional Insured on all policies		
X	25. Certificate of Insurance shall show Bid Number and Bid Title		
	26. Pollution:	\$2 Million per occurrence/claim	

*If offeror's employees will be using their privately-owned vehicles while working on this contract and are privately insured, please state that fact in the **Bidders Limits/Response** column of the insurance checklist.

BIDDER'S STATEMENT:

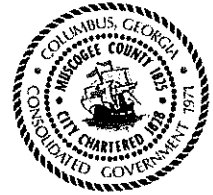
If awarded the contract, I will comply with contract insurance requirements and provide the required Certificate(s).

BIDDER NAME: FireLine, Inc

AUTH. SIGNATURE: George McDowell

*****COMPLETE THIS PAGE AND RETURN WITH BID*****

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, COLUMBUS, GEORGIA 31901
P. O. Box 1340, COLUMBUS, GEORGIA 31902-1340
706-225-4087, Fax 706-225-3033
www.columbusga.org

Date: January 14, 2020

REQUEST FOR BIDS: RFB No. 20-0041	Qualified vendors are invited to submit sealed bids, subject to conditions and instructions as specified for the furnishing of: BREATHING APPARATUS (ANNUAL CONTRACT)
GENERAL SCOPE	Provide the Columbus Fire and EMS Department with self-contained breathing apparatus with mask-mounted regulators, stealth cylinders, and replacement parts and other related services. The contract term will be for two years with the option to renew for three additional twelve-month periods.
DUE DATE	FEBRUARY 12, 2020 - 2:30 PM (Eastern) Bids must be received and date/time stamped on or before the due date by the Finance Department/Purchasing Division, 5th Floor - Government Center, 100 10th St, Columbus, GA. Bids will be opened during the 3:00 p.m. hour in the Conference Room of the Purchasing Division. Bidders are not required, but are invited, to attend the bid opening.
ADDENDA	<u>IMPORTANT INFORMATION</u> Any and all addenda will be posted on the Purchasing Division's web page, at https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm . It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a quote.
"NO BID" RESPONSE	Refer to the form on page 3 if you are not interested in this invitation.

Andrea J. McCorvey
Purchasing Division Manager



IMPORTANT INFORMATION

e-Notification

The City uses the Georgia Procurement Registry e-notification system. You must register with the Team Georgia Marketplace/Georgia Procurement Registry to receive future procurement notifications via **<http://doas.ga.gov/state-purchasing/suppliers/getting-started-as-a-supplier>**.

If you have any questions or encounter any problems while registering, please contact the Team Georgia Marketplace Procurement Helpdesk:

Telephone: 404-657-6000

Fax: 404-657-8444

Email: procurementhelp@doas.ga.gov

GENERAL PROVISIONS

THESE GENERAL PROVISIONS SHALL BE DEEMED AS PART OF THE BID SPECIFICATIONS. The provisions of the Procurement Ordinance for the Consolidated Government of Columbus, Georgia as adopted and amended by Council shall apply to all invitations for bids and award of all contracts and is specifically incorporated herein by this reference. A copy of the ordinance is on file in the Purchasing Division.

- 1. TERM "CITY."** The term "City" as used throughout these documents will mean Consolidated Government of Columbus, GA.
- 2. PREPARATION OF FORM.** Bid proposals shall be submitted on the forms provided by the City. All figures must be written in ink or typewritten. Figures written in pencil or erasures are not acceptable. However, mistakes may be crossed out, corrections inserted adjacent thereto, initialed in ink by the person signing the proposal. If there are discrepancies between unit prices quoted and extensions, the unit price will prevail. Failure to properly sign forms, in ink, will render bid incomplete.
- 3. EXECUTION OF THE BID PROPOSAL.** Execution of the bid proposal will indicate the bidder is familiar and in compliance with all local laws, regulations, ordinances, site inspections, licenses, dray tags, etc.
- 4. BID SUBMISSION.** Bids must be submitted in a sealed envelope or package. The exterior of the envelope or package must reference the bidder's name and address, the bid number, bid title, and must indicate the contents represent a "bid" or "no bid" submission. Failure to properly identify the bid submission may result in rejection of the bid.
- 5. BID DUE DATE.** The bid submission must arrive in the Purchasing Division on or before the stated due date and time. Upon receipt, bids will be time and date stamped. Bids will remain sealed and secured until the stated due date and time for the bid opening.
- 6. BID OPENING.** The Purchasing Division Manager or Purchasing staff appointee will open bids. The bid amount and other pertinent information as determined by the Purchasing Division Manager will be read and recorded. The bids as recorded at the bid opening represent draft tabulation and may include incorrect price extensions or transcription errors, and are subject to change if conflicting information is discovered during analysis of the bid responses. A bid tabulation will be made available to bidders after extensions have been checked and all other specification compliance has been determined. **In the essence of time, bidders may not be allowed to review bids at the bid opening. However, bidders will be allowed to make appointments to review the bids at a later date.**
- 7. LATE BIDS.** It is the responsibility of the bidder to ensure bids are submitted by the specified due date and time. Bids received after the stated date and time will be returned, unopened, to the bidder. The official clock to determine the date and time will be the time/date stamp located in the Finance Department. All bids received will be time and date stamped by the official clock. The City will not be held responsible for the late delivery of bids due to the U.S. Mail Service, or any other courier service.
- 8. RECEIPT OF ONE SEALED BID.** In the event only one sealed bid is received, no formal bid opening shall take place. First, the Purchasing Division shall conduct a survey of vendors to inquire of "no bid" responses and non-responsive vendors. If, from the survey, it is determined by the Purchasing Division that specifications need revision, the one bid received will be returned, unopened, to the responding vendor, with a letter of explanation and a new bid solicitation prepared. If it is determined that other vendors need to be contacted, the bid due date will be extended, and the one bid received will remain sealed until the new bid opening date. The vendor submitting the single bid will receive a letter of explanation. **If it is determined the one bid received is from the only responsive, responsible bidder, then the bid shall be opened by the Purchasing Division Manager or designee, in the presence of at least one other witness. The single bid will be evaluated by the using agency for award recommendation.**
- 9. RECEIPT OF TIE BIDS.** In the event multiple responsive, responsible bidders are tied for the lowest price and all other terms and requirements are met by the all tied bidders, the award recommendation shall be as follows:
 - a. Award to the local bidder, if one of the bidders has its principal place of business in Columbus, Georgia.
 - b. If all or none of the bidders has its principal place of business in Columbus, Georgia, then award the bid to the bidder who has received the award previously.
 - c. If neither bidder received the award previously, and neither of the tied bidders has its principal place of business in Columbus, Georgia, then the bid award shall be equally divided between the tied bidders.

- d. If it is not feasible to divide the award, and if all or none of the tied bidders has its principal place of business in Columbus, Georgia, and neither was awarded the bid previously, then all bids will be rejected and the bid will be re-advertised.

10. RECEIPT OF MULTIPLE BIDS. Unless otherwise stated in the bid specifications, the City will accept one and only one bid per vendor. Any unsolicited multiple bid(s) will not be considered. If prior to the bid opening, more than one bid is received from the same vendor, the following will occur: (1) the bidder will be contacted and required to submit written acknowledgment of the bid to be considered; (2) the additional bid(s) will be returned to the bidder unopened. If at the bid opening more than one bid is enclosed in a single bid package, the City will consider the vendor non-responsive and bids will be returned to the bidder.

11. CONDITION AND PACKAGING. Unless otherwise defined in the bid specifications, it is understood and agreed that any item offered or furnished shall be new, in current production and in first class condition, that all containers shall be new and suitable for storage or shipment, and that prices include standard commercial packaging.

12. FREIGHT/SHIPPING/HANDLING CHARGES. All freight, shipping, and handling charges shall be included in the bid price. The City will pay no additional charges.

13. CORRECTION OR WITHDRAWAL OF BID/CANCELLATION OF AWARDS. Corrections or withdrawals of inadvertently erroneous bids before or after bid opening, or cancellation of awards of contracts based on such bid mistakes may be permitted where appropriate. Mistakes discovered before bid opening may be modified or bid withdrawn by written notice received in the Office of Purchasing prior to the time of the bid opening. After bid opening, no changes in bid prices or other provisions of bids prejudicial to the interest of the City or fair competition shall be permitted. In lieu of bid correction, a low bidder alleging a material mistake of fact may be permitted to withdraw its bid if the mistake is clearly evident, or if the bidder submits evidence that clearly and convincingly demonstrates that a mistake was made. All decisions to permit corrections or withdrawals of bids or to cancel awards or contracts based on bid mistakes will be supported by the written determination of the Purchasing Officer.

14. ADDENDA AND INTERPRETATIONS. If it becomes necessary to revise any part of this bid, a written addendum will be provided to all bidders. The City is not bound by any oral representations, clarifications, or changes made to the written specifications by City employees, unless such clarification or change is provided to the bidders in written addendum form from the Purchasing Officer. Bidders will be required to acknowledge receipt of the addenda (if applicable) in their sealed bid proposal. The vendor may provide an initialed copy of each addendum or initial the appropriate area on the bid form (pricing page). Failure to acknowledge receipt of the addenda (when applicable) will render bid incomplete. **It is the bidder's responsibility to ensure that they have received all addenda.**

15. BID EVALUATION AND AWARD. During the evaluation of bids, the City reserves the right to request clarification of bid responses and to request the submission of references, if deemed necessary for a complete evaluation of bid responses. Award will be made to the responsive and responsible bidder whose bid is most economical according to criteria designated in the solicitation. The determination of the lowest responsive and responsible bidder may involve all or some of the following factors: prices, conformity to specifications, financial ability to meet the contract, previous performance, facilities and equipment, availability of repair parts, experience, delivery promise, terms of payment, compatibility as required, other cost, and other objective and accountable factors, if any, (which are further described in the specifications). The City shall be the judge of the factors and will make the award in the best interest of the City.

16. TIME FOR CONSIDERATION. Bids must remain in effect for at least sixty (60) days after date of receipt to allow for evaluation.

17. BID SECURITY AND PERFORMANCE BOND. Bid security (Bid Bond) shall be required for all competitive sealed bids for construction contracts when the price is estimated by the Purchasing Officer to exceed \$10,000. Bid security shall be a bond provided by a surety company authorized to do business in the State, or in the form of a certified check. Such bonds may also be required on construction contracts under \$10,000 or other procurement contracts when circumstances warrant. Bid security shall be in an amount equal to at least five percent (5%) of the bid amount. The City will accept a copy of a bid bond at the bid opening. However, if a copy of a bid bond is submitted, the bidder must submit to the Purchasing Division the identical original document within five (5) days after the bid opening. **If the original document is not received within the five (5) days, the bid will not be considered.** When a construction contract is

awarded in excess of \$25,000, the successful bidder will be required to furnish a **Performance Bond** executed by a surety company authorized to do business in the State. The performance bond shall be equal to one hundred percent (100%) of the price specified in the bid.

18. SUBCONTRACTING. Should bidder intend to subcontract all or any part of the work specified, name(s) and address(es) of sub-contractor(s) must be provided in bid proposal (use additional sheet if necessary). The bidder shall be responsible for subcontractor(s) full compliance with the requirements of the bid specifications. **THE COLUMBUS CONSOLIDATED GOVERNMENT WILL NOT BE RESPONSIBLE FOR PAYMENTS TO SUBCONTRACTORS.**

19. DISQUALIFICATION OF BIDDERS AND REJECTION OF BIDS. Bidders may be disqualified and rejection of bid proposals may be recommended by the City for any (but not limited) to the following reasons:

- (A) Receipt after the time limit for receiving bid proposals as stated in the bid invitation.
- (B) Any irregularities contrary to the General Provisions or bid specifications.
- (C) Unbalanced unit price or extensions.
- (D) Unbalanced value of items.
- (E) Failure to use the proper forms furnished by the Consolidated Government.
- (F) Failure to complete the proposal properly
- (G) Omission of warranty, product literature, samples, acknowledgment of addenda or other items required to be included with bid proposal.
- (H) Failure to properly sign forms in ink.

The City reserves the right to waive any minor informality or irregularity. The City reserves the right to reject any and all bids.

20. BRAND NAMES "OR EQUAL". Whenever in this invitation any particular material, process and/or equipment are indicated or specified by patent, proprietary or brand name of manufacturer, such wording will be deemed to be used for the purpose of facilitating description of the material, process and/or equipment desired by the City. It is not meant to eliminate bidders or restrict competition in any bid process. Any manufacturers' names, drawings, trade names, brand names, specifications and/or catalog numbers used herein are for the purpose of description and establishing general quality levels. Bidders may propose equivalent equipment, services or manufacturer. Any proposal that is equivalent to or surpasses stated specifications will be considered. Determination of equivalency shall rest solely with the City.

Note: Due to existing equipment, specific manufacturers may be required to facilitate compatibility.

21. ASSIGNMENT OF CONTRACTUAL RIGHTS. It is agreed that the successful bidder will not assign, transfer, convey or otherwise dispose of the contract or its right, title or interest in or to the same, or any part thereof, without previous consent of the City and any sureties.

22. DISCOUNTS. Terms of payments offered will be reflected in the space provided on the bid proposal form. Cash discounts will be considered net in the bid evaluation process. All terms of payment (cash discounts) will be taken and computed from the date of delivery of acceptable material or services, or the date of receipt of the invoice, whichever is later.

23. TAXES. The City is exempt from State Retail Tax and Federal Excise Tax. Tax Exemption No. GA Code Sec. 48-8-3. Federal ID No. 58-1097948.

24. FEDERAL, STATE AND LOCAL LAWS. All bidders will comply with all Federal, State, and Local laws and ordinances, relative to conducting business in Columbus, Georgia.

25. BID INCLUSIONS. When bid inclusions are required, such as warranty information, product literature/specifications, references, etc. The inclusions should reference all aspects of the specific equipment or service proposed by the bidder. Do not include general descriptive catalogs. References to literature or other required inclusions submitted previously do not satisfy this provision. Bids found to be in non-compliance with these requirements will be subject to rejection.

26. NON-COLLUSION. By signing and submitting this bid, bidder declares that its agents, officers or employees have not directly or indirectly entered into any agreements, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this bid. In the event, said bidder is found guilty of collusion, the company and agents will be removed from the City's bid list for one full year and any current orders will be canceled.

27. INDEMNITY. The successful bidder agrees, by entering into this contract, to defend, indemnify and hold City harmless from any and all causes of action or claims of damages arising out of or under this contract.

28. DISADVANTAGED BUSINESS ENTERPRISE. Disadvantaged Business Enterprises (minority or women owned businesses) will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of race, color, creed, sex, sexual orientation, gender identity or national origin in consideration for an award. It is the policy of the City that disadvantaged business enterprises and minority business enterprises have an opportunity to participate at all levels of contracting in the performance of City contracts to the extent practical and consistent with the efficient performance of the contract.

29. AFFIRMATIVE ACTION PROGRAM - NON-DISCRIMINATION CLAUSE. The City has an Affirmative Action Program in connection with Equal Employment Opportunities. The successful bidder will comply with all Federal and State requirements concerning fair employment and employment of the handicapped, and concerning the treatment of all employees, and will not discriminate between or among them by reason of race, color, age, religion, sex, sexual orientation, gender identity, national origin or physical handicap.

30. AWARDS TO LOCAL BUSINESSES. Except for construction contracts, awards will be made to responsive and responsible local businesses proposing a cost not more than two percent (2%) above the low bid or quote for contracts involving an expenditure of \$25,000.00 or less and made to responsive and responsible local businesses proposing a cost not more than one percent (1%) above the low bid or quote for contracts involving an expenditure greater than \$25,000.00. (Ordinance No. 95-5). ****STATE OR FEDERALLY FUNDED PROJECTS EXCLUDED****

31. RIGHT TO PROTEST. A protest with respect to an Invitation for bids or Request for Proposals shall be submitted in writing no less than five (5) days **prior** to the opening of bids or the closing date of proposals to the Purchasing Officer. If the matter is not resolved, then an appeal may be filed with the City Manager or City Council.

32. FAILURE TO QUOTE. Vendors choosing not to submit a bid are requested to return a **Statement of "No Bid"**.

33. PRODUCT/EQUIPMENT DEMONSTRATION - SITE VISIT. During the evaluation of bids, the City reserves the right to request a demonstration or site visit of the product, equipment or service offered by a bidder. The demonstration or site visit shall be at the expense of the bidder. Bidders who fail to provide demonstration or site visit, as requested, will be considered non-responsive.

34. CANCELLATION PROVISIONS. When such action is in the best financial interest of the City, contracts for supplies to be purchased or services to be rendered under an annual (term) contract basis may be canceled and re-advertised at the discretion of the Purchasing Officer and in accordance with contract terms.

After the receipt of a product or piece of equipment, it is found that said item does not perform as specified and required, payment for said product or equipment will be withheld. The successful vendor will be notified of the non-performance in writing. After notification, the successful vendor will have ten (10) calendar days, from the date of notification, to deliver product or equipment that performs satisfactorily. If a satisfactory product is not delivered within 10 calendar days, from the notification date, the City will cancel the contract (purchase order) and award to the next low, responsive, responsible bidder. The vendor will be responsible for the pick-up or shipment of the unsatisfactory equipment or product.

35. QUESTIONS. Questions concerning specifications must be submitted, in writing, at least 5 (five) working days (Monday-Friday) prior to receipt date. Questions received less than five working days prior to receipt date will not be considered.

36. SAMPLES. When samples are required to be included with the proposal response, the bidder will be responsible for the following:

1) **Unless otherwise specified**, bidders are required to submit exact samples of item(s) bid. Do not submit sample of "like" item(s).

2) Affix an identification label to each individual sample to include bidder's name, bid name and number.

3) Make arrangements for the return of sample after the bid award. All shipping costs will be the responsibility of the bidder. If bidder does not make arrangements for return of sample, within 60 days after award, the sample will be discarded.

37. GOVERNING LAW. The parties agree that this Agreement shall be governed by the laws of Georgia, both as to interpretations and performance.

38. PAYMENT DEDUCTIONS. The City reserves the right to deduct, from payments to awarded vendor(s), any amount owed to the City for various fees, to include, but not limited to: False Alarm fees, Ambulance fees, Occupation License Fees, Landfill fees, etc.

39. PAYMENT TERMS. The City's standard payment term is usually net 30 days, after successful receipt of goods or services. Payment may take longer if invoice is not properly documented or not easily identifiable, goods/services are not acceptable, or invoice is in dispute.

NOTICE TO VENDORS

Columbus Council, by Ordinance 92-60 has prohibited any business that is owned by any member of Columbus Council or the Mayor, or any business in which any member of Columbus Council or the Mayor has a substantial pecuniary interest from submitting a bid for goods or services to the Consolidated Government of Columbus, Georgia.

Likewise, by Ordinance 92-61, no business which is owned by any member of any board, authority or commission, subordinate or independent entity, or any business in which any member of any board, authority or commission, subordinate or independent entity has substantial pecuniary interest may submit a bid to the Consolidated Government if such bid pertains to the board, authority or commission.

DO YOU HAVE QUESTIONS, CONCERNS OR NEED CLARIFICATION ABOUT THIS SOLICITATION?

COMMUNICATION CONCERNING ANY SOLICITATION CURRENTLY ADVERTISED MUST TAKE PLACE IN WRITTEN FORM AND ADDRESSED TO THE PURCHASING DIVISION.

ALL QUESTIONS OR CLARIFICATIONS CONCERNING THIS SOLICITATION SHALL BE SUBMITTED IN WRITING. THE CITY WILL NOT ORALLY OR TELEPHONICALLY ADDRESS ANY QUESTION OR CLARIFICATION REGARDING BID/PROPOSAL SPECIFICATIONS. IF A VENDOR VISITS OR CALLS THE PURCHASING DIVISION WITH SUCH QUESTIONS, HE OR SHE WILL BE INSTRUCTED TO SUBMIT THE QUESTIONS IN WRITING.

ALL CONTACT CONCERNING THIS SOLICITATION SHALL BE MADE THROUGH THE PURCHASING DIVISION. BIDDERS SHALL NOT CONTACT CITY EMPLOYEES, DEPARTMENT HEADS, USING AGENCIES, EVALUATION COMMITTEE MEMBERS OR ELECTED OFFICIALS WITH QUESTIONS OR ANY OTHER CONCERNS ABOUT THE SOLICITATION. QUESTIONS, CLARIFICATIONS, OR CONCERNS SHALL BE SUBMITTED TO THE PURCHASING DIVISION IN WRITING. IF IT IS NECESSARY THAT A TECHNICAL QUESTION NEEDS ADDRESSING, THE PURCHASING DIVISION WILL FORWARD SUCH TO THE USING AGENCY, WHO WILL SUBMIT A WRITTEN RESPONSE.

THE PURCHASING DIVISION WILL FORWARD WRITTEN RESPONSES TO THE RESPECTIVE BIDDER OR IF IT BECOMES NECESSARY TO REVISE ANY PART OF THIS SOLICITATION, A WRITTEN ADDENDUM WILL BE ISSUED TO ALL BIDDERS.

THE CITY IS NOT BOUND BY ANY ORAL REPRESENTATIONS, CLARIFICATIONS, OR CHANGES MADE TO THE WRITTEN SPECIFICATIONS BY CITY EMPLOYEES, UNLESS SUCH CLARIFICATION OR CHANGE IS PROVIDED TO THE BIDDERS IN A WRITTEN ADDENDUM FROM THE PURCHASING MANAGER.

BIDDERS ARE INSTRUCTED TO USE THE ENCLOSED "QUESTION/CLARIFICATION FORM" TO FAX OR EMAIL QUESTION.

ANY REQUEST, AFTER A SOLICITATION HAS CLOSED AND PENDING AWARD, MUST ALSO BE SUBMITTED IN WRITING TO THE PURCHASING DIVISION.

QUESTION/CLARIFICATION FORM

DATE: _____

TO: Patti Postorino, Buyer
Email BidOpportunities@ColumbusGA.org or
Fax 706-225-3033

RE: RFB No. 20-0041; Breathing Apparatus (Annual Contract)

Questions/clarification requests must be submitted at least five (5) business days before the due date:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

From: _____

Company Name

Representative

Complete Address

Telephone Number

**GENERAL SPECIFICATIONS
BREATHING APPARATUS (ANNUAL CONTRACT)
RFB No. 20-0041**

I. SCOPE

The Consolidated Government of Columbus Georgia (City) is soliciting bids from firms to provide self-contained breathing apparatus with mask-mounted regulators, spare air cylinders, and replacement parts and other related services. The breathing apparatus will be used by the Fire & EMS Department. This contract may also be utilized by any other City agency requiring the goods or services. ***The City reserves the right to add additional related items during the term of the contract. Quotes will be obtained from contracted vendor(s) for any add on items.***

This is a requirement type contract which will permit the purchase of items in the quantities to be designated at the time the orders are placed. The City may purchase more, less, none, or all of the items. The City reserves the right to reject any and/or all bids. Should the successful bidder not be able to supply the required item(s), the City reserves the right to purchase from other sources.

II. TERM OF CONTRACT

A. The term of contract shall be for two (2) years, with the option to renew for three (3) additional twelve-month periods. Contract renewal will be contingent upon the mutual agreement of the City and the Contractor.

Notice of intent to renew will be given to the contractor in writing by the Purchasing Division Director, normally sixty days before the expiration date of the current contract. This notice shall not be deemed to commit the City to a Contract renewal.

It should be noted that multi-year contracts may be continued each fiscal year only after funding appropriations and programs approval has been granted by the Council of the Consolidated Government of Columbus, Georgia. In the event that the necessary funding is not approved, then the affected multi-year contract becomes null and void, effective July 1st of the fiscal year for which such approval has been denied.

B. Termination for Convenience

For the protection of both parties, either party giving 30 days prior notice in writing to the other party may cancel this contract.

III. ESCALATION CLAUSE

Contract pricing shall remain fixed for the initial two (2) year term of the contract. After the initial term, Contractor may request a price escalation by submitting a fully documented request (i.e. documentation from manufacturers illustrating the necessity to implement price increases).

Request for price increases, without documentation, shall not be considered. Such escalation shall not exceed a five percent (5%) increase. The using department(s) and the Purchasing Manager will review the request and shall approve or disapprove the increases based on budget constraints and other price comparisons.

If for any reason the contractor has a price increase that exceeds five percent (5%), the price increase will be evaluated on a case-by-case basis. The City and the Contractor will have the option to discuss and make adjustments to the requested increase. If either party declines

approval of the adjustments, the contract will be considered cancelled on the scheduled expiration date of the contract.

IV. BRAND NAMES

It is not the intent of Columbus Consolidated Government (City) to restrict competition in any purchasing process. Any manufacturers' names, drawings, trade names, brand names, information and/or catalog numbers used herein are for purpose of description and establishing general quality levels. Such references are not intended to be restrictive; any equivalent products of any manufacturer may be offered. Any bid that is equivalent to or surpasses these specifications will be considered; determination of equivalency shall rest solely with the City.

NOTE: Specific manufacturers may be required to accommodate compatibility with existing equipment. Therefore, it is requested that bid responses be submitted in accordance with the specifications provided.

V. COOPERATIVE CONTRACT PURCHASE OPTION

The City reserves the right to make purchases via any comparable Cooperative Contract, if the contract cost is lower and meets the City's requirements.

VI. QUESTIONS/ADDENDA

Questions and requests for clarification must be submitted **within five (5) business days of the due date** (see pages 9 & 10). Changes to the specifications (if any) will be provided in the form of an addendum, which will be posted on the web page of the Finance Department/Purchasing Division of Columbus Consolidated Government at

https://www.columbusga.org/finance/purchasing/docs/opportunities/Bid_Opportunities.htm.

It is the vendors' responsibility to periodically visit the web page for addenda before the due date and prior to submitting a quote.

VII. INDEMNITY CLAUSE

The Contractor covenants to save, defend, hold harmless, and indemnify the City, and all of its officers, departments, agencies, agents, and employees (collectively the "City") from and against any and all claims, losses, damages, injuries, fines, penalties, costs (including court costs and attorney's fees), charges, liability, or exposure, however caused, resulting from, arising out of, or in any way connected with the Contractor's intentional, negligent, or grossly negligent acts or omissions in performance or nonperformance of its work called for by the Contract Documents.

VIII. BID SUBMISSION REQUIREMENTS

Each bidder shall include the following information with bid submission. Bidder shall submit **THE ORIGINAL AND ONE (1) IDENTICAL COPY**. The City reserves the right to request any omitted information **WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE**. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed **"Incomplete"**:

- A. **Communication Concerning This Solicitation:** (Form 1)
- B. **Bid Form / Pricing Page** (Form 2)
- C. **Contract Signature Page:** (Form 3) Provide all required information
- D. **Product Literature:** Provide descriptive literature for proposed product.
- E. **Provide Proof of MSA Dealer:** Vendor must provide a statement of confirmation on MSA letterhead that vendor is an authorized MSA dealer for Columbus, GA.
- F. **Catalogs:** Provide two (2) copies of current catalogs that includes repair parts.

- G. **Warranty:** Warranty information printed on the manufacturer's letterhead.
- H. **Sample Invoice:** Provide a Sample Invoice depicting the itemized billing format that will be used for this contract.
- I. **Addenda:** Vendors must include acknowledgment of receipt of addenda (if any) in their sealed bid. Provide an initialed copy of each addendum or initial the appropriate area on bid form (pricing page). Addenda will be posted at [https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid Opportunities.htm](https://www.columbusga.gov/finance/purchasing/docs/opportunities/Bid_Opportunities.htm)
- Vendors are responsible for periodically visiting the web page, to check for addenda, prior to the bid due date and before submitting a bid.*
- J. **Business License:** Vendors located in Muscogee County shall submit a current copy of their City of Columbus Business License (Occupation License). If the business is not located in Muscogee County and has proof of being properly licensed by a municipality in Georgia, and paid applicable occupation taxes in that city, the vendor will not be required to pay occupation taxes in Columbus, Georgia.
- If the business location is not in Georgia, vendor must provide a current copy of their active Articles of Incorporation from the State and/or a current business license from the City/State in which business is located.
- If you have questions regarding this requirement, please contact Yvonne Ivey, Revenue Manager: 706-225-3091.
- K. **Insurance Checklist / Certificate of Insurance** (Form 4)
- L. **W-9 Rev 2018 Request for Taxpayer Identification Number and Certification** (Form 5)

Bids must be delivered sealed in an envelope or package. The envelope or package should reference the bidder's name, full address and the bid number and/or bid name. Mail or hand-deliver bid to:

Columbus Consolidated Government
Purchasing Division

RE: RFB No. 20-0041; Breathing Apparatus (Annual Contract)

(Mail) P. O. Box 1340
Columbus, GA 31902-1340

(Deliver) 5th Floor – Finance Department
100 10th Street
Columbus, Georgia 31901

IX. AWARD/ORDERING/DELIVERY/INVOICE

- A. **Award:** This bid shall be awarded in total to one vendor. The City reserves the right to reject any and all bids not submitted according to specifications.
- B. **Ordering:** The items will be procured on an "as needed" basis by purchase order.
- C. **Delivery:** The item(s) shall be delivered to the location on the purchase order. The items shall be delivered within 30 days after order has been placed. Delivery is the responsibility of the successful bidder. Freight shall be included in the bid price; add on freight will not be authorized.

A shipping ticket shall accompany orders when deliveries are made. The user should verify all orders at the time of delivery. Any shortages must be adjusted on the invoice upon delivery.

- D. Invoices: After receipt of goods/services and upon satisfactory delivery, the successful vendor shall forward invoice(s) to the following address:

Columbus Consolidated Government
Accounting Division
P. O. Box 1340
Columbus, Georgia 31902-1340

The invoice(s) shall reference the bid number (RFB No. 20-0041) and/or purchase order number.

X. TERMINATION OF CONTRACT

Default: If the contractor refuses or fails to perform any of the provisions of this contract with such diligence as will ensure its completion within the time specified in this contract, or any extension thereof, otherwise fails to timely satisfy the contract provisions, or commits any other substantial breach of this contract, the Purchasing Division Director may notify the contractor in writing of the delay or non-performance and if not cured within ten (10) days or any longer time specified in writing by the Purchasing Division Director, such director may terminate the contractor's right to proceed with the contract or such part of the contract as to which there has been delay or a failure to properly perform.

In the event of termination in whole or in part the Purchasing Division Director may procure similar supplies or services, from other sources, in a manner and upon terms deemed appropriate by the Purchasing Division Director. The contractor shall continue performance of the contract to the extent it is not terminated and shall be liable for excess costs incurred in procuring similar goods or services.

Compensation: Payment for completed supplies delivered and accepted by the city shall be at the contract price. The City may withhold from amounts due the contractor such sums as the Purchasing Director deems to be necessary to protect the City against loss because of outstanding liens or claims of former lien holders and to reimburse the City for the excess costs incurred in procuring similar goods and services.

Excuse for Nonperformance or Delayed Performance: Except with respect to defaults of subcontractors, the contractor shall not be in default by reason of any failure in performance of this contract in accordance with its terms, if the contractor has notified the Purchasing Division Director within 15 days after the cause of the delay and the failure arises out of causes such as: acts of God; acts of public enemy; acts of the City and any other governmental entity in its sovereign or contractual capacity; fires; floods; epidemics; quarantine restrictions; strikes or other labor disputes; freight embargoes; or unusually severe weather. If the failure to perform is caused by the failure of a subcontractor to perform or to make progress, and if such failure arises out of causes similar to those set forth above, the contractor shall not be deemed to be in default, unless the supplies or services to be furnished by the subcontractor were reasonably obtainable from other sources in sufficient time to permit the contractor to meet the contract requirements.

Upon request of the contractor, the Purchasing Division Director shall ascertain the facts and extent of such failure, and, if such director determines that any failure to perform was occasioned by any one or more of the excusable causes, and that, but for the excusable cause, the contractor's progress and performance would have met the terms of the contract, the delivery schedule shall be revised accordingly.

**TECHNICAL SPECIFICATIONS
BREATHING APPARATUS (Annual Contract)
RFB No. 20-0041**

**FIREHAWK® M7XT AIR MASK
(4500 PSIG AIR MASKS)**

I. APPROVALS:

1. The apparatus shall be approved by the National Institute for Occupational Safety and Health (NIOSH), under 42 CFR, Part 84 for chemical, biological, radiological, and nuclear protection (CBRN) with a 30-, 45- or 60-minute –rated service life and compliant with all requirements of the National Fire Protection Association's 2013 Edition of NFPA-1981 Standard on Open-Circuit Self-Contained Breathing Apparatus.
2. Units Equipped with an integrated PASS device must meet requirements of NFPA 1982, 2013 Edition.
3. Units equipped with an emergency egress system shall also comply with the NFPA 1983 Standard on Fire Service Life Safety Rope and System Components, 2012 Edition; Type: Escape.
4. Units Equipped with an accountability system must meet minimum requirements for FCC part 15 and part 90.

SPECIFIC REQUIREMENTS

II. FACEPIECE:

1. The facepiece shall be available in three sizes in Hycar™ Rubber (small, medium and large).
2. Two sizes of removable nosecup; nosecup shall contain a voice collector system that enhances unamplified speech transmission.
3. The facepiece shall have an inhalation check valve and exhalation valve to prevent exhaled air from entering and contaminating the mask-mounted regulator.
4. The facepiece shall have a speaking diaphragm with aluminum-coated membrane suitably protected and located centrally on the facepiece for optimal voice projection.
5. The lens shall be field-replaceable and of a non-shatter type and shall fit all three sizes of the facepiece.

6. The facepiece head harness shall be a flame-and heat-resistant Kevlar assembly featuring a suspension with five points of attachment and four points of adjustment.
7. The facepiece shall be I-HUD-ready.
8. An optional flame-and heat-resistant PBI neck strap shall be offered to carry the facepiece in a ready position for quick donning.

III. INTERNAL HUD SYSTEM:

1. The Heads-Up-Display, I-HUD System shall be wireless to eliminate snag hazards and provide modularity for easy maintenance.
2. The I-HUD System shall prevent the ability to cross-talk among firefighters.
3. The I-HUD System shall be immune to radio frequency interference (RFI) and must function properly in close proximity of fire service hand-held radios.
4. The I-HUD shall provide the user with the remaining volume of air in his/her cylinder in 25% increments through a series of 3 colored LEDs.
 - Three green lights 76 to 100% cylinder volume
 - Two green lights 51 to 75% cylinder volume
 - Two flashing amber lights 36 to 50% cylinder volume
 - Flashing red light 0 to 35% cylinder volume
5. Internal HUD shall be contoured to fit securely within facepiece to reduce snag hazards.
6. The I-HUD receiver shall display remaining air pressure, battery life warning and PASS device pre-alarm and EVACUATE indicators.
7. The I-HUD system shall allow the user to select between two modes of operation,
1) continuous lights on mode or 2) an intermittent lights on mode for power conservation.
8. The I-HUD shall incorporate a photoelectric sensor that senses ambient light conditions, automatically adjusting the display to one of 16 pre-programmed light intensities.
9. The I-HUD shall be field removable and replaceable without use of tools.
10. Three buddy lights shall be visible from the outside of a firefighter's facepiece.
11. The I-HUD receiver shall have a green test button.
12. The I-HUD battery should last four to eight months using a single CR2 battery.

IV. UNIVERSAL RESCUE CONNECTION:

1. The system shall be capable of:
 - a. Refill in immediately dangerous to life or health (IDLH) atmospheres.
 - b. Transfiling between two SCBA wearers (connection allows for donation and receipt of air), providing an emergency breathing system (EBS) while maintaining NIOSH approvals.
 - c. Quickly refilling (approximately one minute) an SCBA cylinder from a mobile compressor, cascade system or RIT Pack.
 - d. Extending the wearer's air supply over longer duration when a remote cascade system or other compressed gas source is located in a remote area.

V. FIRST-STAGE REGULATOR:

1. Reduces the cylinder pressure to an outlet pressure not to exceed 100 psi. Regulator outlet pressure must be adjustable.
2. The pressure reducer shall incorporate a downstream flow to ensure fail-safe in an open position.
3. Regulator redundancy shall be achieved by two inter-nested long-life springs.
4. The regulator body shall be constructed of a high-strength heat-treated aluminum alloy, and plated with a Teflon hard coat anodize to minimize corrosion and wear of internal components.
5. There shall not be more than 14 individual replacement parts on the regulator.
6. The regulator shall be mounted on a slide bracket to facilitate easy cylinder attachment and to prevent binding of high-pressure hose.
7. The regulator must not require any special tools for disassembly.

VI. MASK-MOUNTED REGULATOR: (PUSH-TO-CONNECT):

1. The second-stage regulator shall not obstruct or reduce the field of vision of the wearer when installed on the facepiece.
2. The second-stage regulator must be equipped with Positive Protection Tetraplex Shield membrane that covers the diaphragm, preventing against permeation of CBRN agents.
3. When doffing the regulator, the disengagement of the regulator from the facepiece must simultaneously stop the flow of air and release the regulator.

4. The regulator must be equipped with a variable flow bypass.
5. The second-stage regulator must be labeled with a CBRN notation.
6. An over-the-shoulder air-supply hose shall be routed through a shoulder strap tunnel from the first- stage regulator.
7. As an option, the detachable regulator must have a push-to-connect attachment to the facepiece. This option of the regulator shall feature a non-indexing design, capable of mounting to the facepiece in any orientation. In this configuration, the regulator must rotate freely when connected to the facepiece, maximizing the user's freedom of head movement.

VII. PRIMARY LOW PRESSURE WARNING DEVICE:

1. An audible bell alarm shall be an air-actuated, self-cocking, continuous ringing audible warning bell automatically operating when air pressure in the supply cylinder reaches approximately 35% of the rated service life.
2. An audible bell alarm must cover multiple levels of frequencies to cover all hearing levels.

VIII. CYLINDERS:

1. Cylinders with 4500 psig operating pressure must be available in 30-, 45- and 60-minute durations.
2. Cylinders must be available in two operating pressures; 4500 psig and 5500 psig.
3. The cylinder shall be constructed of a deep-drawn, seamless aluminum liner that is fully wound over its entire surface (except for the thick neck area) with high-strength carbon fiber filaments impregnated with epoxy resin.
4. The cylinder shall contain a closing valve that shall incorporate a pressure gauge to indicate the pressure in the cylinder at all times. The pressure gauge face shall be luminescent. The hand wheel shall be at a 90° angle from the longitudinal plane of the cylinder.
5. The valve shall incorporate a flow control insert to limit the airflow over the first half rotation of the hand wheel, minimizing propulsion thrust in the event that the cylinder is mishandled.
6. The cylinder shall have a minimum two-inch wide luminescent band to enhance visibility of the wearer.

IX. EMERGENCY EGRESS RESCUE BELT (OPTIONAL):

1. In addition to meeting the NFPA 1983 standard, the rescue belt must be NIOSH-certified and NFPA 1981-2012 edition-compliant as a component of the SCBA.
2. Complete system to include Ara-shield pouch, carabiner or Crosby hook with sewn-in connection and F4 Sterling auto-locking descender.
3. Shall be available with 50-ft. FireTech 32 rope or an aramid/nylon blend.
4. As a safety feature, the rope shall be detachable under load by the user, with a pull-to release knot at the end of the rescue rope.
5. As a safety feature, the rope assembly shall have two end-of-rope flags, one at 15 feet and the second at 10 feet.
6. Shall be available with double-action waist belt buckle.
7. Rescue system shall have web management system for reduced snag hazards.
8. The rope assembly shall be available as a replacement part.

X. PASS DEVICE:

1. The PASS device is a combination integrated PASS device and HUD Transmitter that shall be contained in a single enclosure and shall be easily replaced in the event of fire ground damage.
2. The PASS device unit must be immune to radio frequency interference (RFI) and must function properly in the close proximity of fire service hand-held radios.
3. The unit shall be capable of storing up to 25 hours of use information in the form of sessions that are generated each time the SCBA is pressurized. The sessions must indicate the day, time, user's name, cylinder pressure, duration of use, and time of alarm (PASS and thermal) for each pressurization of the SCBA stored on a minute-by-minute basis.
4. The sessions must provide the option of downloading to a personal computer for addition to maintenance records, or for use in incident investigations.
5. The PASS device must utilize a perimeter seal (sonic weld) to provide the highest level of protection against water ingress.
6. The PASS device must be equipped with buddy lights on the front and back of the firefighter. The purpose of the buddy lights is to easily identify firefighters that are in immediate need of assistance. Buddy lights are positioned to face one towards the firefighter and one away from the firefighter.

7. The power module shall be equipped with dual sound emitters. The sound emitters shall perform at a minimum of 95 dBa after heat emersion of five minutes at 500° Fahrenheit.
8. The PASS device must be equipped with time remaining display and an optional thermal sensor. The time remaining function must update calculations every 30 seconds based on the user's previous three minutes of air consumption. The initial calculation will appear after three minutes.
9. The PASS device and power module shall be powered by four C-cell batteries.
10. The expected service life of the batteries shall be six to eight months on average for units without telemetry, and four to six months on average with telemetry.
11. If equipped with telemetry, the unit shall have the capability of electronically storing the user's name into memory through an ID tag.

XI. EMERGENCY ESCAPE BREATHING SUPPORT SYSTEM:

1. As an option, an emergency escape breathing support system must be accommodated by the SCBA.
2. The system must be available with a common SCBA quick-disconnect fitting.
3. The system shall connect to the intermediate pressure side of the SCBA, downstream of the first-stage regulator.
4. The system shall have both male and female connections.

XII. WEIGHT:

1. The weight of a basic SCBA (less cylinder) shall not exceed 13 lbs. 4 oz.
2. The weight of the cylinder and valve assemblies (empty) shall not exceed:

<u>CYLINDER TYPE</u>	<u>WEIGHT</u>
Carbon-wrapped L30	8 lbs. 0 oz.
Carbon-wrapped H30-SL	7 lbs. 4 oz.
Carbon-wrapped H45	9 lbs. 7 oz.
Carbon-wrapped H45-SL	9 lbs. 10 oz.
Carbon-wrapped H60-SL	11 lbs. 12 oz.

TECHNICAL SPECIFICATIONS (continued)
MSA G1 SCBA Product Specification
4500 and 5500 psig

I. Approvals

1. 1. Apparatus shall be approved by the National Institute for Occupational Safety and Health (NIOSH), under 42 CFR, Part 84
2. for chemical, biological, radiological, and nuclear protection (CBRN) with 30-, 45-, 60-minute-rated service life
3. and compliant with all requirements of the National Fire Protection Association's 2018 Edition of NFPA-1981
4. Standard on Open-Circuit Self-Contained Breathing Apparatus
5. 2. Units equipped with integrated PASS device must meet requirements of NFPA 1982, 2018 edition
6. 3. Units equipped with emergency egress system shall also comply with NFPA 1983 Standard on Fire Service Life Safety
7. Rope and System Components, 2017 Edition; Type: Escape
8. 4. Units equipped with accountability system must meet minimum requirements for FCC part 15 and part 90

II. Specific Requirements

Facepiece

1. Facepiece shall have removable inhalation check valve to prevent exhaled air from entering and contaminating regulator (demand valve).
2. Facepiece shall have open port to provide minimal breathing resistance when regulator is not attached
3. Facepiece shall not contain electronic components
4. Facepiece shall provide means to display to user with visual indicators for HUD
5. Facepiece shall have icon for HUD system status indicators
6. Facepiece shall have regulator attachment that does not bear any weight on lens
7. Facepiece shall have effective field of view of 86% and overlapping field of view of 122% without attached component
8. Facepiece shall be available in three sizes in Hycar Rubber (small, medium, large)
9. Facepiece shall have nose cup comprised of silicone rubber and available in three sizes (small, medium, large)
10. Facepiece shall have three head harness options constructed of flame/heat resistant assembly:
Kevlar Head Harness
4-pt. adjustable, Kevlar 5-pt. adjustable and rubber 5-pt. adjustable
11. Facepiece shall have universal lens that can be used with all three facepiece sizes, shall be comprised of non-shatter type material and shall be field-replaceable
12. Lens shall be hard-coated on outside and anti-fog coated on inside
13. Facepiece shall have optional flame/heat-resistant fabric or rubber neck strap to carry facepiece in ready position for quick donning
14. Facepiece shall have removable speaking diaphragm with aluminum-coated membrane, suitably protected and located

centrally on facepiece for optimal voice projection

15. Facepiece shall have exhalation valve that is to be serviceable without special tools

16. Facepiece shall be capable of water submersion for cleaning and disinfection

17. Facepiece provides RFID chip for optional asset & maintenance tracking

Mask-Mounted Regulator (Demand Valve): Push-to-Connect

1. When doffing regulator, regulator disengagement shall simultaneously stop air flow and release regulator

2. Regulator shall house electronic module that functions as microphone and HUD system

3. Regulator shall be equipped with variable flow bypass

4. Regulator shall not have exposed wiring in order to prevent snags and increase product durability

5. Regulator shall have two cover options: hard cover or purge cover

6. Regulator shall have fewer than 35 parts that are easily replaceable without special tools

7. Regulator shall have two options for air-supply hose:

1) Continuous hose from pressure reducer to regulator

2) Quick-connect hose that terminates on shoulder in front of user

8. Regulator must be equipped with positive protection Tetraplex Shield membrane that covers diaphragm, preventing permeation of CBRN agents

9. Regulator shall have RFID chip for optional asset & maintenance tracking

Heads-Up Display (HUD)

1. Heads-Up Display (HUD) System shall be integrated within regulator, eliminating snag hazards and increasing product durability

2. HUD shall be powered from central power system

3. HUD System shall eliminate cross-talk among firefighters

4. HUD System shall be immune to radio frequency interference (RFI) and must function properly in close proximity to fire service hand-held radios

5. HUD System shall separate pressure indicators from status indicators:

1) Left: status indicators

2) Right: pressure indicators

6. HUD system shall provide user with remaining cylinder air volume, available in four increments through series

of four colored LEDs:

1) Four green lights 76-100% cylinder volume

2) Three green lights 51-75% cylinder volume

3) Two flashing amber lights 36-50% cylinder volume

4) One flashing red light 0-35% cylinder volume

7. HUD status indicators shall be icon-based and display battery life warning, PASS alarms, EVACUATE indicator, and secondary alarm indicator

8. HUD shall incorporate photoelectric sensor that senses ambient light conditions, automatically adjusting display to one of multiple pre-programmed light intensities

9. Buddy lights shall be visible from outside of firefighter's facepiece

10. HUD system shall allow user to select from four modes of operation:

1) Continuous pressure mode that shall always have pressure LEDs on

2) Intermittent pressure mode that shall turn on first three increments when reached for 20 seconds

3) Oscillating pressure mode that shall brighten and dim LEDs every 20 seconds

4) Mixed pressure mode that shall turn on first two increments when reached for 20 seconds and last two increments are in continuous mode

11. HUD shall be field-removable and replaceable without use of special tools

Universal Air Connection (UAC)

1. System shall be capable of:
 - 1) Refill within immediately dangerous to life or health (IDLH) atmospheres
 - 2) Transfilling between two SCBA wearers (connection allows for donation and receipt of air), providing emergency breathing system (EBS) while maintaining NIOSH approvals
 - 3) Quickly refilling (approximately one-minute duration) SCBA cylinder from mobile compressor, cascade system or RIT pack
 - 4) Extending wearer's air supply over longer duration when remote cascade system or other compressed gas source is located within remote area
2. Primary UAC shall be illuminated when supply pressure reaches Low Pressure Warning Alarm or can be configured to optional medium pressure warning alarm
3. SCBA shall have secondary options for UAC to be mounted on user's waist
4. Transfilling is possible only with 4500 & 2216 psig

Pressure Reducer (First-Stage Regulator) with Primary Low-Pressure Warning Device

1. Pressure reducer shall incorporate downstream valve to ensure fail-safe design when in open position
2. Pressure reducer shall incorporate bell alarm mechanism
3. Bell alarm mechanism shall be an air-actuated, continuously ringing audible warning alarm, automatically operating when supply cylinder air pressure reaches approximately 35% of rated service life
4. Bell alarm mechanism shall cover multiple levels of frequencies to cover all hearing levels
5. Bell alarm mechanism shall be user-accessible while wearing SCBA
6. Pressure reducer reduces cylinder pressure to outlet pressure not to exceed 115 psi; outlet pressure must be adjustable
7. Pressure reducer shall have flow capacity of 700 liters per minute at full pressure
8. Pressure reducer shall have two options for cylinder connection type: threaded or quick-connect
9. Quick-connect connection shall not be removable from cylinder while under pressure
10. Pressure reducer shall have one option for cylinder connection location: remote connection
11. Pressure reducer shall be capable of converting from threaded to quick-connect or vice versa
12. Pressure reducer body shall be constructed of high-strength aluminum alloy and anodized with Teflon hard coat to minimize corrosion and wear of internal and external components
13. Pressure reducer shall be sealed system that does not allow moisture to enter valve components
14. Pressure reducer shall have no more than 42 individual regulator replacement parts
15. Pressure reducer shall not require special tools for disassembly
16. Pressure reducer shall have two accessory ports, one medium pressure and one high pressure

Cylinders

1. Cylinders with 4500 psig operating pressure must be available in 30-, 45- and 60-minute durations. Cylinders with 5500 psig operating pressure must be available in 30-, 45-, and 60-minute durations
2. Cylinders must be available in two operating pressures: 4500 psig and 5500 psig
3. Cylinder shall be constructed of deep-drawn, seamless aluminum liner that is fully wound over entire surface (except for thick neck area) with high-strength carbon fiber filaments impregnated with epoxy resin
4. Cylinder shall contain cylinder valve that shall incorporate pressure gauge to indicate cylinder pressure at all times. Pressure gauge face shall be luminescent. Hand wheel shall be placed at 90° angle from cylinder axis.
5. Remote connection available as threaded or quick connect
6. Cylinder valve shall incorporate flow control insert to limit air flow over hand wheel's first half-rotation, minimizing propulsion thrust in event that cylinder is mishandled

7. Cylinder valve shall incorporate CGA thread that can be converted to quick-connect cylinder without special tools
8. Cylinder shall have bracket and boot that can be user-installed and provide positioning and added security of cylinder to backplate.
9. Cylinder shall be available with locking handwheel option.

Emergency Egress Rescue Belt (Optional)

1. In addition to meeting NFPA 1983 standard, rescue belt must be NIOSH-certified and NFPA 1981-2018 edition-compliant as SCBA component
2. Rescue system shall include Ara-shield pouch, carabiner or Crosby hook with sewn-in connection and F4 Sterling auto-locking descender
3. Rope shall be available with 50-ft. FireTech 32 rope or aramid/nylon blend
4. Rope shall be detachable under user load, with pull-to-release knot at end of rescue rope as safety feature
5. Rope assembly shall have two end-of-rope flags, one at 15 feet and second at 10 feet
6. Rescue system shall have double-action waist belt buckle as safety feature
7. Rescue system shall have web management system for reduced snag hazards
8. Rope assembly shall be available as replacement part
9. Rescue system shall be capable of quickly detaching from SCBA as safety feature

PASS Device

1. PASS device shall contain power, control and battery modules
2. Power module shall provide power to all electronic SCBA components from battery module and act as central power system
3. Power module shall act as central command center, distributing all information and data among electronic components
4. Battery module shall be powered by six C-cell batteries or one lithium-ion rechargeable battery
5. PASS device shall design for battery level check and removal of batteries while SCBA remains in jump seat
6. Power module shall be capable of illuminating UAC fitting when supply cylinder reaches 35% of rated service time
7. Control module shall have analog and digital display for added redundancy. Analog gauge must be positioned above digital display as viewed by user
8. Control module shall be equipped with full color graphical display. Display shall be reprogrammable and capable of future integrations. Display's background color coordinates with HUD pressure status.
9. Control module shall automatically provide information to user when placed in upright position. Device can be manually activated by pressuring reset button
10. PASS device shall use single line to connect power and control module
11. Control module shall have two reset buttons that perform same function no matter which button is pressed
12. Control module shall have alarm button to activate full alarm and is to be illuminated
13. PASS device shall be capable of being reprogrammed to fire department standard operating procedures (SOP). Using PC software program, configuration tag can be created and tagged on each device needed. Reprogramming options are as follows:
 - 1) Medium pressure alarm.
 - 2) Pressure drop alarm.
 - 3) Primary temperature alarm.
 - 4) Secondary temperature alarm.
 - 5) Audible low-pressure alarm

14. PASS device shall be equipped with buddy lights on firefighter's front and back and viewable from 360° view; two buddy lights on front of user and four buddy lights in back of user
15. PASS device shall have colored buddy lights: green (pressure above 50% and no alarms), yellow (pressure between 36 and 50%) or red (below 36% or alarms are active).
16. Power module shall be equipped with dual sound emitters; sound emitters shall perform at minimum 100 dBa in room temperature
17. PASS device shall be capable of storing up to 36 hours of use information in event log form that are generated each time SCBA is pressurized. Event logs must indicate on/off cycles, alarms, alarm reset, and tagging events
18. PASS device shall be capable of storing periodic logs. Periodic logs must indicate cylinder pressure for each SCBA pressurization stored at 30-second intervals
19. PASS device's event and periodic logs shall provide ability to download to personal computer for maintenance records or for use in incident investigations
20. PASS device shall be immune to radio frequency interference (RFI) and must function properly in close proximity of fire service hand-held radios
21. PASS device shall have optional time-remaining display. Time remaining function must update calculations every 30 seconds based upon user's previous three minutes of air consumption. Initial calculation will appear after three minutes. Calculations can be made to zero pressure, low pressure alarm or medium pressure alarm
22. PASS device shall employ gasket perimeter seal to provide highest protection level against water ingress, while providing ability to upgrade or repair electronics
23. PASS device shall be capable of electronically storing user's name into memory via ID tag
24. PASS device shall be removable with no more than two screws
25. Control module shall have service mode that provides ability to see number of hours used, connect to PC and firmware versions
26. Control module shall incorporate rubber boot for added protection and is to be replaceable
27. Power and Control Modules shall have RFID chip for optional asset & maintenance tracking

Speaker Module

1. Speaker module shall provide amplified speech that removes inhalation breath noise
2. Speaker module shall provide at minimum, 70 dBa output
3. Speaker module shall turn on and off with PASS device
4. Speaker module shall be powered by central power system
5. Speaker module shall be positioned on chest and attached to shoulder straps.
6. Speaker module shall be capable of being mounted on either left or right shoulder strap
7. Speaker module shall easily be attached and removed without special tools
8. Speaker module shall have light to indicate that device is powered on
9. Speaker module shall have on/off button to allow user to manually power off as needed

Emergency Escape Breathing Support System

1. As option, emergency escape breathing support system must be accommodated by SCBA
2. System must be available with common SCBA quick-disconnect fitting
3. System shall connect to intermediate pressure side of SCBA, downstream of pressure reducer
4. System shall have both male and female connections
5. System shall have universal (Rectus) fitting

Carrier and Harness

1. Shoulder harness shall have separate left and right pads for easier and less costly replacement
2. Shoulder harness shall have retro-reflective markings for better visibility within low light conditions
3. Shoulder harness shall have localized friction pads on shoulders to prevent slippage
4. Shoulder harness shall be available in standard and serviceable tunnel
5. Shoulder harness shall have improved color stability up to 600°F
6. Shoulder harness shall be capable of washing at least 40 times while maintaining color fastness
7. Shoulder harness shall have optional chest strap
8. Harness design shall have Kevlar webbing
9. Shoulder harness shall have accessory attachment point available for facepiece or pouch and can be easily moved from one shoulder strap to the other
10. Shoulder harness shall differentiate pad inside from pad outside by color; pad inside is grey and outside is black
11. Waist pad shall be available in three options:
 - 1) Basic – basic pad with straps attaching directly to backplate
 - 2) Adjustable swiveling – standard pad attached to metal bracket that has three positions and automatically centers
 - 3) Rescue Belt II System
12. Adjustable swiveling waist pad shall be one-handed operation and can be performed while on user's back
13. Backplate shall be capable of accepting all three waist pad designs
14. Backplate shall have two side handles and one top handle that are accessible with gloved hand.
15. Backplate side handles shall be capable of 500 lbs. of static force
16. Backplate top handle shall be capable of 1000 lbs. of static force
17. Backplate cylinder band shall be available in metal
18. Waist pad shall be of rigid construction to allow for easy donning and support
19. Waist straps shall be double-pull forward design
20. Harness design shall have regulator keeper for storage that can be attached to waist strap or chest strap
21. Regulator keeper shall allow regulator to be connected at any angle

Weight

1. Weight of SCBA shall not exceed 24 lbs.
2. Weight of facepiece (without regulator, with communications) shall not exceed 1.4 lbs
3. Weight of cylinder and valve assemblies (empty) shall not exceed:

Cylinder Type	Weight
Carbon-wrapped L30	8 lbs. 0 oz.
Carbon-wrapped H30-SL	7 lbs. 4 oz.
Carbon-wrapped H45	9 lbs. 7 oz.
Carbon-wrapped H45-SL	9 lbs. 10 oz.
Carbon-wrapped H60-SL	11 lbs. 12 oz.

Asset and Maintenance Tracking Software

1. Should work on both desktop as well as mobile device
2. Must have the ability to track and report on assets including but not limited to SCBA, Facepieces, Cylinders, and Parts
3. Must have the ability to track and report on Maintenance, including but not limited to Work Orders, cylinder fill and which fill station was used, cylinder hydro static testing, SCBA flow tests
4. Must also have the ability to track and report on Fit Tests

5. Must also have the ability to track and report on Purchase Orders
6. Must have the ability to alert the user on any upcoming fit tests, cylinder hydro static testing, and SCBA overhaul that may be needed
7. Information must be stored in a manner that is updated seamlessly and instantly across all devices

Power Source

1. All components of the SCBA must be powered from single power source
2. Power source must have the ability to interchange between alkaline and rechargeable without making adaptations to the SCBA itself
3. Alkaline battery must be powered by six C cell batteries
4. Alkaline battery must weigh no more than 1lbs. 5oz.
5. Rechargeable battery must weigh no more than 1lb.
6. Rechargeable battery must recharge from full discharge in less than 7 hours
7. Rechargeable battery recharge temperature range must fall between 32°F and 104°F.
8. Rechargeable battery will have full charge capabilities for no less than 300 cycles.
9. Rechargeable battery Charger must be a smart charger which will rapid charge, analyze condition, and switch to trickle charge mode when charge is complete
10. Rechargeable battery Charger must have charging indication lights

Integrated Thermal Imaging Camera

1. Must have option for thermal imaging camera to be integrated into control module color display
2. Must have 220 x 176 resolution
3. Integrated Thermal Imaging Camera must have option for 5 user selected color palettes available on control module color display
4. Must be powered by central power source
5. Must have 30 hZ refresh rate
6. Thermal Imaging Camera must add no more than 4.2 oz. in additional weight to the SCBA
7. Thermal Imaging Camera must add no more than 1.25" in additional length to the SCBA

Upgradeability

1. Must be Bluetooth® enabled
2. Must be able to receive updates to firmware via a Bluetooth® connection
3. Control module must have Bluetooth® icon visible to display connection status
4. Must have the ability to upgrade standard control module to integrated thermal imaging camera control module

EXHIBIT D

*Columbus Consolidated Government
Breathing Apparatus (Annual Contract)*

RFB No. 20-0041

*Fireline, Inc.
Clarification Documents*

COLUMBUS CONSOLIDATED GOVERNMENT
Georgia's First Consolidated Government



FINANCE DEPARTMENT
PURCHASING DIVISION

100 TENTH STREET, P. O. Box 1340
COLUMBUS, GEORGIA 31902-1340
706.225.4087, FAX 706.225.3033
BIDLINE 706.653.4536
www.columbusga.org

March 24, 2020

Mr. Hien Nguyen
Fireline, Inc.
725 Patrick Industrial Lane
Winder, GA 30680

Re: Breathing Apparatus
(Annual Contract) RFB No. 20-0047

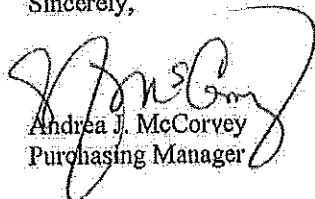
Dear Mr. Nguyen:

Thank you for your submittal in response to the referenced Request for Bids. The Fire & EMS Department has chosen Option 2 of your bid submittal. However, the Purchasing Division cannot accept your firm's "Customer Quote". Your complete bid should have been submitted on the Bid Form which was included in the Bid specifications.

A blank Bid Form is attached to allow you to re-submit your pricing for **OPTION 2**. Please make sure your entire bid, for all line items, is represented on the Bid Form. The City will not consider any additional attachments.

Your response is requested no later than March 31, 2020 by 5:00 PM. Please forward your response to the attention of Patti Postorino at email postorino.patti@columbusga.org or fax number 706-225-3033.

Sincerely,



Andrea J. McCorvey
Purchasing Manager

Attachment

FORM 2

BID FORM BREATHING APPARATUS (ANNUAL CONTRACT) RFB NO. 20-0041

IMPORTANT INFORMATION:

PLEASE SUBMIT ONE (1) ORIGINAL AND ONE (1) IDENTICAL COPY OF EACH BID.

By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete". Use the following check-list to verify the items are included in sealed bid:

- ☐ Communication Concerning This Solicitation (Form 1) ☐ Bid Form (Form 2)
☐ Contract Signature Page (Form 3) ☐ Insurance (Form 4) ☐ W-9 Rev 2018 (Form 5)
☐ Product Literature ☐ Proof of MSA Dealer ☐ Catalogs
☐ Warranty ☐ Sample Invoice ☐ Business License

Initial below to acknowledge receipt of the following addenda (if any):

Addendum No. 1 _____ Addendum No. 2 _____ Addendum No. 3 _____

ESTIMATED QUANTITY	DESCRIPTION	MANUFACTURING	UNIT COST*	EXTENDED COST*
30	FireHawk M7XT 4500 PSIG Air Masks Self Contained Breathing Apparatus with Mask-Mounted Regulators, Complete Unit	A-M7XTHD13C0B11AAB0	\$	\$
30	Spare Mask for above	10149288	\$	\$
30	(MSA G1 SCBA Air Mask) (4500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators	A-G1FS-422MA2C2LAA 10156459 MASK 10156424-SP (Cylinder)	\$ 5,350.00 \$ 295.00 \$ 1,150.00	160,500.00 8,850.00 34,500.00
30	MSA 4500 PSI, 45 Min, Carbon Fiber, Stealth Cylinder	10156424-SP	\$ 1,150.00	\$ 34,500.00
30	(MSA G1 SCBA Air Mask) (5500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators		\$	\$
30	MSA 5500 PSI, 45 Min, Carbon Fiber Stealth Cylinder		\$	\$
PRICE TO BE GOOD THROUGH FEBRUARY 12-2022 TOTAL CONTRACT VALUE				\$ 238,350.00
Discount for replacement parts 20 % discount. OFF LIST PRICE				
1	POSICHEK III YEARLY CALIBRATION	Honeywell	\$ 1,500.00	\$ 1,500.00 PER YEAR
*All shipping, delivery, and/or shipping charges must be included unit prices. The City will pay no additional shipping, delivery, and/or shipping charges.				

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all services and terms of the Columbus Consolidated Government.

Vendor Business Name FIRELINE, INC. Email Address Hnguyen@FIRELINEINC.COM
 Authorized Signature Hien Nguyen Print Name HIEU NGUYEN Date 3.24.2020
 If certified as a DBE or WBE, list the certifying agency: _____

Patti A Postorino

From: Hien Nguyen <HNguyen@firelineinc.com>
Sent: Thursday, March 26, 2020 2:34 PM
To: Patti A Postorino
Subject: RE: [EXTERNAL] RE: Breathing Apparatus RFB 20-0041 Option 2 format
Attachments: COLUMBUS PURCHASING DEPT 03-26-2020.pdf

Please see the revised bid form

The correct part number : **A-G1FS-422MA2C2LAR** (P/N should be below ***option two)

Thanks

Hien Nguyen

Cell: 404-216-6625

Office: 770.868.4448

Follow us on [Facebook](#) & [Instagram](#)

Visit our new website at www.firelineinc.com



FireLine
INC.

From: Patti A Postorino [mailto:Postorino.Patti@columbusga.org]
Sent: Thursday, March 26, 2020 2:17 PM
To: Hien Nguyen
Subject: RE: [EXTERNAL] RE: Breathing Apparatus RFB 20-0041 Option 2 format

Hello,

I notice now the Unit Cost and Extended Cost are missing for the "Spare Mask". MFG 10149288. \$440 / \$13,200.00
Also, please confirm the Mfg number for: A.G1FS-422MA2COLAR or is it C2LAR. I am checking these numbers and don't see the C2LAR.

It is very important every detail is accurate.

Thank you again.

Patti

From: Hien Nguyen <HNguyen@firelineinc.com>
Sent: Thursday, March 26, 2020 11:39 AM
To: Patti A Postorino <Postorino.Patti@columbusga.org>
Subject: RE: [EXTERNAL] RE: Breathing Apparatus RFB 20-0041 Option 2 format

Thank you!

Hien Nguyen
Cell: 404-216-6625

Office: 770.868.4448

Follow us on [Facebook](#) & [Instagram](#)

Visit our new website at www.firelineinc.com



FireLine
INC.

From: Patti A Postorino [<mailto:Postorino.Patti@columbusga.org>]
Sent: Thursday, March 26, 2020 11:32 AM
To: Hien Nguyen
Subject: RE: [EXTERNAL] RE: Breathing Apparatus RFB 20-0041 Option 2 format

Thank you 😊
Patti

From: Hien Nguyen <HNguyen@firelineinc.com>
Sent: Thursday, March 26, 2020 11:25 AM
To: Patti A Postorino <Postorino.Patti@columbusga.org>
Subject: RE: [EXTERNAL] RE: Breathing Apparatus RFB 20-0041 Option 2 format

Ms. Postorino,
Good morning,
Please see the revised form.
I am sorry for the typo.
Thanks,

Hien Nguyen
Cell: 404-216-6625
Office: 770.868.4448
Follow us on [Facebook](#) & [Instagram](#)
Visit our new website at www.firelineinc.com



FireLine
INC.

From: Patti A Postorino [<mailto:Postorino.Patti@columbusga.org>]
Sent: Thursday, March 26, 2020 11:13 AM
To: Hien Nguyen
Subject: RE: [EXTERNAL] RE: Breathing Apparatus RFB 20-0041 Option 2 format

Hello Hien,
Your original bid price for the Posicheck III Yearly Calibration was \$1,200. Please correct and re-issue the form.
Thank you.
Patti

FORM 2

BID FORM

BREATHING APPARATUS (ANNUAL CONTRACT)

RFB NO. 20-0041

IMPORTANT INFORMATION:

PLEASE SUBMIT ONE (1) ORIGINAL AND ONE (1) IDENTICAL COPY OF EACH BID.

By signing this Bid Form, the authorized representative understands the City reserves the right to request any omitted information, WHICH DOES NOT AFFECT THE SUBMITTED BID PRICE. Bidders shall be notified, in writing, and shall have two (2) days, after notification to submit the omitted information. If the omitted information is not received within two (2) days, the Bidder shall be deemed non-responsive and the Bid Submission will be deemed "Incomplete". Use the following check-list to verify the items are included in sealed bid:

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☐ Contract Signature Page (Form 3) ☐ Insurance (Form 4) ☐ W-9 Rev 2018 (Form 5)
☐ Product Literature ☐ Proof of MSA Dealer ☐ Catalogs
☐ Warranty ☐ Sample Invoice ☐ Business License

Initial below to acknowledge receipt of the following addenda (if any):

Addendum No. 1 _____ Addendum No. 2 _____ Addendum No. 3 _____

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30	Spare Mask for above	10149288	\$ 440 ⁰⁰	\$ 13,200 ⁰⁰
30	(MSA GI SCBA Air Mask) (4500 PSIG Air Masks) MSA Self Contained Breathing Apparatus with Mask-Mounted Regulators	A-GIFS-422 MA2C2 LAR 10156459 MASK 10156424-SP (CYLINDER)	\$ 5,350 ⁰⁰ \$ 295 ⁰⁰ \$ 1,150 ⁰⁰	\$ 160,500 ⁰⁰ \$ 8,850 ⁰⁰ \$ 34,500 ⁰⁰
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PRICE TO BE GOOD THROUGH FEBRUARY 12-2022 TOTAL CONTRACT VALUE				\$ 238,350 ⁰⁰
Discount for replacement parts: 20 % discount. OFF LIST PRICE				
1	POSICHEK III YEARLY CALIBRATION	Honeywell	\$ 1,200 ⁰⁰	\$ 1,200 ⁰⁰ PER YEAR
*All shipping, delivery, and/or shipping charges must be included unit prices. The City will pay no additional shipping, delivery, and/or shipping charges.				

The undersigned hereby declares that he has/they have carefully examined the specifications herein referred to and will provide all services and terms of the Columbus Consolidated Government.

Vendor Business Name: FIREONE, INC. Email Address: HNGUYEN@FIREONEINC.COM

Authorized Signature: Hien Nguyen Print Name: HIEN NGUYEN Date: 3.24.2020

If certified as a DBE or WBE, list the certifying agency: _____

From: Hien Nguyen <HNguyen@firelineinc.com>
Sent: Tuesday, March 24, 2020 3:52 PM
To: Patti A Postorino <Postorino.Patti@columbusga.org>
Subject: [EXTERNAL] RE: Breathing Apparatus RFB 20-0041 Option 2 format

Ms. Postorino,
Attached is the Form # 2 of the SCBA Annual Contract.
Please review and let me know if you have any questions.
Best regards,

Hien Nguyen
Cell: 404-216-6625
Office: 770.868.4448
Follow us on [Facebook](#) & [Instagram](#)
Visit our new website at www.firelineinc.com



FireLine
— INC. —

From: Patti A Postorino [<mailto:Postorino.Patti@columbusga.org>]
Sent: Tuesday, March 24, 2020 2:24 PM
To: Hien Nguyen
Subject: Breathing Apparatus RFB 20-0041 Option 2 format

Hello Mr. Nguyen,

Our apologies for further delay in processing a new contract. The Fire & EMS Department has chosen Option 2 of your bid submittal. Please review the attached letter and submit only Option 2 on our Bid Form. I have attached a blank copy of the Bid form for your convenience.

Thank you,
Patti

Patti Postorino, Buyer
Columbus Consolidated Government
Dept of Finance, Purchasing Division
Phone: (706) 225-3070
Fax: (706) 653-4109
Email postorino.patti@columbusga.org