

HINCKLEY TOWNSHIP BID FORM
SELF CONTAINED BREATHING APPARATUS

In
Hinckley Township
Medina County, Ohio

BY THE
Hinckley Township Board of Trustees

Submitting Company: _____

Signed: _____

Company Title: _____

Address: _____

Telephone: (____) _____

Fax: (____) _____

E-mail: _____

Board of Hinckley Township Trustees:

Melissa Augustine
Jack Swedyk
Monique Ascherl

NOTICE OF BID

The Hinckley Township Board of Trustees are requesting bids for self-contained breathing apparatus "SCBA".

Bid forms and specifications can be obtained in person Monday from 10 a.m. to 6 p.m., Tuesday through Thursday from 9 a.m. to 2 p.m., and, Friday from 9 a.m. to noon at:

**The Hinckley Township Administration Building
1410 Ridge Road
Hinckley, Ohio 44233**

All bids must be received no later than July 19 at 5:45 P.M. at the Hinckley Township Administration Building located at 1410 Ridge Road, Hinckley, Ohio at which time all properly-filed bids will be publicly opened and read aloud at 6:00 P.M.

All bids must be filed on forms provided by the Township and submitted in person or received by Martha Catherwood, Township Fiscal Officer, in a sealed envelope clearly marked "**SCBA Equipment Bid**" prior to the time and date set forth above.

Each bidder shall be required to file with his/her bid, the following:

1. A Bid Guarantee in the form of either;
 - a) A bond in accordance with R.C. §153.571, or
 - b) A Certified Check, Cashier's Check or Letter of Credit pursuant to Chapter 1305 of the Ohio Revised Code.

A Letter of Credit shall be revocable only at the option of the Township.

The amount of the Bid Guarantee, Certified Check, Cashier's Check or Letter of Credit shall be \$1,000.00.
2. A Statement of Bidder Resources and Experience,
3. A Non-Collusion Affidavit,
4. Personal Property Tax Verification Affidavit,
5. Independent Contractor Indemnification Clause,
6. A State of Ohio, Equal Opportunity Division, Certificate of Compliance

The bid will be awarded to the lowest and best bidder.

The Hinckley Township Trustees reserve the right to reject any and all bids.

Hinckley Township Board of Trustees
Melissa Augustine
Jack Swedyk
Monique Ascherl

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And

Hinckley Township, Ohio website
Hinckleytp.org

INSTRUCTIONS TO BIDDERS
Hinckley Township, Ohio
Self-Contained Breathing Apparatus Bid

SECTION I.

Bid Proposals shall be sent or delivered to the Board of Hinckley Township Trustees, c/o Martha Catherwood, Fiscal Officer, 1410 Ridge Road, Hinckley, Ohio, no later than 5:45 p.m. on July 19, 2022

Bids shall be enclosed in a sealed envelope marked “**SCBA Equipment Bid**” and shall bear the name of the bidder. All bids will be opened and read aloud on July 19, 2022 at 6:00 p.m. as stated in the "Notice of Bid."

No Bidder may withdraw his/her bid for a period of ninety (90) days after the date of bid opening. If it is not accepted within such period, such bid may be withdrawn without prejudice.

Each Bid shall contain the documents listed below in the following order:

1. Notice of Bid
2. Instructions to Bidders
3. Bid Guarantee **(Exhibit A)**
4. Statement of Bidder Resources and Experience, **(Exhibit B)**
5. Non-Collusion Affidavit, **(Exhibit C)**
6. Personal Property Tax Verification Affidavit, **(Exhibit D)**
7. Independent Contractor Indemnification Clause **(Exhibit E)**
8. A State of Ohio, Equal Opportunity Division, Certificate of Compliance
9. Bid Statement and Summation
10. Contractor's Bid Blank(s)

SECTION II.

Each bidder shall satisfy the Board of Hinckley Township Trustees by reference, that he/she is fully competent to properly execute the work required by these specifications by the stipulated completion date, **(See Exhibit B)**.

Bids shall be submitted using the attached blank forms, designed for such purpose. These forms must be completed intact, without removal of any part, must recite the full name of the party making the Bid, and must be properly signed.

SECTION III.

Each Bid shall be accompanied by a bid guarantee, in the form of a Bond, Certified Check, a Cashier's Check, or a Letter of Credit.

The Certified Check, Cashier's Check, or Letter of Credit that is used, shall be drawn on a solvent bank in an amount of \$1,000.00.

If a Bond **(Exhibit A)** is used, the Bond shall be signed by a surety company authorized to do business in the State of Ohio and accompanied by the surety's power of attorney affirming said signature.

A letter of credit shall be revocable only at the option of the Township. The bid guarantee shall be given as security that, if the Bid is accepted, the Bidder will enter into a contract in conformity with the Bid, details and specifications.

All bid guarantees shall be made payable to the order of the **HINCKLEY TOWNSHIP BOARD OF TRUSTEES, MEDINA COUNTY, OHIO**. Should a bid be rejected, the bid guarantee submitted in the form of a Bond, Certified Check, Cashier's Check, or Letter of Credit will be returned immediately upon the awarding of the contract, or decision to reject all bids.

SECTION IV.

Unless otherwise called for in the specifications the Contractor shall warranty all products for a minimum of one (1) year from delivery. The Contractor shall warranty and guarantee that all project items are free from defects due to faulty materials or workmanship and the Contractor shall promptly replace such products as may be necessary by reason of such defects including the repairs of any damage to other parts of the product resulting from such defects. The Township will give notice of observed defects with reasonable promptness. In the event that the Contractor should fail to make such repairs, adjustments, or other work that may be necessary by such defects, the Township may do so and charge the Contractor the costs thereby incurred during the warranty period.

SECTION V.

Securities Approval:

The Board of Hinckley Township Trustees shall determine the sufficiency of all securities. Securities filed pursuant to this bid offer shall be issued by a surety company authorized to conduct business in this state as a surety, approved by the Board of Hinckley Township Trustees.

SECTION VI.

Estimate of cost \$161,606.00

SECTION VII.

Other Costs and Requirements:

Bids must include all costs of furnishing the product, and all other things necessary for the full and complete performance of the contract and all costs of fulfilling the requirements of laws, rules, and regulations pertaining thereto.

The following is a partial list of ancillary contract costs and requirements.

1. Bids must include the cost of all required securities.
2. Bids must include the cost, to pay all charges, fees and taxes, and to provide all notices necessary and incidental to the due and lawful prosecution of the Work.
3. Bids must include the cost of insurance coverage.
4. Hinckley Township is exempt from all sales, excise, and transportation taxes, with the exception of State of Ohio motor fuel tax. Bid prices shall exclude all such taxes.

Said list is provided for the convenience of Bidders, to assist in their inclusion of all components of costs and fulfillment of all requirements, though this list does not recite all such costs and requirements

SECTION VIII.

Liability:

The Contractor shall comply with all provisions of the laws and rules of the Ohio Bureau of Workers' Compensation covering all operations under the Contract whether performed by the Contractor or his/her subcontractor. Contractor will agree to provide workers' compensation coverage on all employees utilized under this Agreement, as required by Ohio law, or to see that such coverage is provided by any subcontractor utilized. Contractor further will agree to hold the Township harmless and indemnify and

defend the Township's trustees, officers, employees, and agents against any claim for damages raised against them as a result of Contractor's failure to provide or assure such coverage.

The Contractor shall provide proof of general liability insurance and other coverage while work is in progress and during the time the contract is in effect. A Certificate of Liability Insurance must be submitted to the Hinckley Township Trustees and made an attachment to the successful bid prior to the execution of the contract agreement. Said Certificate of Liability Insurance shall name **Hinckley Township** and the **Hinckley Township Trustees**, as additional insureds.

The Contractor shall be liable for all amounts including that in excess of the insurance, if any, and the Contractor shall agree, in writing, to hold the Township harmless from all claims of damages resulting from the work undertaken.

Should Contractor's policy of liability insurance be canceled or subject to reduction of coverage, Contractor will immediately notify the Township of such cancellation or reduction and shall use its best efforts to obtain coverage required by this Contract. The inability of Contractor to obtain such replacement coverage may warrant the immediate suspension of this contract, at the sole discretion of the Township.

SECTION IX.

Personal Property Taxes:

Hinckley Township, prior to entering into a formal contract with the successful bidder will receive from the contractor, a signed affidavit stating their personal property tax liability to Medina County. This form shall be included in this package.

SECTION X.

Factors for Acceptance or Rejection of Bids:

1. The contract shall be awarded to the lowest and best Bid.
2. Any Bid which is incomplete, conditional, obscure, or which contains additions not called for or irregularities of any kind, may be rejected.
3. The Township reserves the right to reject any and all Bids, and also the right to waive any informality in the Bid. The Township has the right to postpone the decision to award a contract for up to ninety (90) days.
4. No contract shall be awarded to any person, firm, or corporation that is in arrears or is in default to the Township upon any debt or contract, or that is in default as surety or otherwise upon any obligation to the Township, or that has an unresolved finding of recovery with the State Auditor, or has been debarred by the Township or Medina County from consideration for contract awards.

SECTION XI.

Precautions:

All Bidders should take the following precautions in preparing the bid:

1. Sign and fill out each proposal completely. Only bid documents filled out with permanent marking instruments (i.e., pen or typewriter) will be considered in awarding of the contract. Bid documents totals and signatures completed with pencil will not be read or accepted.
2. Make sure the bid guarantee is properly executed and signed.
3. Where a guaranteed bond is utilized, make sure it is properly executed and signed by both the surety and the bidder, with the names of the parties signing typed immediately below their signatures; affix any corporate seal.
4. Make sure that the agent of the surety bonding company can furnish on demand.
 - a. Credentials showing his power of attorney.
 - b. Certificate showing the legal right of the company to conduct business in the State of Ohio.

SECTION XIII.

Interpretations of Bidding Documents:

Bidders shall promptly notify Fire Chief Grossenbaugh of any ambiguity, inconsistency or error which he/she may discover upon examination of the bidding documents. Bidders requiring clarification or interpretation of the bidding documents shall make a written request to the Township, seven (7) business days prior to the date of bid opening. Any written interpretation, correction or change of the bidding documents will be made by addendum. Interpretations, corrections or changes of the bidding document made in any other manner will not be binding, and the bidders shall not rely upon such interpretations, corrections and changes.

[EXHIBIT A]

BID GUARANTY BOND

KNOW ALL PERSONS BY THESE PRESENTS, that we, the undersigned _____ as principal and _____ as sureties, are hereby held and firmly bound unto the Hinckley Township Board of Trustees as obligee in the penal sum of \$1,000.00 for the bid submitted by the principal to the obligee on _____ to undertake the project known as self contained breathing apparatus bid. For the payment of the penal sum well and truly to be made, we hereby jointly and severally bind ourselves, our heirs, executors, administrators, successors, and assigns.

Signed this ____ day of _____, ____ THE CONDITION OF THE ABOVE OBLIGATIONS IS SUCH, that whereas the above named principal has submitted a bid for _____.

Now, therefore, if the obligee accepts the bid of the principal and the principal fails to enter into a proper contract in accordance with the bid, plans, details, specifications, and bills of material; and in the event the principal pays to the obligee the difference not to exceed ten per cent of the penalty hereof between the amount specified in the bid and such larger amount for which the obligee may in good faith contract with the next lowest bidder to perform the work covered by the bid; or in the event the obligee does not award the contract to the next lowest bidder and resubmits the project for bidding, the principal pays to the obligee the difference not to exceed ten per cent of the penalty hereof between the amount specified in the bid, or the costs, in connection with the resubmission, of printing new contract documents, required advertising, and printing and mailing notices to prospective bidders, whichever is less, then this obligation shall be null and void, otherwise to remain in full force and effect, if the obligee accepts the bid of the principal and the principal within ten days after the awarding of the contract enters into a proper contract in accordance with the bid, plans, details, specifications, and bills of material, which said contract is made a part of this bond the same as though set forth herein;

IN WITNESS WHEREOF, the Principal and Surety have executed this Performance Bond under their several seals, if any, this ____ day of _____, 2022, by their respective representatives, pursuant to authority of their respective governing bodies.

ATTEST:

(Principal) _____

(Surety) _____

(Principal Secretary) (Surety Secretary)

(SEAL)

(SEAL)

(Witness as to Principal) _____

(Address) _____

(Witness as to Surety)_____

(Address)_____

(Attorney-In-Fact)_____

(Address)_____

Legal Status of the Principal

A CORPORATION duly organized and doing business under the laws of the State of Ohio, for whom _____, bearing the official title of _____, whose signature is affixed to this Performance Bond, is duly authorized to execute contracts.

A PARTNERSHIP trading and doing business under the firm name and style of _____, all the members of which with addresses are: _____.

An INDIVIDUAL whose signature is affixed to this Bid Guarantee Bond, doing business under the firm name and style of _____.

CERTIFICATE AS TO PRINCIPAL

I, _____, certify that I am the _____ Secretary of the corporation named as the Principal in the within Bid Guarantee Bond; that _____, who signed the Bid Guarantee Bond on behalf of the Principal was then _____ of the corporation; that I know his/her signature, and his/her signature thereto is genuine; and that the Bid Guarantee Bond was duly signed, sealed, and attested to for and on behalf of the corporation by authority of its governing body.

(Corporate Seal)

[EXHIBIT B]

**HINCKLEY TOWNSHIP
MEDINA COUNTY, OHIO**

Bid For

Self-Contained Breathing Apparatus

STATEMENT OF BIDDER RESOURCES AND EXPERIENCE

The bidder, in order to secure consideration of this Bid, will here submit a statement of work performed similar to that to be done under this proposed contract. The Bidder is further invited to submit evidence of his financial ability to perform the work.

[EXHIBIT C]

HINCKLEY TOWNSHIP
MEDINA COUNTY, OHIO

Bid For
Self-Contained Breathing Apparatus

NON-COLLUSION AFFIDAVIT

STATE OF OHIO

COUNTY OF _____

_____, being first duly sworn,

deposes and says that he/she is _____ of

(Sole Owner, Partner, President) _____, the

party making the foregoing proposal or bid; that such bid is genuine and not collusive or a sham; that said bidder has not colluded, conspired, connived, or agreed, directly or indirectly, with any bidder or person, to put in a sham bid, or that such other person shall refrain from bidding and nor in any manner, directly, or indirectly, sought by agreement or collusion, or communication or conference, with any person, to fix the bid price of affiant or any other bidder, or to fix any overhead, profit or cost element of said bid price, or of that of any other bidder, or to secure any advantage against the Hinckley Township Board of Trustees or any person or persons interested in the proposed contract, and that such bidder has not, directly or indirectly, submitted this bid, or the contents thereof, or divulged information or data related thereto any association or to any member or agent thereof.

Affiant

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

Notary public in and for _____
County, State of Ohio

My commission expires _____ 20_____

[EXHIBIT D]

HINCKLEY TOWNSHIP
MEDINA COUNTY, OHIO

Bid For
Self-Contained Breathing Apparatus

PERSONAL PROPERTY TAX VERIFICATION AFFIDAVIT

Now comes the successful bidder, _____,
Upon a competitive bid for _____ on the
_____ Day of _____, 20____, and first being duly sworn deposes
and says that he/she/it _____ charged at the time the bid was submitted with
any delinquent personal **(was or was not)** property taxes on the general tax list of
personal property of Medina County. (If applicable), the amount due and unpaid
delinquent personal property tax \$ _____.

Further Affiant Sayeth Naught.

(Signature)

(Title)

Sworn to before me this _____ day of _____, 20_____.

Notary Public, State of Ohio

My Commission Expires: _____

THIS AFFIDAVIT MUST BE COMPLETED BEFORE A CONTRACT MAY BE ENTERED INTO UNDER
OHIO REVISED CODE CHAPTER 5719.042

[EXHIBIT E]

HINCKLEY TOWNSHIP
MEDINA COUNTY, OHIO

**Bid For
Self-Contained Breathing Apparatus**

INDEPENDENT CONTRACTOR INDEMNIFICATION CLAUSE

The Contractor and the Township mutually agree that the relationship formed by this agreement is intended to be that of customer and independent contractor, and is not an employment relationship.

The Contractor hereby represents that it is not an entity over whom the National Labor Relations Board has ever declined jurisdiction.

The contractor further agrees and covenants that, should a safety issue or complaint arise from, or involving, an employee, agent or representative of the contractor, the Contractor will indemnify and hold the Township harmless, and will assume all legal and financial responsibility for said issue or complaint including, but not limited to, all fines, fees, costs, corrective action, provision of equipment, training and administration.

The Contractor further agrees and covenants that, should a safety related issue, suit, or complaint be filed against the Township by an employee, agent or representative of the Contractor, the Contractor will pay all associated costs of the Township, as the Township deems necessary, in order to defend, correct, or resolve said issue or complaint.

Signed:

Contractor

Date

Hinckley Township Fire Department Self Contained
Breathing Apparatus Specifications ("SCBA")

SCBA BID SPECIFICATION

The purpose of this bid specification is to establish the minimum requirements for an open-circuit self-contained breathing apparatus (SCBA).

The successful bidder agrees to provide, at their own expense, a factory trained instructor for such time as the respirator user shall require complete instruction in the operation and maintenance of the respirator.

Any exceptions to these specifications must be detailed in a separate attachment. Failure to do so will automatically disqualify the buyer.

The successful bidder must be a sales distributor, authorized by the manufacturer, to sell the equipment specified.

Instructions for Bidders

1. Each Proposal shall be legibly written or printed in ink on the Proposal provided in this bound copy of the proposed Contract Documents. No alterations in proposals, or in the printed forms therefore, by erasures, interpolations, or otherwise will be acceptable unless each such alteration is signed or initialed by the Bidder. If initialed, the Owner may require the bidder to identify any alteration so initialed. No alteration in any proposal, or in the proposal form on which it is submitted, shall be made by the person after the Bidder has submitted the Proposal. Any and all addenda to the Contract Documents, on which a proposal is based, properly signed by the Bidder shall accompany the Proposal when submitted.

Each Proposal submitted shall be enclosed in a sealed envelope, addressed to the Fire Chief, Hinckley Fire Department identified on the outside with the words "Hinckley Fire Department 2022 Self-Contained Breathing Apparatus" and filed with the Administrator, Hinckley Township.

2. Each Bidder shall carefully examine the Specifications and other Contract Documents, shall visit the sites and fully inform him/herself of all conditions affecting the work or the cost thereof, and shall be presumed to have done so and their bid shall be based upon their own conclusions. Each Bidder shall inform themselves concerning all Federal, State, and local laws, ordinances, or regulations, which may in any manner affect their proposed operations of construction, or those engaged or employed on the work or the material or equipment. Should a Bidder find discrepancies in, or omissions from, the Specifications or other Contract Documents, he should at once notify the Fire Chief and obtain clarification or interpretation prior to submitting any bid. Any interpretation of the proposed Contract Documents will be made only by addendum duly issued and a copy of such addendum will be emailed or delivered to each person obtaining a set of such documents from the Township. The Township will not be responsible for any other explanations or interpretations of the proposed Contract Documents.

3. No bidder may submit more than one proposal. Two proposals under different names will not be received from one firm or association.

4. No bidder may withdraw their proposal for a period of ninety (90) days after the date and hour set for the opening herewith. A bidder may withdraw their proposal at any time prior to the expiration of the period during which proposals may be submitted, by written request of the same person or persons who signed the proposal.

5. The Township reserves the right to accept the bid, which in its judgment is the *lowest and best bid*; to reject any or all bids; and to waive irregularities or informalities in any bids submitted. Bids received after the specified time of closing will be returned unopened.

6. None of the Instructions to Bidders, Proposal, Contract Payment and Bond, Contract Agreement, General Conditions, Special Conditions, Specifications, and other documents shall be removed from the bound copy of the "Contract Documents" prior to filing the Proposal contained therein.

7. Each Bidder shall sign their proposal, using their usual signature, and giving their full business address. Bids by Partnerships shall be signed with the Partnership named, followed by the signature of one of the members of the Partnership or by an authorized representative and designation of the person signing. Bids by Corporations shall be signed with the name of the Corporation, followed by the signature and designation of the President, Secretary, or other person authorized to bind it in the matter. The names of all persons signing should also be typed or printed below the signature. A bid by a person who affixes to their signature the word "President", "Secretary", "Agent", or other designation, without disclosing their Principal, may be held to be the bid of the individual signing. When requested by the Township, satisfactory evidence of the authority of the officer signing on behalf of a corporation shall be furnished.

8. Deviations to Specifications and Requirements: When bidding on an "or equal," Bids must be accompanied with all descriptive information necessary for an evaluation of the proposed material or equipment such as the detailed drawings and specifications, certified operation and test data, and experience records. Failure of any bidder to furnish the data necessary to determine whether the product is equivalent, may be cause for rejection of the specific item(s) to which it pertains. All deviations from the specifications must be noted in detail by the bidder on the Affidavit of Compliance form, at the time of submittal of Bid. The absence of listed deviations at the time of submittal of the Bid will hold the bidder strictly accountable to the specifications as written. Any deviation from the specifications as written and accepted by Hinckley Township may be grounds for rejection of the material and/or equipment when delivered.

9. Irrevocable Offer: Any Bid may be withdrawn up until the due date and time set for opening of the IFB. Any Bid not so withdrawn shall, upon opening, constitute an irrevocable offer for a minimum period of 90 days to sell to Hinckley Township the goods or services set forth in the IFB, until one or more of the Bids have been duly accepted by Hinckley Township.

Approvals

The SCBA shall be approved to the newest & most current NIOSH & NFPA standards. The SCBA must also be able to be purchased under a FEMA AFG grant, meeting current standards and approved equipment lists.

Quantities

19	_____	SCBA with two 4500 psi 45 minute bottle per SCBA
33	_____	Face piece
	_____	Delivery time is 180 days

	Meets Specifications		
	Yes	No	Exception
1.1 SCBA 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 45 or 60 minute-rated service life and compliant with all requirements of the National Fire Protection Association's 2018 Edition of NFPA-1981 Standard on Open-Circuit Self-Contained Breathing Apparatus.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2. Units equipped with integrated PASS device must meet requirements of NFPA 1982, 2018 edition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.1. Facepiece	Meets Specifications		
	Yes	No	Exception
2.1.1. Facepiece shall have removable inhalation check valve to prevent exhaled air from entering and contaminating the second stage regulator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.2. Facepiece shall have an open port to provide miniscule breathing resistance when regulator is not attached.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.3. Facepiece shall not contain electronic components	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.4. Facepiece shall provide means to display to user with visual indicators for Heads-Up Display (HUD).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.5. Facepiece shall have icon for HUD system status indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.6. Facepiece shall have regulator attachment that does not bear any weight on lens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.7. Facepiece shall have effective field of view of 86% and overlapping field of view of 122% without attached component	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.8. Facepiece shall be available in three sizes in Hycar Rubber (small, medium, large)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.9. Facepiece shall have a nose cup comprised of silicone rubber and available in three sizes (small, medium, large)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.10 Facepiece shall have three head harness option constructed of flame/heat resistant assembly: 2.1.10.1 Kevlar 4-pt. adjustable Head Harness 2.1.10.2 Kevlar 5-pt. adjustable Head Harness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.11. 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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.12. Lens shall be hard-coated on outside and anti-fog coated on inside	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.13. Facepiece shall have exhalation valve that is to be serviceable without special tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1.14. Facepiece shall be capable of water submersion for cleaning and disinfection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Meets Specifications		
	Yes	No	Exception
3.1. Mask-Mounted Regulator			
3.1.1. The second stage regulator shall be a Push-to-Connect style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.2. When doffing regulator, regulator disengagement shall simultaneously stop air flow and release regulator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.3. Regulator shall house electronic module that functions as microphone and HUD system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.4. Regulator shall be equipped with variable flow bypass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.5. Regulator shall not have exposed wiring in order to prevent snags and increase product durability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.6. Regulator shall have a purge cover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.7. Regulator shall have fewer than 35 parts that are easily replaceable without special tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1.8. Regulator must be equipped with positive protection Tetraplex Shield membrane that covers diaphragm, preventing permeation of CBRN agents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Meets Specifications		
	Yes	No	Exception
4.1 Heads-Up Display (HUD)			
4.1.1. Heads-Up Display (HUD) System shall be integrated within regulator, eliminating snag hazards and increase product durability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1.2. HUD shall be powered from central power system or separate batteries, vendor is to identify location and type of batteries if rechargeable single battery is not used. Please list quantity used over a 15 year time schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1.3. HUD System shall eliminate cross-talk among firefighters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1.4 HUD System shall be immune to radio frequency interference (RFI) and must function properly in close proximity to fire service hand-held radios	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1.5 HUD system shall provide user with remaining cylinder air volume, available in four increments through series of four colored LEDs 4.1.5.1 Four green lights - 76 to 100% cylinder volume 4.1.5.2 Three green lights - 51 to 75% cylinder volume 4.1.5.3 Two flashing amber lights - 34 to 50% cylinder volume 4.1.6.4 One flashing red light - 0 to 33% cylinder volume	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1.6 HUD status indicators shall be icon-based and display battery life warning, PASS alarms, EVACUATE indicator, and secondary alarm indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buddy lights shall be visible from outside of firefighter's facepiece	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5.1 Universal Air Connection (UAC)	Meets Specifications		
	Yes	No	Exception
5.1.1 System shall be capable of:			
5.1.1.1 Refill within immediately dangerous to life or health (IDLH) atmospheres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1.1.2 Transfilling between two SCBA wearers (connection allows for donation and receipt of air), providing emergency breathing system (EBS) while maintaining NIOSH approvals			
5.1.1.3 Quickly refilling (approximately one-minute duration) SCBA cylinder from mobile compressor, cascade system or RIT pack			
5.1.2 Primary UAC shall be illuminated when supply pressure reaches Low Pressure Warning Alarm or can be configured to optional medium pressure warning alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1.3 SCBA shall have pouch equipped with a 3-foot quick-fill hose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Meets Specifications		
	Yes	No	Exception
6.1. Pressure Reducer (First-Stage Regulator) with Primary Low Pressure Warning Device			
6.1.1 Pressure reducer shall incorporate downstream valve to ensure fail-safe design when in open position	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.2 Pressure reducer shall incorporate bell alarm mechanism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.2.1 Bell alarm mechanism shall be an air-actuated, continuously ringing audible warning alarm, automatically operating when supply cylinder air pressure reaches approximately 33% of rated service life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.2.2 Bell alarm mechanism shall cover multiple levels of frequencies to cover all hearing levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.2.3 Bell alarm mechanism shall be user-accessible while wearing SCBA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.3 Pressure reducer reduces cylinder pressure to outlet pressure not to exceed 115 psi; outlet pressure must be adjustable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.4 Pressure reducer shall have flow capacity of 700 liters per minute at full pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.5 Pressure reducer shall have quick-connect cylinder connection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.5.1 Quick-connect connection shall not be removable from cylinder while under pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.6 Pressure reducer shall have a remote connection for cylinder connection location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.7. 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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.8 Pressure reducer shall be sealed system that does not allow moisture to enter valve components	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.9. Pressure reducer shall have no more than 42 individual regulator replacement parts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.10. Pressure reducer shall not require special tools for disassembly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1.11. Pressure reducer shall have two accessory ports, one medium pressure and one high pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7.1 Cylinders	Meets Specifications		
	Yes	No	Exception
7.1.1 Cylinders with 4500 psi operating pressure must be available in 45- and 60-minute durations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.1.2. 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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.1.3. 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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.1.4. Cylinder valve shall be available with remote connection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.1.5. 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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.1.6. Cylinder valve shall incorporate CGA thread that can be converted to quick connect cylinder without special tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.1.7. Cylinder shall have bracket and boot that can be user-installed and provide positioning and added security of cylinder to back plate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.1.8. Delivered cylinders more than 90 days past their manufacture date will not be accepted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Meets Specifications		
		Yes	No	Exception
8.1. PASS Device				
8.1.1	PASS device shall contain the power, control, and battery modules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.2	Power module shall provide power to all electronic SCBA components from the battery module and act as central power system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.3	Power module shall act as central command center, distributing all information and data among electronic components	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.4	Battery module shall be powered by one lithium-ion rechargeable battery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.5	Expected battery service life batteries shall be 3 to 5 months on average with telemetry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.6	PASS device shall be designed for battery level check and removal of batteries while SCBA remains in jump seat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.7	Power module shall be capable of illuminating UAC fitting when supply cylinder reaches 33% of rated service time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.8	Control module shall have analog and digital display for added redundancy. Analog gauge must be positioned above digital display as viewed by user	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.9	Control module shall be equipped with full color graphical display. Display shall be reprogrammable and capable of future integrations. The display's background color shall coordinate with HUD pressure status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.10	Control module shall automatically provide information to user when placed in upright position. Device can be manually activated by pressing reset button	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.11	PASS device shall use single line to connect power and control module	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.12	Control module shall have two reset buttons that perform same function no matter which button is pressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p>8.1.13 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:</p> <p>8.1.13.1 Medium pressure alarm</p> <p>8.1.13.2 Pressure drop alarm</p> <p>8.1.13.3 Primary temperature alarm</p> <p>8.1.13.4 Secondary temperature alarm</p> <p>8.1.13.5 Audible low pressure alarm</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.14 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</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.15 PASS device shall have colored buddy lights: green (pressure above 50% and no alarms), yellow (pressure between 34 and 50%) or red (below 34% or alarms are active)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.16 Power module shall be equipped with dual sound emitters; sound emitters shall perform at minimum 100 dBa in room temperature</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.17 PASS device shall be capable of storing up to 25 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</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.18 PASS device shall be capable of storing periodic logs. Periodic logs must indicate cylinder pressure for each SCBA pressurization stored at 15-second intervals</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.19 PASS device's event and periodic logs shall provide ability to download to personal computer for maintenance records or for use in incident investigations</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.20 PASS device shall be immune to radio frequency interference (RFI) and must function properly in close proximity of fire service hand-held radios</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.21 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</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>8.1.22. PASS device shall employ gasket perimeter seal to provide highest protection level against water ingress, while providing ability to upgrade or repair electronics</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8.1.23	PASS device shall be capable of electronically storing user's name into memory via ID tag	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.24	PASS device shall be removable with no more than two screws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.1.25	Control module shall incorporate rubber boot for added protection and is to be replaceable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Meets Specifications		
9.1 Speaker Module		Yes	No	Exception
9.1.1.	Speaker module shall provide amplified speech that removes inhalation breath noise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.2.	Speaker module shall provide at minimum, 70 dB output	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.3.	Speaker module shall turn on and off with PASS device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.4.	Speaker module shall be powered by central power system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.5.	Speaker module shall be capable of passing NFPA heat and immersion leakage test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.6.	Speaker module shall be positioned on chest and attached to shoulder straps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.7.	Speaker module shall be capable of being mounted on either shoulder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.8	Speaker module shall easily be attached and removed without special tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.9	Speaker module shall have light to indicate that device is powered on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.1.10	Speaker module shall have on/off button to allow user to manually power off as needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10.1. Carrier and Harness	Meets Specifications		
	Yes	No	Exception
10.1.1. Shoulder harness shall have separate left and right pads for easy, low-cost replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.2. Shoulder harness shall have retro-reflective markings for better visibility within low light conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.3. Shoulder harness shall have localized frictions pads on shoulders to prevent slippage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.4. Harness design shall have Kevlar webbing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.5. Shoulder harness shall have accessory attachment point available for facepiece or pouch and can be moved from left to right shoulder strap or vice versa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.6. Shoulder harness shall differentiate pad inside from pad outside by color; pad inside is grey and outside is black	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.7. Waist pad shall be adjustable swiveling - standard pad attached to metal bracket that has three positions and automatically centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.8. Adjustable swiveling waist pad shall be one-handed operation and can be performed while on user's back	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.9. Back plate shall have two side handles and one top handle that are accessible with gloved hand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.10. Back plate top handle shall be capable of 1000 lbs. of force	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.11. Back plate cylinder band shall be metal and easily adjust to accommodate different cylinder sizes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.12. Waist pad shall be of rigid construction to allow for easy donning and support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.13. Harness design shall have regulator keeper for storage that can be attached to waist strap or chest strap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.1.14. Regulator keeper shall allow regulator to be connected at any angle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Meets Specifications		
	Yes	No	Exception
11.1 Training and Fit Testing			
11.1.1 The successful bidder will submit a plan for training all department personnel how to use the SCBA. The training program shall be in a PowerPoint or similar format.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.2.1 The successful bidder shall provide initial fit testing for all members of the fire department. The fit testing shall comply with quantitative fit testing protocol per OSHA 1910.134 Appendix A Part I.c.3 (CNC (PortaCount) protocol). Fit testing shall include proper fit for each user with all sizes of face piece and nose cup being utilized to insure an adequate fit test is achieved. A computer-generated report shall be provided to the department. The report shall include the information specified in OSHA1910.134(m) records.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Meets Specifications		
	Yes	No	Exception
Warranty			
The warranty shall be provided with the bi package and shall be 15 years on electronics and 15 years on non-ware parts against manufacture defects on the balance of the SCBA includes rechargeable batteries. No exceptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Meets Specifications		
	Yes	No	Exception
Details			
1. Please enclose with your proposal an SCBA specification for your manufacturer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. A list of additional standard equipment no in the bid			
3. List all exceptions and alternate information on a separate sheet. No exceptions.			

12. REQUIRED QUANTITIES AND PRICING

Item #	Quantity	Description	Price Each	Total Price
1	19	2018 Edition of NFPA-1981 4500 psi Compliant SCBA, with rechargeable lithium-ion battery and quick connect cylinder adapter.		
2	38	4500 psi 45 minute rated, carbon-wrapped cylinder		
3	33	Facepiece		
4	1	Multi bank charger for lithium-ion batteries.		
5	0	Shipping Cost		
Total Price of Required Items			\$	

Delivery time for required quantities to Hinckley Fire Department once the order is placed will be _____ days.

**HINCKLEY TOWNSHIP FIRE DEPARTMENT
REQUEST FOR BIDS ON
SELF-CONTAINED BREATHING APPARATUS**

I, _____, as an authorized signer for the company, hereby certify that the figures contained in this Bid Proposal are accurate and correct. I also have read and understand the specifications for the Hinckley Township, Ohio, Self-Contained Breathing Apparatus and submit this Bid Proposal for consideration.

Signed: _____

Print Name: _____

Title: _____

Company: _____

Mailing Address: _____

Phone: _____

Email: _____

Date: _____