

STATE OF DELAWARE



DELAWARE HEALTH AND SOCIAL SERVICES

DIVISION OF MANAGEMENT SERVICES

"DMS - Serving Those Who Serve Delaware"

SPECIFICATIONS AND CONTRACT DOCUMENTS NO. 7258

FOR

Mobile Dental Clinic Truck with 2 Operatories

Gross Vehicle Weight below 26,000 lbs.

(No CDL Required)

Lease to Buy

Required for Use By

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

Deposit	WAIVED
Performance Bond	WAIVED
Date Due:	November 13, 2008 11:00A.M. Local Time

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

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

INVITATION TO BID # 7258

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

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

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

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

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

In the event that state offices are closed on October 30, 2008 due to weather-related or other emergencies, the pre-bid meeting will be cancelled. The pre-bid meeting will be reposted at a later date on the website.

Sealed bids will be accepted at:

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

until **11:00 A.M. local time on November 13, 2008** at which time they will be opened and recorded.

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

The following forms must be included with your bid:

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

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

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

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

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

NOTE TO VENDORS

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

DELIVERY INSTRUCTIONS

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

FOR FURTHER BID INFORMATION PLEASE CONTACT:

Buyer: Sylvia T. Adams
Delaware Health and Social Services
DMS – Procurement Branch
Main Bldg., 2nd Floor, Room 262
1901 N. DuPont Highway
New Castle, DE 19720
(302) 255-9297
sylvia.adams@state.de.us

ADDITIONAL TERMS AND CONDITIONS

Ordering Procedure:

Successful contractors are required to have either a local telephone number within the (302) area code, a toll free (800) number, or agree to accept collect calls. Each Agency is responsible for placing their orders. This may be accomplished by written purchase order, telephone, fax or computer on-line systems.

Billing:

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

Payment:

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

Product Substitution:

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

Hold Harmless:

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

Force Majeure:

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

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

SPECIFICATION 1: VEHICLE CAB AND CHASSIS:

- a. Year: 2008 or newer and previously untitled.
- b. Engine: Minimum: 5.9 to Maximum: 7.8L V8 Diesel Engine.
- c. Wheelbase: 270" minimum - 308" maximum.
- d. Brakes: Power 4 wheel hydraulic or air disc brakes with anti-lock braking system (ABS) or by design.
- e. Power Train: Heavy Duty.
- f. Tires: 7; standard chassis manufacturer's tire specifications to include duals on vehicle rear and spare tire; in compliance with F.M.V.S.S.
- g. Color: Gloss White.
- h. Suspension: full or partial air ride.
- i. Shock Absorbers: Heavy Duty Shock Absorbers.
- j. Front axle: Heavy Duty - Minimum 8,000 lbs. – Maximum 12,000 lbs.
- k. Rear Axle: Heavy Duty - Minimum 13,500 lbs. - Maximum 19,500 lbs.
- l. Engine Cooling System: Heavy Duty.
- m. Battery: Heavy Duty Minimum: 3 year warranty - Maximum: Lifetime.
- n. Alternator: 150 AMP (Heavy Duty) or Most Adequate for Vehicle.
- o. Transmission: Automatic, Heavy Duty size and torque adequately compatible with Engine Horsepower.
- p. Front Bumper: Standard Heavy Duty.
- q. Cab: Cabin Chassis
- r. Fuel Tank: Minimum: Minimum 60 gallons- Maximum 80 gallons.
- s. Climate Control: Manual for air conditioning and heat.
- t. Steering Column: Tilt.
- u. Power Steering.
- v. Driver air bag; passenger air bag optional.
- w. Floor Covering: Standard for a Cabin Chassis Vehicle Cab.
- x. Lighting: Overhead interior dome light.
- y. Windows: Minimum: Manual - Maximum: Power.

- z. Door Locks: Content Theft Alarm with Minimum: Manual key opening-Maximum: remote keyless entry. Provide 3 sets of keys.
- aa. Seats: Bucket Vinyl (black) (Color is substitutable) with F.M.V.S.S. approved seatbelts.
- bb. Power Outlets: Minimum – 3.
- cc. Radio: AM/FM with Clock.
- dd. Rear Video Camera with cab Monitor for backing up.

SPECIFICATION 2: DENTAL CLINIC CABIN:

- a. Cabin Construction Material: Manufactured from Aluminum, Plywood and Fiberglass or Equivalent.
- b. Cabin Dimensions: Minimum 27.5' x L 8' W x 6.5' H.
- c. Personnel/Patient Entrance Door: approximately 30". Door with upper and lower window with exterior manual key opening.
- d. Clinic Cabin Insulation: Full Insulation in Ceilings and Floors.
- e. Clinic Cabin Floor Covering – Hospital/Commercial Grade: non-skid medical grade vinyl or rubber material.
- f. Accordion blinds or equivalent ability to cover all windows.
- g. Grey water tanks as needed by design. Minimum of 2. Isolated tank(s) for vacuum waste as needed by design.
- h. Alarm System: Clinic Cabin must include an alarm system with motion glass breakage for cab and cabin, and mechanical alarm for doors.
- i. Counter space for daylight-loading x-ray film processor.
- j. One (1) Water Heater – Standard for Size and Operation of Vehicle by design.
- k. Dimensions of Refrigerator Stored above Vehicle Cab, if area is available, otherwise by design: Approximately 20" Deep X 18" W X 21" High.
- l. HVAC: Three zone Climate Control climate system that is sufficient for size of vehicle by design.
- m. Power Generation: Minimum of one (1) 20.0 KW commercial diesel generator that can supply sufficient operating power to the vehicle under normal operating conditions by design.
- n. Fresh Water Tank: Minimum 30 Gallon - Maximum 55 Gallon.
- o. An oil-free compressor with an automatic drying system that is equipped with sound cover, and can simultaneously serve 2 users, must be installed.

- p. One Tech West Dry Vacuum Pump (2 User Simultaneously) or Dry Vacuum Pump that is equivalent in quality and operational use.
- q. Appropriate central wiring for computer networking in all three rooms.
- r. DVD/VCR above Vehicle Cab, if area is available, otherwise by design wired to LCD monitors in each operatory and central room.
- s. Instrument processing and sterilization station preferably in central room or by design to include approximately 70" of counter space. Items to be included in this area are: sink, ultrasonic cleaner, and sufficient adjacent counter space for instrument processing with autoclave sterilizer to be located in close proximity. Storage Cabinetry in conjunction with sterilization area: approximately 70" L x 28" D x 36" H under counter cabinets and overhead cabinets.
- t. Midmark M-9 Ultraclave Automatic Sterilizer or a steam autoclave unit equivalent in quality and operational use.
- u. One Midmark Soniclean M150 Recessed In-Counter Ultrasonic Cleaner with Basket or ultrasonic cleaner that is equivalent in quality and operational use.

Central/Waiting Room:

- v. Central Room Dimensions: Approximately 7' L 8' W 7' H.
- w. Central Room Electrical Outlets, minimum – 3.
- x. Central Room Overhead Lights, minimum – 3.
- y. Waiting Room Desk with chair (strapped for mobile use); dimensions approximately 45" L X 24" W X 18" Deep.
- z. Waiting Room Bench with back: Accommodates up to 2 adults. Approximately 48" L X 20" Deep X 17"H.
- aa. Waiting Room Window with Screen: Approximately 20" W X 30" H.
- bb. Appropriate wiring for computer workstation and overhead monitor for patient education.
- cc. One overhead flat screen 17" television/monitor.

Rear Dental Operatory:

- dd. Rear Operatory Dimensions: Approximately 8' L 9' W 7' H.
- ee. Rear Operatory Overhead Lights, minimum – 4.
- ff. Rear Operatory Electrical Outlets, minimum – 5.

- gg. Rear Operatory Storage Area Dimensions (Overhead) – 1 anti-rattle cabinet, custom by design with positive latch, approximately 4' L 1' Deep 1' H.
- hh. 1 Sink: Approximately 44" L X 20" Deep X 36" Tall with Counter Top with 3 Drawers for Storage Below. Drawer Dimensions: 3, approximately 12" W x 18" Deep.
- ii. Rear Operatory Window with Screen: 20" W x 30" H.
- jj. One A-dec 500 dental chair (color to be determined) and A-dec 500 chair-mounted instrument delivery system, or similar system that is equivalent in quality and operational use, incorporating doctor's and assistant's instrumentation, including chair-mounted dental light with attached 17" flat screen monitor connected to DVD/VCR (see item 2r), attached amalgam separator housing with installed amalgam separator unit, and self-contained water delivery system. Doctor's instrumentation unit should include high-speed and low-speed handpiece lines, air-water syringe, piezoelectric scaler, and curing light. Assistant's instrumentation unit should include high-speed suction line, saliva ejector, and air-water syringe. System to be convertible for left and right-handed users.
- kk. Wired for computer workstation for installation at a later date.
- ll. One Belmont X-Ray Unit with 20" Arm or X-Ray Unit that is equivalent in quality/operational use.
- mm. Digital Panoramic System Wiring and Reserved Space for Separate Installation - Cat 6 wiring for panoramic system connectivity. Wiring must be compatible with most brands of portable digital panoramic systems that are or will be available on the market in the near future. The wiring must be compatible with the select model and make of the panoramic system and the vehicle space reserved for future installation of the panoramic system must be suitable for the system's dimensions. Wiring must be installed in a manner that it will not interfere with the daily clinical activities that will take place within the vehicle before the digital panoramic system is installed.
- nn. Rear Emergency Exit with window: 30" Door. May be designed to incorporate item 2oo, wheelchair access entrance door.
- oo. Wheelchair Access Entrance Door with window – American with Disabilities Act (ADA) approved standard wheelchair lift accessible door.
- pp. Wheelchair Lift Dimensions – Approximately 4' W 1' Deep 5' Tall.
- qq. Provisions for securing dentist and assistant chairs during transit will be required.

Front Dental Operator:

- rr. Front Operator Dimensions: Approximately 8' L 9' W 7' H.
- ss. Front Operator Overhead Lights, minimum – 4.
- tt. Front Operator Electrical Outlets, minimum – 6.
- uu. Front Operator Above Storage Area Dimensions – 1 anti-rattle cabinet, custom by design with positive latch. Approximately 4' L 1' Deep 1' H.
- vv. 1 Sink: Approximately 41" L x 20" Deep X 36" Tall with Counter Top with 3 Drawers for Storage Below. Drawer Dimensions: 3, approximately 12" W x 18" Deep Countertop with Dry Vac Below; Dimensions: Approximately 3' L x 2' Deep x 3' Tall.
- ww. Front Operator Window with Screen: 20" W X 30" H.
- xx. One A-dec 500 dental chair (color to be determined) and A-dec 500 chair-mounted instrument delivery system, or similar system that is equivalent in quality and operational use, incorporating doctor's and assistant's instrumentation, including chair-mounted dental light with attached 17" flat screen monitor connected to DVD/VCR (see item 2r), attached amalgam separator housing with installed amalgam separator unit, and self-contained water delivery system. Doctor's instrumentation unit should include high-speed and low-speed handpiece lines, air-water syringe, piezoelectric scaler, and curing light. Assistant's instrumentation unit should include high-speed suction line, saliva ejector, and air-water syringe. System to be convertible for left and right-handed users.
- yy. Wired for computer workstation for installation at a later date.
- zz. One Belmont X-Ray Unit with 20" Arm or X-Ray Unit that is equivalent in quality/operational use.
- aaa. Provisions for securing dentist and assistant chairs during transit will be required.

SPECIAL CRITERIA:

- a. Fluorescent overhead lights to be installed as needed.
- b. Vehicle will comply with all applicable Federal Safety Standards.
 - 1. Fire Extinguisher – 1.
 - 2. Smoke Detector – 2.
 - 3. Carbon Monoxide Detector – 1.

4. All wiring conforms to applicable safety standards and codes.
- c. Vehicle will conform to the requirements of the Delaware Motor Vehicle Code.
- d. Vehicle to be equipped with a land line power supply plug-in and a 25 foot electric line that is sufficient to operate the vehicle at a fixed location. Manual Transfer Switches must be included
- e. The company's business reputation and experience at similar projects constructing a comparable vehicle utilizing the equipment that is within the specifications will be considered. You must provide 3 references of customers who are currently operating a dental mobile vehicle constructed by your company.
- f. Bids must address each specification and special criterion from this document by item letter.
- g. **Delivery:**
 1. Vehicle will be delivered within 5 months of the bid award date to the Division of Public Health at a location to be determined in the City of Dover, Delaware 19901. Vendor will contact the Division of Public Health, Bureau of Oral Health and Dental Services, State Dental Director (Dr. Greg McClure) at 302-744-4554 seventy-two (72) hours in advance of delivery. Vehicle delivery will occur Monday through Friday between the hours of 8:30 a.m. and 3:30 p.m. In the event that the State Dental Director is not contactable, the following Point Of Contact will be notified of the date time of delivery: Isaac Daniels, Management Analyst II at 302-744-4723.
 2. Vehicle will be clean, lubricated and service ready for immediate use upon delivery.
 3. Vehicle will be protected to 20 degrees Fahrenheit below zero with permanent antifreeze upon delivery.
 4. Vehicle fuel tank will contain a minimum of 20 gallons of fuel upon delivery.
 5. Vehicle will include all operator manuals for the vehicle cab, cabin, appliances, and installed dental equipment upon delivery.
 6. Vehicle will include upon delivery the proper form(s) to apply for a Delaware Title and License including the original Manufacturers Statement of Origin, Mileage Disclosure Statement signed by the vendor and notarized. All title papers will be properly executed and the application for title will indicate State of Delaware, Division of Public Health 417 Federal Street, Dover, Delaware 19901.
 7. The vehicle will include upon delivery the original manufacturer's statement of origin, a mileage disclosure statement signed by the vendor and notarized, and a minimum thirty (30) day temporary tag.
- h. **Warranty:**
 1. **Vehicle cab and chassis:** The winning vendor will identify the state of Delaware as the original owner of the vehicle entitled to the manufacturer's warranty. The winning

vendor will provide the state of Delaware with the original standard manufacturer's warranty for the chassis, engine, transmission and components of the power train.

2. **Clinic Cabin:** Will be warranted for a minimum of thirty six (36) months. Warranty will cover all manufacturer defects in material and workmanship that occur under normal use. Normal use is defined as the daily operation of a mobile dental clinic in an urban and rural setting providing preventive and restorative dental services. Cabinetry installed in the unit will be warranted for a period of thirty six (36) months. Dental equipment and appliances will be a pass through warranty provided by the respective manufacturers. The winning vendor of the mobile dental clinic will provide the individual appliance manufacturer warranty cards upon delivery. The Program will be responsible for completing and forwarding the warranty cards to the respective manufacturers to activate warranties.
3. The winning vendor will provide the contacts for warranty information for the repair of the chassis and major components. The chassis manufacturer may provide roadside assistance for 1-3 years. The warranty will begin at the time of delivery.

i. **Training:**

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

j. **Manuals:**

One (1) operations and maintenance manual with instructions shall be supplied. The manuals listed shall be OEM publications supplemented with technical manuals for all components as published by sub-vendors. Manual on CD disc may be supplied in lieu of paper manuals.

k. **Diagram:**

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

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

TOTAL COST PAGE

(Must be all inclusive)

Bid #: 7258

Vendor Name: _____

Product(s) Cost \$ _____

Delivery Cost: \$ _____

Installation: \$ _____

Service agreement: \$ _____

Training: \$ _____

Warranty: \$ _____

Upgrades: \$ _____

Other: _____ \$ _____

Total Cost: \$ _____

All Bidders:

Please include 2 signed originals and 4 copies of your bid. This should include any pamphlets, or additional materials you want to be taken for consideration.

