

2024-04

POND CREEK AMBULANCE SERVICES

CONTRACT DOCUMENTS AND PLANS AND SPECIFICATION PACKET

CONTENT OF BID PACKET

- 1) Notice to Bidder (Including map of County Ambulance Districts)
- 2) Invitation to Bid (From Grant County)
- 3) Invitation to Bid/Request for Proposal (From City of Pond Creek)
- 4) Business Relationships Affidavit
- 5) Non-Collusion Bidding Certification
- 6) Affidavit for Contracts and Payments
- 7) W-9 form

NOTICE TO BIDDER
BID # 2024-04

BOARD OF COUNTY COMMISSIONER
GRANT COUNTY, OKLAHOMA

Bids will be received until **3:00 p.m., Friday, May 3, 2024**, at the Grant County Courthouse, County Clerk's Office, 112 E Guthrie Street, Room 102, Medford, Oklahoma, 73759 and will be opened at **9:30 a.m. Monday, May 6, 2024**, during the Regular Board of Commissioners' meeting.

Grant County Board of County Commissioners will be accepting bids on behalf of the Pond Creek Ambulance Services – City of Pond Creek to provide Ambulance Services Operations, Staffing, and Management for FY 24-25 as identified as District of Pond Creek on the attached Exhibit “A”

The Bidders must submit their bid on the official proposal forms which can be found in the packet titled: **CONTRACT DOCUMENTS AND PLANS AND SPECIFICATION**. The submitted bid envelope must be clearly marked **“SEALED BID #2024-04”**. All pertinent documents as found in the **CONTRACT DOCUMENTS AND PLANS AND SPECIFICATION packet** must be signed, and notarized (*if applicable*), and returned to the Grant County Clerk's Office as specified above or the bid will be rejected.

Any further questions regarding this bid request Cindy Pratt @ 580-395-2274 – Grant County Clerk, Grant County, Oklahoma. Bid packet can also be found at: www.grant.okcounties.org.

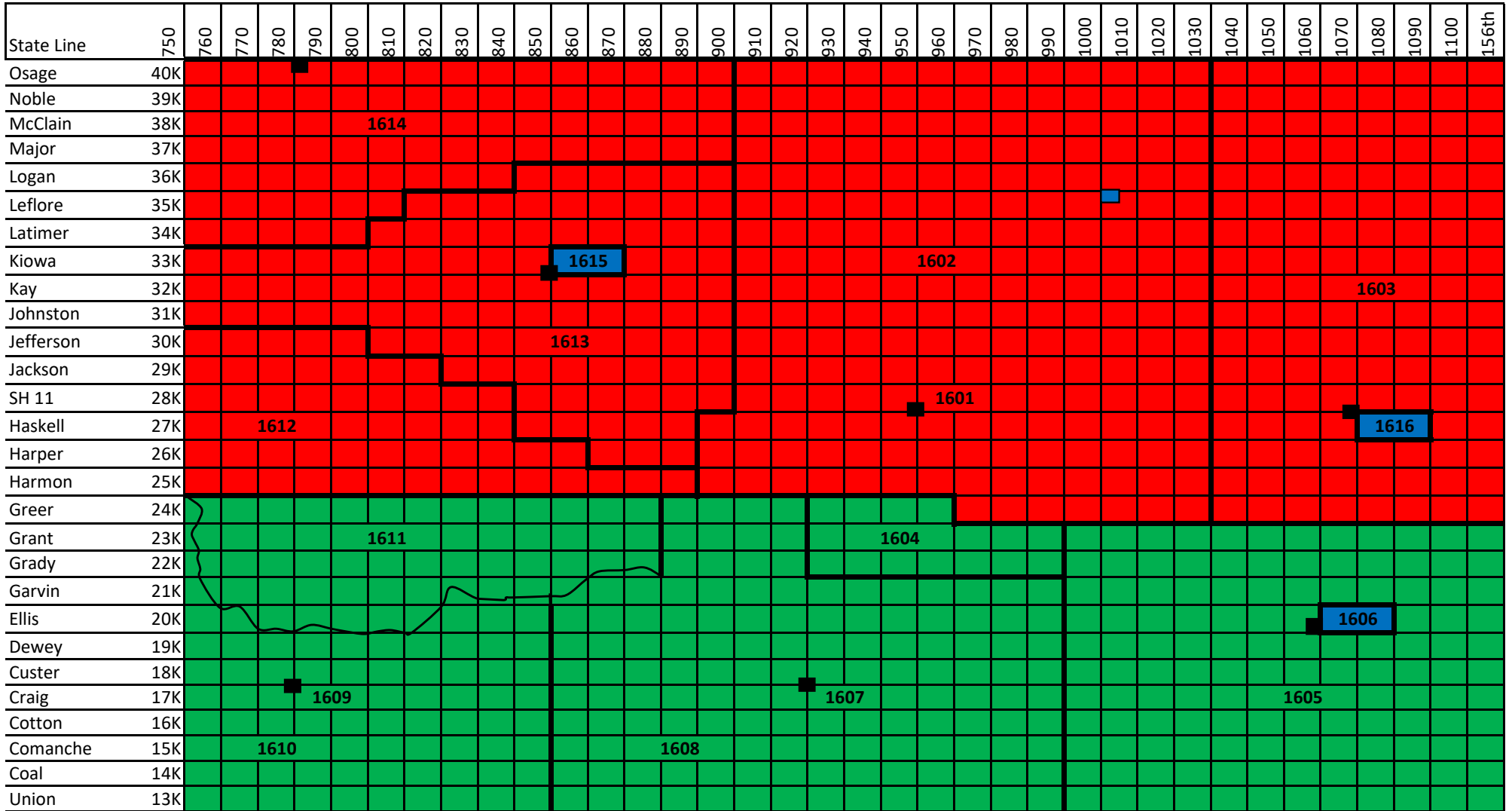
The Board of Commissioners reserve the right to reject any and/or all bids.

Approved this 8th day of April 2024

BOARD OF COUNTY COMMISSIONERS
GRANT COUNTY, OKLAHOMA

/s/ Craig A. Fredrick, Chairman /s/ Max L. Hess, Vice Chairman /s/ Steve Stinson, Member
/s/ Cindy Pratt, County Clerk

EXHIBIT "A"
Grant County, Oklahoma
EMS Response Areas



Medford	589
Miller	3
Pond Creek	416

Within the city limits of Wakita (1615), Deer Creek (1616), Lamont (1606) and Renfrow.

GRANT County, Oklahoma
 COUNTY PURCHASING OFFICE
 GRANT County Court House
 MEDFORD, Oklahoma
 Phone Number + 1 (580) 395-2274

Invitation to Bid

PLEASE REVIEW TERMS AND CONDITIONS ON REVERSE SIDE
 RELATING TO SUBMISSION OF THIS BID.
 Notarized Affidavit completions and signature required on reverse side.

Date Issued April 8, 2024
 Page 1 of 1

BID NUMBER
 I 2024-04

BID CLOSING DATE AND HOUR
Friday -05-03-24@ 3:00 p.m.

REQUIRED DELIVERY DATE

(Days after award of Purchase Order)
Date of Delivery

TERMS

Bid packets opening will be during the BOCC open meeting on Monday, May 6, 2024 @9:30 a.m.

ITEM	QUANTITY	UNIT OF ISSUE	DESCRIPTION	UNIT PRICE	TOTAL
			Grant County Board of County Commissioners will be accepting bids on behalf of the Pond Creek Ambulance Services - City of Pond Creek to provide Ambulance Services Operations, Staffing, and Management for FY 24-25 as identified as District of Pond Creek as attached to the Notice of Bidder Exhibit "A"		

TERMS and CONDITIONS

1. Sealed bids will be opened in the Commissioner's Conference Room, Grant
County Courthouse, Medford, Oklahoma, at the time and date shown on the invitation to bid form.
2. Late bids will not be considered. Bids must be received in sealed envelopes (one to an envelope) with bid number and closing date written on the outside of the envelope.
3. Unit prices will be guaranteed correct by the bidder.
4. Firm prices will be F.O.B. destination.
5. Purchases by Grant County, Oklahoma, are not subject to state or federal taxes.
6. This bid is submitted as a legal offer and any bid when accepted by the County constitutes a firm contract.
7. Oklahoma laws require each bidder submitting a bid to a county for goods or services to furnish a notarized sworn statement of non-collusion. A form is supplied below.
8. Bids will be firm until _____ (Date)

AFFIDAVIT: I, the undersigned, of lawful age, being first duly sworn on oath say the he (she) is the agent authorized by the bidder to submit the above bid. Affiant further states that the bidder has not been a party to any collusion among bidders in restraint of freedom of competition by agreement to bid at a fixed price or to refrain from bidding; or with any state official or employee as to quantity; quality or price in the prospective contract or any other terms of said prospective contract; or in any discussions between bidders and any state official concerning exchange of money or other thing of value for special consideration in the letting of a contract; that the bidder/contractor has not paid, given or donated or agreed to pay, give or donate to any officer or employee of the State of Oklahoma (or other entity) any money or other thing of value, either directly or indirectly in the procuring of the award of a contract pursuant to this bid.

Subscribed and sworn before this ____ day
of _____, 20 23 (SEAL)

Firm: _____

My commission expires _____

Signed by: _____
(Manual Signature of Undersigned)

NOTARY PUBLIC (CLERK OR JUDGE)

Address: _____ Phone: _____
Zip: _____

In accordance with 62 O.S. §310.9

NOTE: Other terms and conditions can be added at the discretion of the county officers.

Invitation to Bid/Request for Proposal for FY 24-25

Ambulance Service Operations, Staffing, and Management, contractor.

City of Pond Creek, Oklahoma

City of Pond Creek
105 S 2nd Street
Pond Creek, Oklahoma, 73766

Procurement Contact: Mr. Art Curl, City Manager

Phone: 580-532-4915

Email: cityofpondcrk@pldi.net

Background

The City of Pond Creek ambulance service provides prehospital ambulance response to approximately 417 +/- sq/miles of Southern Grant County, Oklahoma. The service has historically responded to approximately 150 calls annually with a combination of basic and advanced life support services. The typical transport distance to the closest hospital is approximately 30 miles. The service area encompasses the towns of Pond Creek, Nash, and Lamont. However, the municipal limits of the Towns of Nash and Lamont are excluded from this bid process due to existing arrangements with other providers.

Requirements

This project requires the successful bidder to perform as the operations, staffing, and management contractor for the Pond Creek Ambulance Service while maintaining the Pond Creek Ambulance Service's license with the Oklahoma State Department of Health Emergency Systems division. The successful bidder must provide all aspects of the operation of the City of Pond Creek ambulance service including staffing, management, training, fleet maintenance, medical direction, QA/QI, State of Oklahoma Regulatory compliance, subscription services, uniforms, medical supplies, and insurance coverage for all aspects of the operation including work comp, automobile, and general liability naming the City of Pond Creek as an additionally insured. Additionally, the successful bidder will be required to provide and fund maintenance and upkeep for all existing and future Pond Creek Ambulance Service vehicles and equipment.

In addition to the requirements above, the successful bidder must ensure the following:

- At least one ambulance staffed 24 hours a day, based inside of the city limits of Pond Creek. This unit's minimum staffing requirement is basic life support level with at least one crew member being an Oklahoma licensed EMT and the other being at least an Oklahoma licensed EMR. For the purpose of this RFP, this ambulance is referred to as the primary ambulance.
- The primary ambulance must meet a response time performance metric of no greater than 9 minutes, 59 seconds to calls inside the city limits of Pond Creek with 90% accuracy.
- A fully staffed back-up ambulance available to cover when primary ambulance is on a call, referred to as the secondary ambulance. The secondary ambulance must be available to back fill for no less than 90% of all primary ambulance responses. This ambulance must maintain a response time of no greater than 15 minutes, 59 seconds to the City Limits of Pond Creek, when deployed to cover when the primary ambulance is on a call, with a 90% accuracy. This

ambulance may be staffed at the basic life support level. This ambulance must be provided by the bidder, as part of this contract, under the full control and oversight of the bidder.

- Tertiary ambulance response. This may be provided through mutual aid with another ambulance service.
- At least one EMS supervisor of the paramedic level, based in Grant County, Oklahoma, capable of responding to calls in support of the Pond Creek ambulance crew. This supervisor shall, at the expense of the bidder, be provided with an emergency response vehicle and must respond to at least 50% of calls the Pond Creek Ambulance responds to.
- Emergency vehicle fleet maintenance available 24 hours a day to respond to vehicle problems with a fleet mechanic capable of contacting crew within 30 minutes of request.
- Medical direction services to the Pond Creek Fire and Police Departments as requested.
- A subscription service is available to all residents residing in the service area.
- Home football game stand by.
- Response to all structure fires and major grass fires in the Pond Creek Fire Department response area.
- Maintenance of the Pond Creek Ambulance license in an active and good standing status with Oklahoma State Department of Health Emergency Systems.
- Monthly reports submitted to the City of Pond Creek that accurately show the following:
 - Number of responses
 - Number of transports
 - Number of refusals
 - Number of cancellations
 - Mutual aid requests
 - Mutual aid responses
 - Staffing compliance
 - Paramedic supervisor responses
 - Average response time in city
 - Average response time outside of city
 - Any response time violations including specific response time for that violation
 - Plans to address violations

Questions

- All questions must be submitted via email to cityofpondcrk@pldi.net
- Questions must be submitted by May 3, 2024 no later than 3:00 PM Questions submitted after this deadline will not be answered.
- Questions will NOT be answered by phone. All inquiries regarding this RFP shall be submitted by email only.
- The Pond Creek city manager's office reserves the right to initiate email, phone, or in-person contact with any bidder for proposal clarification purposes at any time during this bid process.

Submission Requirement and Deadline

- Proposals will be accepted until April 7, 2023 at 3 PM. Proposals submitted after this deadline **will** not be viewed.
- Proposals shall be submitted in the following format:
 - One electronic copy sent via email to cityofpondcrk@pldi.net

- o Six paper copies submitted via certified mail to: Grant County Clerk, 112 E. Guthrie Room 102, Medford, Oklahoma 73759. These copies must be received by the deadline above. No exceptions will be made. Bidders may also hand deliver these copies in lieu of mailing them. If hand delivery is desired, please deliver to Grant County Clerk, 112 E. Guthrie, Medford, Oklahoma 73759. Bidders are hereby notified that communication with city officials regarding details of this request is strictly forbidden during hand delivery.

Award Notice

May 9, 2024

Contract Start Date

July 1, 2024 at 8 AM.

Initial Contract Term

One year commencing at 8 AM on July 1, 2024 and ending at 11:59 PM on June 30, 2025.

Project Funding

The City of Pond Creek anticipates paying the successful bidder for services delivered under this contract.

Notice to Bidder

- The City of Pond Creek reserves the right to accept or reject any or all bids and to waive any formal defects or irregularities in the bids, when deemed to be in the interest of the city.
- The City of Pond Creek may withhold monthly payments to awarded bidder for violations of contract.

Proposals

Proposals must contain the following information in this specific order:

Section 1- Corporate Information

- Corporate information including the name of the bidder, primary address, primary phone, primary email. This information will be utilized by the City of Pond Creek to contact bidder.
- Articles of Incorporation evidencing the bidder as a legal entity lawfully permitted to do business in any of the fifty USstates.
- The names and titles of all officers of the corporation. If single owner, provide the same for that person.

Section 2- Experience

- Provide evidence of experience operating or managing an ambulance service. Include locations and years of service to each location. Information regarding level of life support, call volume, and number of employees managed is optional.
- Attach a document of licensure evidencing experience as an ambulance service operator. This may be a license issued by the state licensing authority for the provision of ambulance service in the state the bidder does business. This may also be provided in the form of a letter of good standing or support provided by an entity for which the bidder manages an ambulance service for.

Section 3- Proposal Body

- This section requires the bidder to provide information of their plan and ability to meet the requirements of the request.

Section 4- Cost of Services

- Please provide the amount bidder will charge the City of Pond Creek & Grant County Clerk for performing these services.

BUSINESS RELATIONSHIPS AFFIDAVIT

Pond Creek Ambulance Service (PROJECT NAME)

STATE OF OKLAHOMA)
)SS
COUNTY OF _____)

_____, of lawful age, being duly sworn, on oath says that he or she is the agent authorized by the bidder to submit the attached bid. Affiant further states that the nature of any partnership, or other business relationship presently in effect, of which existed within one (1) year prior to the date of this statement with the architect, engineer, or other party to the project is as follows:

Affiant further states that any such business relationship presently in effect of which existed within one (1) year prior to the date of this statement between any officer or director of the bidding company and any officer or director of the architectural or engineering firm or other party to the project is as follows:

Affiant further states that the names of all persons having any such business relationships and the positions they hold with their respective companies or firms are as follows:

(If none of the business relationships herein above mentioned exist, affiant should so state.)

(Signature of Affiant)

Subscribed and sworn to before me this _____ day of _____, 20 ____

Notary Public _____

My Commission Expires _____

NON-COLLUSION BIDDING CERTIFICATION

Pond Creek Ambulance Service (PROJECT NAME)

STATE OF OKLAHOMA)
)SS
COUNTY _____)

A. For purposes of competitive bids, I certify:

1. I am the duly authorized agent of _____, the bidder submitting the competitive bid which is attached to this statement, for the purpose of certifying the facts pertaining to the existence of collusion among bidders and between bidders and state officials or employees, as well as facts pertaining to the giving or offering of things of value to government personnel in return for special consideration in the letting of any contract pursuant to the bid to which this statement is attached;
2. I am fully aware of the facts and circumstances surrounding the making of the bid to which this statement is attached and has been personally and directly involved in the proceedings leading to the submission of such bid; and
3. Neither the bidder nor anyone subject to the bidder's direction or control has been a party to the following:
 - a. Any collusion among bidders in restraint of freedom of competition by agreement to bid at a fixed price or to refrain from bidding;
 - b. Any collusion with any state official or employee as to quantity, quality or price in the prospective contract, or as to any other terms of such prospective contract; and
 - c. Any discussions between bidders and any state official concerning exchange of money or other thing of value for special consideration in the letting of a contract.

B. I certify, if awarded the contract, whether competitively bid or not, that neither the Contractors nor anyone subject to the Contractor's direction or control has paid, given, or donated or agreed to pay, give, or donate to any officer or employee of the State of Oklahoma any money or other thing of value, either directly or indirectly, in procuring the contract to which this statement is attached.

Certified this _____ day of _____, 20__.

(Signature)

(Print Name)

(Position in the Company)

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.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<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) ▶ _____ 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) ▶ _____	<input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	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.