New Procurement Law Change

**IMPORTANT** - Please be aware that all bids are governed under the State Finance Law Sections 139-j and 139-k (collectively, the "Procurement Requirements"). The Procurement Requirements govern permissible communications between potential respondents and NHCC with respect to this solicitation during the procurement process and establish sanctions for knowing and willful violations of the provisions of the Procurement Requirements, including disqualification from eligibility for an award of any contract pursuant to this solicitation. **All questions, comments, requests for clarification and other communications regarding this solicitation must be in writing and submitted to the individual identified as the "Buyer", or other contact if so stated within bid. Contact with any other person regarding this solicitation is prohibited by law.** All questions and requests for clarification will be responded to in writing and disseminated to all persons and organizations having expressed an interest in this solicitation. All potential Respondents are solely responsible for full compliance with the Procurement Requirements. See section within bid titled “Procurement Requirements” for complete explanation and requirements.

Thank you
Mr. Hank Leonhard
Technical Coordinator
Purchasing Department
Nassau University Medical Center
Nassau Health Care Corporation
TO PROSPECTIVE BIDDER:

- See Clause 42 for Mandatory Instructions – Failure to abide by these mandatory instructions may be grounds for disqualification.
- Sealed bids must be returned to the Nassau University Medical Center's PURCHASING DEPARTMENT, ROOM B272 BY 2:00 P.M. by the date indicated on the bid. Any bid received after 2:00 PM will not be accepted.
- Each response should be in the envelope provided with the bid, or if obtained electronically, in an envelope of your choice. The envelope MUST be sealed and include the BID NUMBER AND YOUR RETURN ADDRESS, clearly inscribed on the outside.
- If you are responding to a bid and replying via special delivery services, (Federal Express, Express Mail, etc.) the mailing MUST indicate "ATTENTION PURCHASING DEPARTMENT", MUST have the BID NUMBER clearly marked on the outside of the package and must arrive at PURCHASING DEPARTMENT, ROOM B272 BY 2:00 P.M. We urge you to mail early to allow yourself plenty of time.
- In addition to the many Bid Clauses in this Sealed Bid the Additional Bid Clauses that are indicated on page #4 (the boxes will be checked off) will also apply to this bid.
- Please pay particular attention to all pages and sign each page where requested.

Thank you
Mr. Hank Leonhard
Technical Coordinator
Purchasing Department
Nassau University Medical Center
Nassau Health Care Corporation
FORMAL SEALED BID PROPOSAL

NASSAU HEALTH CARE CORPORATION
NASSAU UNIVERSITY MEDICAL CENTER
2201 HEMPSTEAD TURNPIKE
EAST MEADOW, NEW YORK 11554

BID NUMBER
MC98-03040-4959

BID OPENING DATE
March 4, 2010
2:00 P.M.

BUYER
John McGovern

TELEPHONE
(516)
572 - 6036

REQUISITION NUMBER
202761, 131148

PREPARE YOUR BID ON THIS FORM USING BLACK INK OR TYPEWRITER

BID TITLE: WATER TREATMENT SERVICE (PART I & PART II)

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

THE UNDERSIGNED BIDDER AFFIRMS AND DECLARES THAT HE HAS CAREFULLY EXAMINED THE ADVERTISED INVITATION FOR BIDS, THE BID TERMS AND CONDITIONS, AND DETAILED SPECIFICATIONS, AND CERTIFIES THAT THIS BID IS SIGNED WITH FULL KNOWLEDGE AND ACCEPTANCE OF ALL THE PROVISIONS THEREOF AND OFFERS AND AGREES, IF THIS BID IS ACCEPTED WITHIN SIXTY DAYS FROM THE BID OPENING DATE, TO FURNISH ANY OR ALL THE ITEMS UPON WHICH PRICES ARE HEREINAFTER QUOTED IN THE QUANTITY AND AT THE PRICES BID.

CASH DISCOUNT OF ______ PERCENT WILL BE ALLOWED FOR PROMPT PAYMENT WITHIN 30 DAYS
CASH DISCOUNT OF ______ PERCENT WILL BE ALLOWED FOR PROMPT PAYMENT WITHIN 60 DAYS
CASH DISCOUNT OF ______ PERCENT WILL BE ALLOWED FOR PROMPT PAYMENT WITHIN 90 DAYS

IF NO DISCOUNT IS SHOWN PAYMENT TERMS WILL BE NET 90

DELIVERY TO BE MADE TO:
NASSAU UNIVERSITY MEDICAL CENTER
EAST MEADOW, NEW YORK 11554
Or if different, as specified on Purchase Order.

GUARANTEED DELIVERY DATE
DAYS
AFTER RECEIPT OF ORDER

EMPLOYERS FEDERAL TAX IDENTIFICATION NUMBER

This sealed bid shall be signed by an official authorized to bind the Firm. This sealed bid shall also provide the name, title, address, and telephone number of the individual(s) with authority to negotiate and contractually bind the company, and who also may be contacted during the period of contract.

NAME OF BIDDER

ADDRESS

CITY
STATE
ZIP CODE
TELEPHONE

SIGNATURE OF AUTHORIZED INDIVIDUAL

PRINT OR TYPE NAME OF SIGNER AND TITLE

IN EXECUTING THIS BID, THE BIDDER WARRANTS THAT THE PRICES SUBMITTED HEREIN ARE NOT HIGHER THAN THOSE OFFERED TO ANY GOVERNMENTAL OR COMMERCIAL CONSUMER FOR LIKE DELIVERIES. THE PRICES HEREIN SHOULD NOT INCLUDE ANY FEDERAL EXCISE TAXES OR SALES TAXES IMPOSED BY ANY STATE OR MUNICIPAL GOVERNMENT. SUCH TAXES, IF INCLUDED, MUST BE DEDUCTED BY THE BIDDER WHEN SUBMITTING BID. BIDDERS ARE REQUESTED TO ALSO READ THE TERMS AND CONDITIONS.
BID TERMS AND CONDITIONS

1. Bids on equipment must be standard new equipment, latest model, except as otherwise specifically stated in proposal or detailed specification. Where any party of nominal equal quality or equipment is described, it shall be understood that all equipment and appurtenances which are usually provided in the manufacturer's stock model shall be furnished.

2. Bids on materials and supplies must be for new items except as otherwise specifically stated in bid or detailed specification.

3. Bidder declares that the bid is made without any connection with any other Bidder, submitting a bid for the same item, and is in all respects fair and without collusion or fraud.

4. PRICES. The provisions of the New York State Fair Trade Law (Fed-Crawford Act) and the federal price discrimination law (Robinson-Patman Act) do not apply to purchases made by the Nassau Health Care Corporation.

5. SURETY. In the event that an award is made hereunder, The Director of Purchase, Nassau University Medical Center, hereinafter known as the Director of Purchase) reserves the right to request successful bidder to post, within one week, security for faithful performance with the understanding that the whole or any part thereof may be used by the Nassau Health Care Corporation to supply any deficiency that may arise from any defaults on the part of the Bidder. Such security must meet all the requirements of the County Attorney and be approved by the Nassau Health Care Corporation Attorney.

6. SAMPLES. Samples, when required, must be submitted strictly in accordance with instructions, otherwise bid may not be considered. If samples are requested subsequent to bid opening they shall be delivered within five (5) days of the request for bid to have consideration. Samples must be furnished free of charge and must be accompanied by descriptive memorandum invoices indicating if the Bidder desires their return; also specifying the address to which they are to be returned, provided they have not been used or made useless by tests. Award samples may be held for comparison with deliveries.

7. AWARD. The Director of Purchase reserves the right before making award to make investigations as to whether or not the items, qualifications or facilities offered by the Bidder meet the requirements set forth herein and are ample and sufficient to insure the proper performance in the event of award. The Bidder must be prepared, if requested by the Director of Purchase, to present evidence of experience, ability and financial standing, as well as a statement as to plant, machinery and capacity of the manufacturer for the production and distribution of the material on which he is bidding. Upon request of the Director of Purchase, successful bidder shall file certification from the manufacturer relative to authorization, delivery, service and guarantees. If it is found that the conditions of the bids are not complied with or that articles or equipment proposed to be furnished do not meet the requirements called for, or that the qualifications, financial standing or facilities are not satisfactory, the Director of Purchase may reject such bids. It is distinctly understood, however, that nothing in the foregoing shall mean or imply that it is obligatory upon the Director of Purchase to make any examinations before award; and it is further understood that, if such examination is made, it is in no way relieves the Bidder from fulfilling all requirements and conditions of the bid.

8. Assureds. The Director of Purchase reserves the right to reject any and all bids in whole or in part and to waive technical defects, irregularities and omissions if it is judged by the best interests of the Nassau Health Care Corporation will be served.

9. Unless otherwise indicated herein, the Director of Purchase reserves the right to make award by items, by classes, by groups of items or as a whole.

10. DELIVERIES. Upon failure of the Vendor to deliver within the time specified, or within reasonable time as interpreted by the Director of Purchase, or failure to make replacement of rejected articles, when so requested immediately or as directed by the Director of Purchase. The Director of Purchase reserves the right to choose from other sources to take the place of the item rejected or not delivered. The Director of Purchase reserves the right to authorize immediate purchase from other sources against rejections on any order when necessary. On all such purchases the Vendor agrees to promptly reimburse the Nassau Health Care Corporation for expenses incurred by such purchases. Should the cost be less, the Vendor shall have no claim to the difference. Such purchases will be deducted from order quantity.

11. An order may be cancelled at the Vendor's expense upon nonperformance. Failure of the Vendor to furnish additional supplies within ten (10) days from date of request shall be sufficient cause for the cancellation of the order.

12. When in the determination of the Director of Purchase, the articles or equipment delivered fail to meet Nassau Health Care Corporation specifications or, if in the determination of the Director of Purchase, the Vendor consistently fails to deliver as ordered, the Director of Purchase, reserves the right to cancel the order and purchase the balance from other sources at the Vendor's expense.

13. Delivery must be made as ordered and in accordance with the bid. If delivery instructions do not appear on order, it will be interpreted to mean prompt delivery. The decision of the Director of Purchase, as to reasonable compliance with delivery terms shall be final. Failure of delay in receipt of order shall result in delay with the Vendor.

14. The Nassau University Medical Center will not schedule any deliveries for Saturdays.
NOTICE

RIGHT TO KNOW LAW AND "OSHA"

ALL BIDDERS MUST COMPLY WITH THIS REQUIREMENT OR YOUR BID WILL BE AUTOMATICALLY REJECTED.

"PURSUANT TO ARTICLE 28, SECTION 876 OF THE LABOR LAW OF THE STATE OF NEW YORK, THE NASSAU HEALTH CARE CORPORATION HAS MANDATED EMPLOYER'S RESPONSIBILITY TO PROVIDE NOTICE TO EMPLOYEES REGARDING TOXIC SUBSTANCES. TO SATISFY THIS MANDATED REQUIREMENT, WE MUST ASK FOR YOUR COOPERATION. SOME OF THE MATERIAL ON THIS BID MAY CONTAIN TOXIC SUBSTANCES. THEREFORE, YOU MUST SUBMIT, WITH YOUR BID, "MATERIAL SAFETY DATA SHEETS" FOR ALL MATERIALS TO BE SUPPLIED PURSUANT TO THIS BID.

FAILURE TO PROVIDE THIS INFORMATION WITH THE BID WILL RESULT IN AUTOMATIC REJECTION OF THE BID.

IF YOUR PRODUCT DOES NOT CONTAIN TOXIC SUBSTANCES, PLEASE SIGN THE FOLLOWING CERTIFICATION:

CERTIFICATION:

I HEREBY CERTIFY THAT I HAVE READ THE NASSAU HEALTH CARE CORPORATION'S NOTICE, AND FURTHER CERTIFY THAT ITEMS NUMBERED ____________ DO NOT CONTAIN ANY TOXIC SUBSTANCES.

Signature __________________________________________

Title ________________________________________________

Date ________________________________________________
THE UNCHECKED CLAUSES LISTED BELOW DO NOT APPLY TO THIS BID

☐ 1 - PURPOSE - P/O
☒ 2 - SCOPE - B/O
☒ 3 - PERIOD COVERED - B/O
☒ 4 - DELIVERY
☒ 5 - BILLING
☐ 6A - PARTIAL PAYMENTS ALLOWED
☐ 6 - APPROXIMATE QUANTITIES
☒ 7 - ADDITIONAL BIDS
☐ 8 - FIRM PRICES - B/O
☐ 8A - PRICE CHANGES, GOVERNMENT CONTRACTS
☐ 9 - PRICES LISTS / CATALOGS
☐ 10 - SAMPLES
☐ 11 - SPECIFICATION
☐ 12 - EQUIVALENT BIDS
☒ 13 - PRODUCT IDENTIFICATION
☒ 14 - CLAIM AGAINST "EQUAL OR BETTER"
☒ 15 - ALTERNATE BIDS
☒ 16 - DELIVERY DATE
☒ 17 - SHIPPING CHARGES
☐ 18 - BID SECURITY
☐ 19 - SURETY
☒ 20 - WARRANTY
☒ 21 - REPLACEMENT PARTS
☒ 22 - NON-ASSIGNMENT
☒ 23 - AWARD
☒ 24 - REDUCTION IN PRICES
☒ 25 - PRICE PROTECTION
☐ 26 - EXPIRATION DATING
☐ 27 - DETAILED SPECIFICATIONS
☒ 28 - NEW YORK STATE PRICES
☐ 29 - INSTALLATION
☒ 30 - INSURANCE / WORKER'S COMPENSATION
☐ 30A - UMBRELLA LIABILITY INSURANCE POLICY
☐ 30B - PRODUCT LIABILITY INSURANCE
☐ 30C - COMPLETED OPERATIONS INSURANCE
☐ 30D - PROFESSIONAL LIABILITY INSURANCE
☒ 30E - GENERAL LIABILITY / HOLD HARMLESS
☐ 31 - MANUALS / IN-SERVICE VIDEO
☐ 32 - GENERAL SERVICE/REPAIR CONDITIONS
☒ 33 - ACCESS CLAUSE
☒ 34 - INVOICING FOR PAYMENT
☐ 34A - TIME AND MATERIAL PAYMENT IN DETAIL
☐ 35 - ADDITIONAL ITEMS - B/O
☐ 36 - DEFAULT
☒ 37 - CONFIDENTIALITY
☐ 38 - TERMINATION PREROGATIVE - B/O
☐ 39 - LABOR LAW (SEE ATTACHMENT TO BID)
☐ 40 - TRADE - INS (clause #30 must be checked if this clause is checked and inspection is required)
☐ 41 - TITLE TO EQUIPMENT
☒ 42 - GENERAL INSTRUCTIONS
☐ 43 - QUALIFICATION STATEMENT
☐ 44 - PRE BID SITE VISIT(S)
☐ 45 - BIDDERS WALK THROUGH
☐ 46 - NAMES ONLY AT BID OPENING
☒ 47 - CONTRACTORS SPECIFIC CONDITIONS
☐ 48 - STATEMENT OF CONFIDENTIALLY
☒ 49 - NON-COLLUSIVE BID CERTIFICATION FORM
☒ 50 - PROCUREMENT LAW REQUIREMENTS FORM
☐ 51 - GUIDELINES-PREVENTION OF INFECTION FORM
☒ 52 - CONTRACTOR CERTIFICATION FORM
☒ 53 - VENDOR INFORMATION FORM
☒ 54 - REQUEST FOR TAXPAYER ID FORM
☒ 55 - RIGHT TO KNOW AND OSHA FORM

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ___________________________________________ TITLE _____________________________

REV 3.7.07 Printed 02/03/2010,
DEFINITIONS:
- The term “County” as used herein, shall be deemed as reference to the County of Nassau, State of New York.
- The term “NUMC” as used herein, shall be deemed as reference to the Nassau University Medical Center.
- The term “AHPECF” as used herein, shall be deemed as reference to the A. Holly Patterson Extended Care Facility.
- The term “NHCC” as used herein, shall be deemed as reference to the Nassau Health Care Corporation.
- The term “Contractor” as used herein, shall be deemed as reference to the bidder, vendor, proprietor, partnership or corporation bidding in the hopes of receiving an award to perform any or all of the services specified herein in accordance with the terms of this agreement, and refers to any other party other than the NHCC.
- The term “agency” as used herein, shall be deemed as the department, division, bureau, office, agency, or other NHCC establishment authorized to received the service specified herein.
- The term “Director” as used herein, shall be deemed as reference to the Technical Coordinator of Purchase, NHCC.
- The term “Blanket Order” as used herein, shall be deemed as the multiple use Pricing Agreement as a result of this bid.
- The term “Purchase Order” as used herein, shall be deemed as the single use Pricing Agreement as a result of this bid.
- The term COMPLETE as written in this bid must include all equipment, delivery and installation of same in its entirety, as listed in the contract documents, and is to include all supervision, labor, materials, plant equipment, transportation, testing (if required) incidentals, and other facilities as necessary and/or required to execute all the work as herein specified, or as incidentally required to provide a complete operating installation.

1. PURPOSE: The purpose of this bid is to establish a price structure on which items and/or services listed herein will be purchased at once.

2. SCOPE: The purpose of this bid is to establish a price basis upon which Blanket Orders may be issued for the procurement and/or service(s) by the NHCC, of the merchandise and/or service(s) specified herein. It is the intent of the NHCC to properly describe by the specifications, terms and conditions an adequate method of providing

WATER TREATMENT SERVICE

Award, if any, will be made to the lowest responsible bidder, who, in the opinion of the NHCC, meets the specifications and qualifications stated herein. The award will be in the form of a Blanket Order which, when issued and executed by the NHCC, will enable the successful bidder to perform the services specified herein for the period indicated and at the prices bid, upon the receipt of a signed Delivery Order.

3. PERIOD COVERED: Shall be for 5 years from the date of issuance. The NHCC reserves the right to extend the Blanket Order up to an additional two (2) months beyond the stated termination date.

The maximum period of any Blanket Order as a result of this bid with renewal options applied shall be the number of years as listed above, and if the further extension is applied; the number of years listed above and (2) months.

ALL EXTENSIONS ARE SUBJECT UPON THE MUTUAL CONSENT OF BOTH PARTIES

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
The director reserves the right to cancel any Blanket Order at any time giving not less than 30 days notice that, on or after a date therein specified, the Blanket Order contract shall be deemed terminated and cancelled.

4. **DELIVERY:** Shall be made **ONLY** upon receipt of a Purchase Order, or in the case of a Blanket Order, upon receipt of a Delivery Order(s) from a using agency authorized to use the Blanket Order. Purchase Order(s) / Delivery Order(s) shall indicate the destination address. Inside delivery is required on all deliveries.

5. **BILLING:** Shall be made to the using agency upon deliveries made against applicable Purchase Order(s), Delivery Order(s).

5A. **PARTIAL PAYMENTS:** Partial payments will be allowed on each delivered and accepted shipment. It is at the discretion of the Nassau Health Care Corporation as to whether it is in the best interest of the Corporation to do so. The decision of the Director of Purchase or his designee will be final in this determination.

6. **APPROXIMATE QUANTITIES:** The estimated usage quantities or estimated annual dollar value, when indicated are merely estimates based on experience or anticipated usage and are given for information purposes only. The NHCC will **NOT** be compelled to order any amount of any respective item. Contracts, however, shall be for the quantities actually ordered by the using agency during the period specified.

7. **ADDITIONAL BIDS:** The NHCC Purchasing Department reserves the right to call for new bids, whenever in the opinion of the Director, it is in the best interests of the NHCC to do so.

8. **FIRM PRICES:** Prices shall remain firm. No upward escalation or changes will be allowed. No changes, modifications, or alterations to this contract shall be deemed effective nor shall the same be binding upon the Nassau Healthcare Corporation unless in writing and signed by the Director of Purchase, or his duly authorized representative.

*In any event, when prices to the trade are decreased, the prices of applicable items in the Blanket Order shall be decreased accordingly. It shall be incumbent on the Contractor to notify the Director immediately after it becomes effective.*

8A. **PRICE CHANGES, GOVERNMENT CONTRACTS:** Prices shall remain firm for the first year of any Blanket Order issued as a piggyback to a government or group purchasing organization contract. Thereafter, price changes to reflect those in effect for the underlining contract may be requested by the Contractor. The request for price changes should be accompanied by copies of published announcements. However, the decision to grant the request will rest solely with the Director.

9. **PRICE LIST AND CATALOG SERVICE:** The successful bidder shall furnish, upon request, price lists and catalogs to agencies authorized to use the Blanket Order which may be awarded under this bid. Photocopies will be accepted in lieu of originals. Two (2) copies of the current price list/catalog must be sent to the NHCC Purchasing Department. Failure to keep the NHCC Purchasing Department advised of price list/catalog changes may delay the processing of payments.

10. **SAMPLES:** Samples, when required, must be submitted strictly in accordance with instructions otherwise the bid may not be considered. If samples are requested subsequent to bid opening, they shall be delivered within five (5) business days of the request for the bid to be considered. Samples must be furnished free of charge and must be accompanied by descriptive memorandum invoices indicating if the bidder desires their return, also specifying the address to which they are to be returned, provided they have not been used or made useless by testing. Award samples may be held for comparison with deliveries. Samples will be returned at

---

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ____________________________________________ TITLE ______________________________

REV 3.7.07 Printed 02/03/2010, 2:27 PM
bidders’ request and expense. For additional requirements involving samples, please see section titled “Samples” after Non Collusion Bidding Certification.

11. **SPECIFICATION:** Submit complete specifications and illustrations of products offered with the bid. Acceptance of a bid and designation of a manufacturer’s catalog description, brand name or number in any Purchase or Blanket Order resulting therefrom shall not be construed as qualification of the specifications of this bid or relief therefrom, except as specifically stated in the Purchase or Blanket Order.

12. **EQUIVALENT BIDS:** Bidders may offer equipment of the same capability, but of different manufacture and/or model than that specified in this bid. The use of the manufacturer, brand name, make or catalog designation in specifying items described herein does not restrict bidders from offering equivalent bids. Such a designation is used to indicate the character, quality and performance of equivalence desired. However, acceptance of an equivalent product will be strictly at the discretion of the Director. Furthermore, proof and/or demonstration of equivalence, compatibility and performance shall be incumbent upon the bidder.

13. **PRODUCT IDENTIFICATION:** If a product is identified by a BRAND NAME, a substitute of equal quality, construction, finish, composition, size, workmanship and performance characteristics may be acceptable. In submitting a bid, each bidder warrants that the substitute product being offered is an equal. Bid sheets shall be so noted of the manufacturer’s name and brand of the product offered as an equal. If as a result of an award, a delivery is made of a brand or product represented as an equal which is subsequently deemed to be unacceptable, the Contractor shall be required, at his expense, to pick up the rejected item and replace it with brand(s) listed in this bid, or an acceptable equal which will have the approval of the Director.

14. **PROTECTION FROM CLAIM AGAINST “EQUAL OR BETTER”:** In the event of any claim by any unsuccessful bidder concerning or relating to the issue of “equal or better”, the successful bidder agrees at his own cost and expense, to defend such claim or claims and agrees to hold the NHCC free and harmless from any and all claims for loss or damage arising out of this transaction for any reason whatsoever.

15. **ALTERNATE BIDS:** If the bidder wishes to offer an alternate to the specified item(s) they may do so, provided that they clearly indicate that the item(s) offered is an alternate and does not represent the alternate to be an equivalent and further provided they accompany the alternate offer with a full explanation and specification. Consideration of the alternate shall be at the sole discretion of the Director.

16. **DELIVERY:** Bidders are required to state guaranteed delivery date in terms of days after receipt of order in the space provided below and on page one. Bidders are cautioned to post realistic delivery dates. Guaranteed delivery dates will be strictly enforced. See also Specifications Section for additional requirements, if any.

**STATE GUARANTEED DELIVERY DATE:** ___________ DAYS A/R/O

---

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE   TITLE

REV 3.7.07 Printed 02/03/2010, 2:27 PM
17. **SHIPPING CHARGES:** All bids must be F.O.B. Destination and include delivery within doors unless otherwise specified. The NUMC and its Divisions acknowledges that if an emergency shipment (overnight, Saturday delivery etc.) is required and requested by the using department, such shipping charges would be paid by the using department on a "Prepay Shipping Charges and Add to Invoice" basis.

18. **BID SECURITY:** Each bidder shall submit with their bid offer at the date and time scheduled for the bid opening, a **CERTIFIED CHECK OR BID SECURITY**, payable to the NASSAU HEALTH CARE CORP., for: . Upon receipt of the signed acknowledgment copy of any Purchase or Blanket Order by the Department of Purchase issued hereunder, bid security will be returned. The bid security of unsuccessful bidders will be returned after an award is made.

19. **SURETY:** In the event an award is made hereunder, the successful bidder hereby agrees to obtain and file with the NHCC, security in the amount of to be entrusted to the NHCC as reflected in the award. Such security shall guarantee the faithful performance of the contract, if required by the Director or his designee, with the understanding that the whole or any part thereof may be used by the NHCC to supply any deficiency that may arise as a result of default of the Contractor.

20. **WARRANTY:** The successful bidder warrants the equipment furnished and all associated equipment against any defects in design, workmanship and materials against failure to operate satisfactorily for one (1) year from the date of acceptance by the using department and/or agency of the equipment, other than defects or failure shown by the Contractor that have arisen solely from accident or abuse occurring after delivery to the NHCC agency. Contractor agrees to replace any parts, which in the opinion of the user, shall fail from the above reasons.

**IMPORTANT NOTES:** If a company policy or trade practice requires a different warranty period, the bidder may so state without fear of disqualification. However, the bidder is cautioned that the length of warranty may, in some cases, be a deciding factor in making an award.

Equipment furnished hereunder shall meet the standards set forth in the Occupational Safety and Health Act of 1970.

21. **REPLACEMENT PARTS:** The requirements specified herein represent, for the most part, replacement and/or repair components to existing and presently owned equipment, and must match and intermingle without modification with the equipment and systems indicated.

22. **NON-ASSIGNMENT:** In accordance with Section 138 of the State Finance Law, the contract may not be assigned by the Contractor or its right, title or interest therein assigned, transferred, conveyed, sublet or otherwise disposed of without the previous consent, in writing, of the NHCC and any attempts to assign the contract without the NHCC’s written consent are null and void.

23. **AWARD:** The Director reserves the right to make an award on an individual line item basis, by groups of items or as a whole, or NOT AT ALL, whichever the Director deems to be in the best interest of the NHCC.

**IMPORTANT NOTE:** Any Blanket Order initiated from this bid shall be non-exclusive and the NHCC SHALL NOT BE BOUND TO PURCHASE, and no items are to be delivered without a Delivery Order. The NHCC shall be under NO OBLIGATION to issue such Delivery Order(s). Furthermore, any Blanket Order initiated from this bid shall be available for use by any authorized NHCC Division.

---

**ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED**

**BIDDER SIGN HERE** ____________________________ **TITLE** ______________________

REV 3.7.07 Printed 02/03/2010, 2:27 PM
24. **REDUCTION IN PRICES:** If an award is made, the Contractor agrees, should prices be reduced to the general trade during the requirement period, the NHCC shall receive the benefit of such reduction immediately upon effect. It shall be incumbent upon the Contractor to notify the NHCC of such price reductions.

25. **PRICE PROTECTION:** Bidders are required to state period of price protection (in terms of days) in addition to the sixty (60) days required (as stated on page one) after bid opening.

**STATE PRICE PROTECTION PERIOD:** _______ DAYS AFTER BID OPENING

26. **EXPIRATION DATING:** All products shipped must have a minimum of a six (6) month expiration date from the date of delivery to the using agency. For products that have less than a six (6) month expiration date from time of manufacture, the longest possible expiration date must be supplied to the using agency.

27. **DETAILED SPECIFICATIONS:** Proposals submitted hereunder shall be in accordance with detailed specifications set forth in this bid, the contract documents, or, as an attachment and made part hereof. The contract documents are complementary, and what is called for by any one shall be binding as if called for by all.

Any and all work shown on drawings, which is not referred to in the specifications, and any and all work covered in the specifications which is not shown on the drawings, shall be included by the Contractors as part of their contracts, the same as work that is both shown on the drawings and covered in the specifications.

The intent of the documents is to include all labor and materials, equipment, and transportation necessary for the proper execution of the complete finished work.

No oral statement of any person shall be allowed in any manner or degree to modify or otherwise affect the terms of the contract.

Contract Documents shall include the Notice to Bidders, Instructions to Bidders, Sealed Bid Terms and Conditions, Technical Specification, Specifications, Special Conditions, New York State Wage Scales, Architect and engineering Specifications, Bid Bond, Agreements, Drawings, including all modifications thereof properly incorporated therein by reference or otherwise. These constitute the Contract Documents and are collectively referred to as the Contract.

The term “Drawings” wherever referred to the Contract Documents shall include, in addition to those listed in the documents, such additional scale and full sized detail drawings as will be furnished by or through the architects, to amplify the drawings listed.

Should any question or disagreement arise concerning the meaning of drawings or specifications, such questions or disagreement shall be settled by the Director, whose decision, in writing, shall be final.

If there are any terms, clauses, specifications, and/or conditions in any of the attached documents or those submitted by bidders, that are in conflict with those found in this Formal Sealed Bid Proposal, then it will be the terms and conditions of this Formal Sealed Bid that shall apply.

**IMPORTANT NOTE:** Such specifications are representative of the type of items(s) required. The Director reserves the right to accept item(s) with different specifications or methodologies if in his opinion, the item(s) offered can satisfy the needs of the using department(s). Furthermore, any alternate item(s) offered can be rejected if they fail to meet the specifications of the item(s) specified in this bid.

---

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE  _______________________________ TITLE  

REV 3.7.07  Printed 02/03/2010, 2:27 PM
28. **NEW YORK STATE PRICES:** Bidders must represent and warrant that if they are under contract with New York State for items specified herein, that the price per unit quoted to the NHCC therefore is not higher than the price per unit quoted to New York State for like quantities.

29. **INSTALLATION:** Bid pricing shall include installation of item(s) ordered which includes uncrating, setting in place in existing facilities as provided by the using agency and made ready for use. Installation shall be under warranty for a period of ninety (90) days for parts, labor, travel, and incidental costs, exclusive of equipment guarantee specified elsewhere herein.

30. **INSURANCE AND WORKERS COMPENSATION:** The successful bidder agrees to obtain from an insurance company, authorized to do business in the State of New York, and keep in force during the term of an agreement, a policy of Comprehensive and General Liability Insurance naming Contractor as an insured, and naming NHCC as an additional insured, including but not limited to the torts and negligence of Contractor’s personnel, with a combined minimum single limit of one million dollars ($1,000,000.00) for bodily injury and property damage for any one occurrence at the Contractor’s sole cost and expense.

30A. **UMBRELLA LIABILITY INSURANCE POLICY:** In addition, it shall be the awarded vendor’s responsibility to secure, at his own cost and expense, Umbrella Insurance Policy for Comprehensive and General Liability Insurance naming Contractor as an insured, and naming NHCC as an additional insured, including but not limited to the torts and negligence of Contractor’s personnel, with a combined minimum single limit of one million dollars ($1,000,000.00) for bodily injury and property damage for any one occurrence.

The Contractor shall comply with all provisions of the Workers’ Compensation Law and shall furnish a certificate showing evidence of current coverage.

30B. **PRODUCT LIABILITY INSURANCE:** The successful bidder agrees to obtain from an insurance company authorized to do business in the State of New York, and keep in force during the term of an agreement, a policy of Product Liability Insurance, including foreign objects, with combined minimum single limit of one million dollars ($1,000,000.00) for each occurrence, at the Contractor’s sole cost and expense, and shall furnish a certificate showing evidence of current coverage.

30C. **COMPLETED OPERATIONS INSURANCE:** The successful bidder agrees to obtain from an insurance company, authorized to do business in the State of New York, and keep in force for the term of the contract PLUS an additional three (3) years after the expiration of the contract.

30D. **PROFESSIONAL LIABILITY INSURANCE:** The successful bidder agrees to obtain from an insurance company, authorized to do business in the State of New York, and keep in force during the term of an agreement, a policy for Professional Liability Insurance with a combined minimum single limit of one million dollars ($1,000,000.00) for each occurrence, and one million dollars ($1,000,000.00) for personal injury for each occurrence.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ________________________________ TITLE ________________________________

REV 3.7.07 Printed 02/03/2010, 2:27 PM
30E. **COMPREHENSIVE AND GENERAL LIABILITY AND HOLD HARMLESS:**  Contractor agrees to indemnify and hold harmless NHCC, its agents, officers and employees against any and all claims, causes of action, costs, and liabilities, in law or in equity, of every kind and nature whatsoever, directly or proximately resulting from any act of omission or commission of Contractor, its officers, agents, or employees. Contractor shall, at NHCC demand, defend at its own risk and expense any and all suits, actions or legal proceeding which may be brought or instituted against NHCC, its agents, officers, or employees on any such claim, demand or cause of action, and Contractor shall pay and satisfy any judgment or decree which may be rendered against NHCC, its agents, officers, or employees in any such suit, action, or legal proceeding.

The Contractor shall obtain from an insurance company authorized to do business in the State of New York, and keep in force during the term of any agreement, a policy of Comprehensive and General Liability Insurance naming the Contractor as an insured, and naming NHCC as an additional insured, including, but not limited to, the torts and negligence of Contractor’s personnel, with a combined single minimum limit of one million dollars ($1,000,000.00) for bodily injury and property damage for any one occurrence at the Contractor’s sole cost and expense.

The Contractor shall comply with all provisions of the Workers’ Compensation Law and shall furnish a certificate showing evidence of current coverage.

**Bidder shall list below the Insurance Company(s) holding the following documents:**

A) Certificate of Insurance naming the NHCC as co-insured:

or

B) Certificate of Insurance with indemnification agreement (hold harmless clause):

---

**ALL INSURANCE COVERAGE AS STIPULATED HEREIN** (paragraphs 30, 30A, 30B, 30C and/or any other insurance clause attached to and made part hereof) shall be subject to the approval of NHCC.

Failure to comply with the above requirement(s) shall be deemed by the NHCC to be a substantial violation of the terms and shall constitute cause for the cancellation of an agreement.

All insurance coverage, as stipulated herein, should be sent to the Purchasing Department, NHCC.

31. **MANUALS / IN-SERVICE VIDEO:** Bid prices shall include two (2) each OPERATING MANUALS and two (2) each SERVICE MANUALS for EACH model number ordered. Service manuals should include specifications, circuit description, maintenance procedures, parts list and schematics. Also, bid price shall include, if available, an IN-SERVICE VIDEO for EACH model number ordered.

32. **GENERAL SERVICE/ REPAIR CONDITIONS:**

- All repairs to be made in accordance with “OSHA” safety requirements.
- Contractor will furnish all labor, materials, transportation, tools, instrumentation, parts and accessories necessary to repair and restore the equipment to optimum operating condition.
- All Contractor personnel assigned to any requirement of a contract established must be fully qualified and cognizant of the required and applicable electrical codes and safety requirements, and must adhere to them.
- All parts supplied must match and inter-member without modification to the designated equipment, and must be in accordance with the specifications of the manufacturer of the part to be replaced.
- Except as otherwise specified, all contract requirements will be performed at the site as required.
- Any requirement to remove any part of the equipment of system(s), to Contractor’s shop, must be approved by an authorized agency representative. NHCC shall supply all utilities which are available on location insofar as compatibility requirements permit.
- All requirements performed by the Contractor will be subject to inspection and approval by an authorized designated representative of the NHCC.
- Employees of the Contractor while on service call shall carry identification badge or cards and shall be instructed to submit same to scrutiny upon request by security or supervisory personnel of NHCC.
33. **ACCESS CLAUSE:** Contractor, including its satellites, offices and/or Subcontractors, if any, shall maintain full and complete books and records of accounts pertaining to this agreement, in accordance with accepted accounting practices and such other records as may be reasonably prescribed by the NHCC. Such books and records shall at all times be available for audit and inspection by the NHCC, or its duly designated representative. All such books and records shall be retained for a period of six (6) years after the completion of all the services described in this agreement. Contractor further agrees that if any provision of Section 952 of the Omnibus Reconciliation Act of 1980 (PL-96-499) is found by a body of competent jurisdiction to be applicable to this contract, the Contractor agrees that it will make available upon written request by the Secretary of Health AND Human Services, or the Comptroller General of the General Accounting Office, or any of their duly authorized representatives, a copy of this contract and any executed amendments thereto documents which relate to the calculation of the charges stated in the contract and copies of service reports documenting services performed. Such records will be available in accordance with the above for the period of six (6) years after the furnishing of any of the services described in this contract.

34. **INVOICING FOR PAYMENT:** Submit invoices, in full detail listing: Description of product and/or services, quantity, unit prices, purchase or delivery order number, vendor ID number which should be comparable to that listed on purchase order or delivery order, date of delivery, proof of delivery, remit to address, (if different from mailing address) and any further requirements if so listed in the specifications. All invoices shall be submitted monthly in arrears directly to the NUMC or using agency to ATTENTION: ACCOUNTS PAYABLE.

34A. **TIME AND MATERIAL PAYMENT IN DETAIL:** Billing shall be rendered in detail, listing all parts and all materials used and all their individual prices. Labor must be shown in number of hours being billed and extended rates per hour.

35. **ADDITIONAL ITEMS:** Of similar manufacture or additional services related to the specifications and requirements stated herein may be added by amendment to the Blanket Order provided that such items or services do not or are not expected to exceed the statutory limit of $9,999.99 in any contract period.

36. **DEFAULT:** The Contractor agrees that in the event any of the services provided for under the terms of this contract should in any way be omitted or unsatisfactorily performed by the Contractor and/or his employees, the NHCC shall so notify the Contractor verbally and follow with a written notification of the deficient services for immediate correction. In the event the Contractor does not correct the deficient services after receipt of written notification, the NHCC department concerned will deduct a percentage based on the work not performed or performed unsatisfactorily from the Contractor’s claim for the period covered. If the Contractor continues to omit or unsatisfactorily perform the required services, the NHCC will arrange for the work to be done by another Contractor and the cost of such work shall be deducted from any monies due or that may become due to the Contractor.

37. **CONFIDENTIALITY:** The Contractor agrees to safeguard the confidentiality of medical records, and/or information, including but not limited to HIV related information, relating to the care and treatment of NHCC patients, that may be obtained by Contractor in the performance of its duties hereunder, consistent with applicable Joint Commission accreditation policies, and shall maintain the confidentiality of all such records and information, in conformity with the confidentiality requirements of the New York State Public Health Law and the regulations promulgated thereunder, including Section 2782 and 2805-g of the Public Health Law, and 10 NYCCR 415.22, 730.10 and Parts 24 and 63, or as same may be from time to time amended.

As part of the preliminary work that you will be conducting on behalf of the Nassau Health Care Corporation ("NHCC") you agree not to directly or indirectly, use, publish, or disclose, or authorize, or permit anyone else to use, publish, or disclose without prior written consent of NHCC, any Confidential Information (as such term is defined herein) provided to or obtained by you in connection with providing services to NHCC or exploring or implementing a possible business relationship with NHCC.

"Confidential Information" includes all "know-how", trade secrets, business and operational plans, contracts, agreements, customer lists and identifications, supplier lists and identifications, pricing policies, operational methods, marketing plans or strategies, prospect

---

**ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED**

---

**BIDDER SIGN HERE**

**TITLE**
names, contact information, preferences, pricing and any other specific information compiled, developed, maintained or acquired by
NHCC, marketing plans and methods, strategies, business plans, prices NHCC pays for goods and services as well as profit margins,
computer software, computer discs, forms, databases, customized computer programs, passwords, access codes, object codes, source
codes, databases, confidential customer/client information, non-public financial information, descriptions of facilities, service
locations, any potential building sites, patient lists, projects, records, identification of key management personnel and related profiles
and employment contracts, personnel information, financial statements and other financial information and projections, or any other
technical or commercial information used by, or relating to NHCC, Nassau University Medical Center ("NUMC"), and to its related
facilities, the A. Holly Patterson Extended Care Facility, the Elmont Community Health Center, the Davis Building-Plainview, the
Freeport-Roosevelt Health Center, the Inwood-Lawrence Health Center, the Long Beach Health Center, the Hempstead Health Center,
the New Cassel/Westbury Health Center, Nassau Correctional Center Medical Unit and NHCC's Certified Home Health Agency
(collectively the "Health Facilities"), and any confidential, or other proprietary information, knowledge or data (oral, written or in
machine-readable form) of NHCC relating to its operations, or the operations of NUMC or any of the Health Facilities, which NHCC,
in its reasonable discretion, considers to be confidential and proprietary to NHCC, whether such information is disclosed orally or in
writing. Confidential Information shall also include any information prepared or derived by you in connection with the evaluation of
or implementation of a Business Opportunity, which contains any Confidential Information.

The contractor further agrees to require each of its employees, partners, independent contractors, agents, representatives, servants,
guests, patrons, and/or invitees assigned to the performance of duties pursuant to this agreement, to observe said requirements.
Any breach of confidentiality by the contractor, its employees, partners, independent contractors, agents representatives, servants,
guests, patrons, and/or invitees of contractor shall be cause for the immediate termination of this agreement.

It is further agreed to and stipulated by the parties hereto, that the provisions of this paragraph shall survive this agreement and the
Contractor agrees to remain bound by the terms of said paragraph for as long as the records and/or information developed hereunder
exists.

38. TERMINATION PREROGATIVE:
The Director reserves the right to cancel the Blanket Order or Purchase Order issued via the award of this sealed bid, in whole or in
part without reason provided that the contractor is given at least thirty (30) days written notice that, on or after a date therein specified,
the contract shall be deemed terminated and canceled. This provision should not be understood as waiving the Nassau Health Care
Corporation’s right to terminate the contract for cause or stop work immediately for unsatisfactory work, but is supplemental to that
provision.

39. LABOR LAW:
Any Purchase or Blanket Order awarded as a result of this bid is subject to the provisions of the New York State Labor Law and the
Contractor will be required to pay the prevailing wage rate as published by the New York State Department of Labor. An updated
New York State Schedule of Prevailing Hourly Wage Rates for this contract has been applied for and should be attached. If the
updated schedule has not been received at the time of this bid, they will be attached and made part of this bid prior to the execution of
a contract. Until the revised Wage Rate Schedules are made part of this bid, the Prevailing Wage Rates apply.

If this is a public work contract covered by Article 8 of the Labor Law or a building service contract covered by Article 9 thereof,
neither Contractor’s employees nor the employees of its Subcontractors may be required or permitted to work more than the number
of hours or days stated in said statutes, except as otherwise provided in the Labor Law and as set forth in prevailing wage and
supplement schedules issued by the State Labor Department. Furthermore, Contractor and its Subcontractors must pay at least the
prevailing wage rate and pay or provide the prevailing supplements, including the premium rates for overtime pay, as determined by
the State Labor Department in accordance with the Labor Law.

The Contractor and each Subcontractor shall furnish to the NHCC on demand a verified copy of his payroll and also any other
information required by the NHCC to satisfy the provisions of the New York State Labor Law as to the hours of employment and rates
of wages are being observed.

Every Contractor on a Public Works Contract to which NHCC is party shall, on behalf of its employees, Subcontractors, employees of
Subcontractors and independent contractors and Subcontractors, submit a transcript of its original payroll record for all work
FORMAL SEALED BID PROPOSAL
PAGE 14
BID NO. MC98-03040-4959

performed by the Contractor to the Finance Department of the NHCC, 2201 Hempstead Turnpike, East Meadow, NY 11554, within thirty (30) days after the issuance of its first payroll, and every thirty (30) days thereafter. Submissions shall be in such a form as to comply with Section 220 of the New York State Labor Law.

SEE ATTACHMENT TO BID

40. **TRADE-INS:** As a condition of this bid, Contractor must accept trade-in of the items listed as “trade-ins” in the specifications, as attached and made part of this bid. An arrangement for the inspection of the listed trade-ins can be made by contacting:

at (516)

The successful bidder shall be responsible for the decontamination, as required by Federal Law, preparation, packaging, and shipment of trade-in equipment to the Contractor’s facility.

41. **TITLE TO EQUIPMENT:**
Title to equipment shall remain with awarded Contractor at all times and will not pass to the NHCC, its Divisions or any other authorized agency.

42. **GENERAL INSTRUCTIONS:**

*********** Mandatory Instructions ***********

Failure to abide by these instructions may be grounds for disqualification

☑ Bidders must insert **FEDERAL IDENTIFICATION NUMBER** in space provided on page one of this bid and it is mandatory that an authorized company representative (Proprietor, Partner or Officer) sign the Sealed Bid.

☑ Late Formal Sealed Bids will **NOT** be accepted. Bidders are urged to mail bids early to assure delivery on time. Bids must be received by 2:00 P.M. on the bid opening date.

☑ Bidders agree to adhere to all applicable standards of the Joint Commission on Accreditation of Healthcare Organizations

Prices **MUST** be inserted with **TYPEWRITER OR INK**.

☑ Entries with **WHITE-OUT, CROSS-OUTS OR LIFT-OFF TAPE MUST BE INITIALED** or that entry will be disqualified.

☑ Bidders shall submit one (1) bid document and all applicable original attachments as furnished by the Purchasing Department of NHCC, and retain one (1) copy of bid and all applicable attachments. No changes to any original bid documents will be allowed whether through photocopying, scanning, or electronic duplication of any other method.

☑ Signature must be in ink and **must be original**. Absolutely no rubber stamped signatures, bids with photocopied signatures, or electronically applied signatures will be accepted.

**Additional Signatures Required**

☑ In addition to the signatures on the front page, at the bottom of each page and other areas as required, the following signatures **are required and are mandatory**:

- OSHA Right to Know requirements must be filled out and signed
- Statement of Confidentiality
- Site Visit Requirement if Clause 44 or 45 boxes are checked off on Page 4
- Non-Collusive Bidding Certifications
- Procurement Law Requirements
- Guidelines for the Prevention of Nosocomial Infection for any construction project
- New York State Dept. of Taxation and Finance Contractor Certification Form (ST-220) This form requires two signatures – one by a corporate official and one by a Notary Public Signature and stamp

*********** End of Mandatory Instructions ***********

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ___________________________________________ TITLE ____________________________

REV 3.7.07   Printed 02/03/2010, 2:27 PM
Other Terms Of This Sealed Bid

✓ As per New York State Law, no exception can be taken to any material term and/or condition of this bid with the exception of any warranties or the specifications as presented in this bid (starting on Specifications Page) for the specific commodity or service required.

✓ Bidders may take exception to the Equipment and/or Product specifications of the bid only under a separate cover letter to be attached to this bid, indicating the specific bid page, paragraph and the exceptions(s). In any event, the decision of the Director will be final.

✓ Any language in any proposal or document submitted by a bidder as part of their bid that is accepted by the NHCC cannot be in conflict with any material term and/or condition relevant to this bid with the exception of any warranties or the specifications of the commodity or service required by this bid. If there is any conflict between the bidder’s terms and conditions and the terms and conditions of this bid, the terms and conditions of this bid shall govern.

✓ Bidders agree that all, Delivery Orders shall be effective and binding upon the Contractor when placed in the mail, addressed to the Contractor at the address shown on the or Blanket Order prior to midnight of the final day of the contract.

✓ Bidders agree that all, Purchase Orders shall be effective and binding upon the Contractor when placed in the mail, addressed to the Contractor at the address shown on the or Purchase Order.

✓ Specific inquiries concerning the specifications of this sealed bid shall be submitted, in writing, to the buyer identified on page one (1) prior to the bid opening. Although questions will be permitted, and are encouraged, answers may be deferred and included in a bid addendum, and issued to all participating parties if such questions are pertinent to the scope of the purchase.

Miscellaneous Instructions for this Sealed Bid

✓ ABSOLUTELY NO MINIMUM ORDERS shall be applied to this bid.

✓ Please pay particular attention to all pages and sign each page where requested.

✓ Bidders should submit bid with unit price in the appropriate column on bid pages or forms attached hereto. In the event of a discrepancy between the unit price and the extension, the unit price shall govern.

✓ Bidders MUST state manufacturer’s name and catalog number of each item bid.

✓ Inside (receiving dock) delivery is required on all orders.

✓ Any manufacturer offering prices for equipment or supplies (disposables) MUST agree to sell parts and/or service for their equipment currently owned or leased by the NHCC, or acquired as a result of this bid, directly to the designated NHCC Biomedical Service Provider. This provision applies even if this bid is for supplies only.

✓ When applicable, the Contractor shall submit documentation to the NHCC Planning Division, prior to delivery, indicating a “Class A fire rating and New York State Department of State Compliance Numbers, in accordance with NAPPA 101 and New York State Fire Prevention Code, part 772 (NYSFDS number)”. Products delivered without prior approved certification will be rejected and the Contractor shall be responsible for all costs associated with their return.

✓ Bids are hereby solicited for the services specified herein which are to be performed at the locations indicated, and in strict accordance with all specifications, terms and conditions attached hereto and made part hereof.

✓ Bid document must be signed by proprietor, partner or corporate officer.

State and Local Tax Information

Purchases by the NHCC are not subject to State or Local Sales Tax or Federal Excise Taxes.

Federal Exemption Number: A-109538 State Exemption Number: 113465690

Indemnity Clause

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE________________________________________ TITLE_________________
Contractor agrees to indemnify and hold harmless NHCC, its agents, officers and employees against any and all claims, demands, causes of action, costs, and liabilities, in law or in equity, of every kind and nature whatsoever, directly or proximately resulting from, arising out of or caused by Contractor’s activities pursuant to this agreement or from any act of omission or commission of Contractor, its officers, agents, or employees. Contractor shall, at NHCC’s demand, defend at its own risk and expense any and all suits, actions or legal proceeding which may be brought or instituted against NHCC, its agents, officers, or employees on any such claim, demand or cause of action, and Contractor shall pay and satisfy any judgment or decree which may be rendered against NHCC, its agents, officers or employees in any such suit, action or other legal proceeding.

43. QUALIFICATION STATEMENT:
Qualification statement must be completed and submitted with bid. It is located as a separate form further on in the bid.

44. PRE BID SITE VISITS:
The prospective supplier, when bidding, represents and warrants that he has visited and knows the site(s) or premise(s) upon which the work, as described in these bid specifications, is to be performed hereunder and that he has informed himself of all existing conditions affecting the work and as to the work of others coming in conjunction with his work. Failure of the bidder to thoroughly acquaint himself with the site and local conditions shall not relieve him of his responsibility, and shall not entitle him to any claim for extras. Site Visit Requirement form must be completed. It is located as a separate form further on in the bid.

45. BIDDERS PRE BID CONFERENCE AND WALK THROUGH:
A one-time only compulsory bidders conference will be held on at Nassau University Medical Center, 2201 Hempstead Turnpike, East Meadow, New York, 11554. A comprehensive walk through will be conducted immediately following the bidders conference with the appropriate facility representatives to acquaint all bidders with the areas to be under construction. All bidders shall be required to be present at the reception area in the Purchasing Department, NUMC. The Purchasing Department is located in the basement of the DCB Bldg, the large 19 story building, on Hempstead Turnpike. A sign in sheet will be provided and will become part of the bid. If any bidder’s signature is omitted from the sheet his bid may be disqualified. All bidders are required to attend the conference and complete the entire walk through if they intend to bid on this project.

Please notify the buyer listed on page one of this bid within one week prior to the scheduled date that you will attend. Specific inquiries concerning the specifications of this sealed bid shall be submitted in writing to the buyer identified on page one (1) prior to the conference so they can be answered at the conference. It is at this time that any questions regarding the specifications of the sealed bid may be directed to the facility representatives for clarification. Although questions will be permitted, and are encouraged, at the conference, answers may be deferred and included in a bid addendum, and issued to all participating parties.

46. NAMES ONLY AT BID OPENING:
At the bid opening, ONLY the names will be read. Unit prices will NOT be read, but will be available when bid summary sheet is prepared.

47. CONTRACTORS SPECIFIC CONDITIONS:  (All boxes that are checked in this section apply to this bid)

- The work to be performed under the contract and in accordance with the contract documents consists of performing, installing, furnishing and supplying of all materials, equipment, labor and incidentals necessary or convenient for the COMPLETE operation at the NHCC facility specified in this contract, and the carrying out of all duties and obligations imposed upon the Contractor by the contract documents.

The general features of the work include but are not limited to the following:

- Perform all removal and demolition as required.
- Patching of all walls, floors ceiling, and roofs as required by the demolition work and the new equipment installation.
- Provide protection for existing conditions and operations during the work.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
Install chase enclosure for electrical conduit passing through floor, and removal and replacement of affected ceiling tile and sealing of floor penetrations as required.

☒ Engineering Drawings: The Contractor shall be responsible for providing shop drawings and wiring diagrams for approval by the NHCC prior to the start of the work.

☒ Provide Fire Underwriters approval for all electrical work. Final payment will not be made until this document is turned over to the Director of Medical Electronics, NHCC.

☒ Work not included:

Removal of identified asbestos containing material shall be performed by NHCC before the start of the work. Any asbestos encountered during the course of the construction shall be immediately reported to the NHCC Fire Safety Department (516 572-3138). All work shall immediately desist until asbestos containing material is cleaned up by the NHCC.

☐ Project Meetings:

Prior to the start of the work, vendor shall be required to attend a “Project Kick-Off Meeting” at which time the Contractor shall be informed of safety, fire safety and security regulations that will be required by the NHCC.

☐ The Contractor shall provide shop drawings and wiring diagrams indicating all aspects of the work. No work shall begin until all shop drawings and wiring diagrams are approved in writing by the NHCC Administration.

☐ All Contractors’ employees are required to wear hospital ID badges and must sign in and out each day in the area designated by NHCC Administration.

☒ The Contractor shall provide the NHCC Administration with “As-built” drawings representing exactly how the work was installed. The drawings shall include, but are not limited to, all HVAC, plumbing, and electrical work required to install the equipment as specified in this contract.

☒ The Contractor shall supply all labor, materials, services, insurance, permits, and equipment necessary to carry out the work in accordance with all applicable Federal, State and Local Regulations. The most recent edition of any relevant Regulation, Standard, Document or Code shall be in effect. Where conflicts among the requirements or with these specifications exists, the most stringent requirements shall apply.

☒ Any schedule for shipment of equipment as a result of this bid MUST be approved in advance by a representative of the NHCC.

☐ Specify number of days A.R.O. that the installation will be completed ____________________________

☒ Prices submitted in this bid must include all equipment, delivery and installation of same in its entirety, as listed in the contract documents, and is to include all supervision, labor, materials, plant, equipment, transportation, incidentals, and other facilities as necessary and/or required to execute all the work as herein specified, or as incidentally required to provide a complete operating installation.

☐ If there are any terms and/or conditions in the attached “Project Manual” that are in conflict with terms and/or conditions in the Formal Sealed Bid Proposal, then it will be the terms and conditions of this Formal Sealed Bid that shall apply

☐ Addition to this bid – Scope Riders and Attachments dated

☐ Addition to this bid – Nassau Health Care Corporation Quality and Construction Plan

☐ Addition to this bid – Nassau Health Care Corporation Project Closeout Procedures

☐ Addition to this bid – Project Safety Plan

☐ Retainage – Based upon applications for payment submitted to the Nassau Health Care Corporation, the owner shall make progress payments to the contractor and take that portion of the contract sum properly allocated to completed work as determined by multiplying the percentage completion of each portion of the work by the share of the total contract sum allocated to that portion of the work in the schedule of values, less retainage of 10%.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
FORMAL SEALED BID PROPOSAL

FREEDOM OF INFORMATION LAW:

During the evaluation process, the content of each bid/proposal will be held in confidence and details of any bid/proposal will not be revealed (except as may be required under the Freedom of Information Law or other State law). The Freedom of Information Law provides for an exemption from disclosure for trade secrets or information the disclosure of which would cause injury to the competitive position of commercial enterprises. This exception would be effective both during and after the evaluation process. Should you feel your firm’s bid/proposal contains any such trade secrets or other confidential or proprietary information, you must submit a request to exempt such information from disclosure. Such request must be in writing, must state the reasons why the information should be exempted from disclosure and must be provided at the time of submission of the subject information. Requests for exemption of the entire contents of a bid/proposal from disclosure have generally not been found to be meritorious and are discouraged. Kindly limit any requests for exemption of information from disclosure to bona fide trade secrets or specific information, the disclosure of which would cause a substantial injury to the competitive position of your firm. NHCC assumes no responsibility for disclosure of unmarked data for any purpose. Nassau Healthcare Corporation will review such designations in making its determination whether disclosure is required, which determination shall be binding on the bidder.

HIPAA – Business Associate Agreement:

If this bid requires a Business Associate Agreement as stipulated by Federal HIPAA laws, then, as a condition of this bid, and before the award can be considered complete, the awarded bidder will be required to sign a Business Associate Agreement to fulfill the HIPPA requirements. This must be done after the award is made and prior to a contract being issued. Failure to do so will be cause for disqualification.

AFFIRMATIVE ACTION

It is the policy of NHCC to comply with all federal, state and local laws, policies, orders, rules and regulations which prohibit unlawful discrimination because of race, creed, color, national origin, sex, sexual orientation, age, disability or marital status, and to take affirmative action in working with contracting parties to ensure that Minority and Women-owned Business Enterprises (M/WBEs), Minority Group Members and women share in the economic opportunities generated by NHCC’s participation in projects or initiative, and/or use of NHCC funds. NHCC’s non-discrimination and affirmative action policy will apply to this initiative. M/WBEs are encouraged to respond. A copy of each respondent’s equal employment opportunity policy statement and staffing plan of the anticipated workforce shall be included as part of the response to this RFP. New York State’s Division of Minority - and Women-owned Business Development (MWBD) helps the state’s minority and women’s business community to access all the services offered by Empire State Development (ESD). This link will provide you with a searchable database of Minority and Women Owned Businesses in New York State. Paste this link into your browser - http://205.232.252.35/

TIME AND MATERIALS CONTRACTS

It is our intention, by the award of a time and materials bid, to provide the Nassau Health Care Corporation, with services that are foreseeable, and may be required from time to time, but that cannot be predicted as to how much and when.

The actual costs shall be predicated upon the requirements of the project at the time it is needed. When Nassau Healthcare Corporation personnel require work to be done as specified in this bid, a request will be made to the bidder for an estimate. The estimate, when submitted shall include all time and materials needed to complete the project and must adhere strictly to the terms and conditions of this bid. Upon approval, a Purchase Order will be created and given to the bidder for the work to be done. No work is be done, nor can anyone authorize work to be done, without a Purchase Order.

Upon completion of the work as outlined in the purchase order, an invoice is to sent listing the work done. The format of the charges incurred must correspond with the time and material charges of the bid. If material costs is the sealed bid are listed as markup over cost, then proof of cost must be submitted along with the invoice.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE

TITLE

REV 3.7.07    Printed 02/03/2010, 2:27 PM
CODE OF CONDUCT

Nassau Health Corporation insists that all of its vendors, contractors, consultants, and other agents adhere to the Corporation's compliance program, which includes a Code of Conduct. The Corporation expects all such entities to become familiar with and to comply strictly with the Corporation's Code of Conduct as a condition of doing business with NHCC. The Corporation strongly encourages any NHCC vendor, contractor, consultant, or agent who reasonably suspects or is aware of any wrongdoing by anyone at or on behalf of the Corporation to report such information to the NHCC Chief Compliance Officer or to call the NHCC No-Caller ID Helpline (572-5800)."

GOVERNING LAW

This Sealed Bid shall be construed in accordance with and governed by the laws of the State of New York, without regard to conflicts of law principles. All actions or proceedings relating, directly or indirectly, to this Sealed Bid shall be litigated only in courts located within Nassau County or in the United States District Court for the Eastern District of New York. Each Firm (by virtue of the submission of its proposal), submits itself, its successors and/or assigns (if any) to the personal jurisdiction of such court, and waives any right to trial by jury.

NO ARBITRATION

Disputes involving this contract, including the breach or alleged breach thereof, may not be submitted to binding arbitration (except where statutorily authorized), but must, instead, be heard in a court of competent jurisdiction of the State of New York.

OMNIBUS PROCUREMENT ACT OF 1992

It is the policy of New York State to maximize opportunities for the participation of New York State business enterprises, including minority and women-owned business enterprises as bidders, subcontractors and suppliers on its procurement contracts. Information on the availability of New York State subcontractors and suppliers is available from:

Department of Economic Development
Division for Small Business
30 South Pearl Street
Albany, New York 12245
Tel. 518-292-5220

A directory of certified minority and women-owned business enterprises is available from:

Department of Economic Development
Minority and Women's Business Development Division
30 South Pearl Street
Albany, New York 12245
http://www.empire.state.ny.us

The Omnibus Procurement Act of 1992 requires that by signing this bid proposal or contract, as applicable, Contractors certify that whenever the total bid amount is greater than $1 million:

(a) The Contractor has made reasonable efforts to encourage the participation of New York State Business Enterprises as suppliers and subcontractors, including certified minority and women owned business enterprises, on this project, and has retained the documentation of these efforts to be provided upon request to the State;
(b) The Contractor has complied with the Federal Equal Opportunity Act of 1972 (P.L. 92-261), as amended;
(c) The Contractor agrees to make reasonable efforts to provide notification to New York State residents of employment opportunities on this project through listing any such positions with the Job Service Division of the New York State Department of...
Labor, or providing such notification in such manner as is consistent with existing collective bargaining contracts or agreements. The Contractor agrees to document these efforts and to provide said documentation to the State upon request; and

(d) The Contractor acknowledges notice that the State may seek to obtain offset credits from foreign countries as a result of this contract and agrees to cooperate with the State in these efforts.

RECIPIROCITY AND SANCTIONS PROVISIONS

Bidders are hereby notified that if their principal place of business is located in a country, nation, province, state or political subdivision that penalizes New York State vendors, and if the goods or services they offer will be substantially produced or performed outside New York State, the Omnibus Procurement Act 1994 and 2000 amendments (Chapter 684 and Chapter 383 respectively) require that they be denied contracts which they would otherwise obtain. Contact the Department of Economic Development, Division for Small Business, 30 South Pearl Street; Albany New York 12245, for a current list of jurisdictions subject to this provision.

OBSJECTIONS TO SOLICITATION AND AWARD

Any objections to the terms of this sealed bid, once released in final form, or to the conduct of receipt, evaluation, or award of sealed bid must be presented in writing within ten calendar days of (1) the release of this solicitation, or (2) the date the objector knows or should have known the basis for its objection. Objections shall be provided in letter format, clearly stating that it is an objection to this solicitation or to the conduct of evaluation or award of sealed bid, and providing a clearly detailed factual statement of the basis for objection. Failure to comply with these directions is a basis for summary dismissal of the objection. Mail objections to the address listed in the sealed bid delivery information.

VENDOR RESPONSIBILITY CRITERIA

The director reserves the right, before making an award, to make investigations as to whether or not the qualifications, services, facilities or items offered by the bidder meet the requirements set forth herein and are ample and sufficient to ensure the proper performance in the event of an award. The bidder must be prepared, if requested by the Director of Purchasing, to represent evidence of experience, ability, financial standing as well as a statement as to plant, machinery, trained personnel and capacity for the rendition of the service on which the vendor is bidding. Upon request of the Director, the successful bidder shall file certification from the manufacturers relative to authorization, delivery, service and guarantees. If it is found that the conditions of the bid are not complied with or that the services or equipment proposed to be furnished do not meet the requirements called for, or that the qualifications, financial standing, or facilities are not satisfactory, the Director may reject such bids. It is distinctly understood, however, that nothing in the forgoing shall mean or imply that it is obligatory upon the Director to make any examinations before an award, and it is further understood that, if such examination is made, it in no way relieves the bidder from fulfilling all requirements and conditions of the bid.

The clauses contained in these bid forms set forth the wishes of the NHCC in regard to the purchase and/or installation required. However, the Director reserves the right to waive irregularities, omission, or other technical defects if, in its judgment, the best interest of the NHCC will be served accordingly.

THIS INSTITUTION IS Entitled TO ALL NEW YORK STATE EDUCATIONAL/ACADEMIC DISCOUNTS

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ______________________ TITLE ______________________

REV 3.7.07 Printed 02/03/2010, 2:27 PM
FAILURE TO SIGN THIS “STATEMENT OF CONFIDENTIALITY” WILL DISQUALIFY YOU FROM THIS BID

48. STATEMENT OF CONFIDENTIALITY

As part of the preliminary work that you will be conducting on behalf of the Nassau Health Care Corporation ("NHCC") you agree not to directly or indirectly, use, publish, or disclose, or authorize, or permit anyone else to use, publish, or disclose without prior written consent of NHCC, any Confidential Information (as such term is defined herein) provided to or obtained by you in connection with providing services to NHCC or exploring or implementing a possible business relationship with NHCC.

"Confidential Information" includes all “know-how”, trade secrets, business and operational plans, contracts, agreements, customer lists and identifications, supplier lists and identifications, pricing policies, operational methods, marketing plans or strategies, prospect names, contact information, preferences, pricing and any other specific information compiled, developed, maintained or acquired by NHCC, marketing plans and methods, strategies, business plans, prices NHCC pays for goods and services as well as profit margins, computer software, computer discs, forms, databases, customized computer programs, passwords, access codes, object codes, source codes, databases, confidential customer/client information, non-public financial information, descriptions of facilities, service locations, any potential building sites, patient lists, projects, records, identification of key management personnel and related profiles and employment contracts, personnel information, financial statements and other financial information and projections, or any other technical or commercial information used by, or relating to NHCC, Nassau University Medical Center ("NUMC"), and to its related facilities, the A. Holly Patterson Extended Care Facility, the Elmont Community Health Center, the Davis Building-Plainview, the Freeport-Roosevelt Health Center, the Inwood-Lawrence Health Center, the Long Beach Health Center, the Hempstead Health Center, the New Cassel/Westbury Health Center, Nassau Correctional Center Medical Unit and NHCC’s Certified Home Health Agency (collectively the “Health Facilities”), and any confidential, or other proprietary information, knowledge or data (oral, written or in machine-readable form) of NHCC relating to its operations, or the operations of NUMC or any of the Health Facilities, which NHCC, in its reasonable discretion, considers to be confidential and proprietary to NHCC, whether such information is disclosed orally or in writing. Confidential Information shall also include any information prepared or derived by you in connection with the evaluation of or implementation of a Business Opportunity, which contains any Confidential Information.

You further agree to remain bound by these terms for as long as the Confidential Information contemplated hereunder exists. If you are in agreement with these terms, kindly acknowledge same by signing in the space provided below.

Agreed to and Accepted by

Nassau Health Care Corporation
QUALIFICATION STATEMENT

BIDDER'S NAME

ADDRESS

1. STATE WHETHER CORPORATION __________ INDIVIDUAL __________ PARTNERSHIP __________

2. IF A CORPORATION OR PARTNERSHIP LIST NAME(S) AND ADDRESS(S) OF OFFICER(S) OR MEMBER(S)
   PRESIDENT ____________________________
   VICE PRESIDENT _________________________
   SECRETARY _____________________________
   TREASURER _____________________________

3. HAVE YOU FILED A QUALIFICATION STATEMENT WITH THE COUNTY OF NASSAU OR THE NHCC? _______________________
   IF SO WHEN? _____________________________

4. HOW MANY YEARS HAS YOUR ORGANIZATION BEEN IN BUSINESS UNDER YOUR PRESENT BUSINESS NAME? _______________________

5. HAVE YOU, OR YOUR FIRM, EVER FAILED TO COMPLETE ANY WORK AWARDED TO YOU? _______________________
   IF SO, WHERE AND WHY? _______________________

6. IN WHAT OTHER LINE OF BUSINESS ARE YOU OR YOUR FIRM INTERESTED? _______________________

7. WHAT IS THE EXPERIENCE OF THE PRINCIPAL INDIVIDUALS OF YOUR ORGANIZATION RELATING TO THE SUBJECT OF THIS BID?

<table>
<thead>
<tr>
<th>INDIVIDUALS</th>
<th>PRESENT POSITION</th>
<th>YEARS OF EXPERIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MAGNITUDE AND TYPE OF WORK</th>
<th>IN WHAT CAPACITY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. IN WHAT MANNER HAVE YOU INSPECTED THIS PROPOSED WORK? EXPLAIN IN DETAIL _______________________
   _______________________
   _______________________

9. THE CONTRACT, IF AWARDED TO YOU OR YOUR FIRM, WILL HAVE THE PERSONAL SUPERVISION OF WHOM? GIVE NAME AND PRESENT POSITION _______________________
   _______________________

10. LIST THE PROJECTS WHICH YOUR FIRM HAS UNDER CONTRACT OR HAS PERFORMED IN THE PAST FEW YEARS THAT WILL QUALIFY YOU FOR THIS BID

<table>
<thead>
<tr>
<th>TYPE OF WORK</th>
<th>DATE PERFORMED</th>
<th>APPROX. CONTRACT AMOUNT</th>
<th>NAME/ADDRESS/TELEPHONE # OF CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

USE SEPARATE PAGE IF ADDITIONAL SPACE IS NEEDED

I certify that all the statements contained in this document are true, complete, and correct to the best of my knowledge and belief and are made in good faith, including data contained in the Organization’s Relevant Experience. A false certification or failure to disclose information shall be grounds for disqualification or termination of any award.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE _______________________________ TITLE _______________________________

REV 3.7.07 Printed 02/03/2010, 2:27 PM
SITE VISIT REQUIREMENT

FOR AN APPOINTMENT
PLEASE CALL:

A. HOLLY PATTERSON EXTENDED CARE FACILITY LOCATION:
   TOM EVANS at TEL.# 516-572-1654 or at PAGER# 516-651-4398

NASSAU UNIVERSITY MEDICAL CENTER LOCATION:
   PATRICK DEGREE AT 516-572-5290

THE PROSPECTIVE VENDOR, WHEN BIDDING, REPRESENTS AND WARRANTS THAT THEY OR THEIR REPRESENTATIVE HAVE VISITED AND KNOWS THE SITE OR PREMISES UPON WHICH THE EQUIPMENT IS TO BE INSTALLED OR THE SERVICE TO BE PERFORMED HEREUNDER AND THAT THE BIDDER HAS INFORMED HIMSELF OF ALL EXISTING CONDITIONS AFFECTING THE SET UP OF THE SYSTEM, EQUIPMENT OR THE SERVICE TO BE PERFORMED.

FAILURE OF THE BIDDER TO THOROUGHLY ACQUAINT THEMSELVES WITH THE SITE(S) AND LOCAL CONDITIONS SHALL NOT RELIEVE BIDDER OF THEIR RESPONSIBILITY, AND SHALL NOT ENTITLE THEM TO ANY CLAIM FOR EXTRAS.

I, __________________________________________________________
   clearly print bidder’s representative’s name and title

_________________________
   signature

AS AGENT FOR ____________________________________________
   clearly print company name

CERTIFY THAT I HAVE VISITED AND INSPECTED THE SITE(S) AS PER THE SPECIFICATIONS IN THIS BID AND HAVE A FULL UNDERSTANDING OF WHAT IS REQUIRED BY THE NASSAU UNIVERSITY MEDICAL CENTER WITH REGARD TO ALL THE SPECIFICATIONS IN THIS BID.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ______________________________ TITLE______________________________
FAILURE TO COMPLETE THIS FORM (2 PAGES) AND SIGN IN APPROPRIATE PLACE SHALL RESULT IN AUTOMATIC REJECTION OF THE BID

NON-COLLUSIVE BIDDING CERTIFICATION REQUIRED BY
SECTION 139-D OF THE STATE FINANCE LAW
SECTION 139-D, Statement of Non-Collusion in bids to the State;

BY SUBMISSION OF THIS BID, BIDDER AND EACH PERSON SIGNING ON BEHALF OF BIDDER CERTIFIES, AND IN THE CASE OF JOINT BID, EACH PARTY THEREO TO CERTIFIES AS TO ITS OWN ORGANIZATION, UNDER PENALTY OF PERJURY, THAT TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF:
[1] The prices of this bid have been arrived at independently, without collusion, consultation, communication, or agreement for the purposes of restricting competition, as to any matter relating to such prices with any other Bidder or with any competitor;
[2] Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the Bidder and will not knowingly be disclosed by the Bidder prior to opening, directly or indirectly, to any other Bidder or to any competitor; and
[3] No attempt has been made or will be made by the Bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.
[4] The fact that a bidder (a) has published price lists, rates, or tariffs covering items being procured, (b) has informed prospective customers of proposed or pending publication of new or revised price lists for such items, or (c) has sold the same items to other customers at the same prices being bid, does not constitute, without more, a disclosure within the meaning of subparagraph one (a).

A BID SHALL NOT BE CONSIDERED FOR AWARD NOR SHALL ANY AWARD BE MADE WITH [1], [2], [3] ABOVE HAVE NOT BEEN COMPLETE WITH; PROVIDED HOWEVER, THAT IF IN ANY CASE THE BIDDER(S) CANNOT MAKE THE FOREGOING CERTIFICATION, THE BIDDER SHALL SO STATE AND SHALL FURNISH BELOW A SIGNED STATEMENT WHICH SETS FORTH IN DETAIL THE REASONS THEREFORE:

[AFFIX ADDENDUM TO THIS PAGE IF SPACE IS REQUIRED FOR STATEMENT]

Subscribed to under penalty of perjury under the laws of the State of New York,

this ______ day of __________________, 20____ as the act and deed of said Corporation or Partnership.

Identifying Data

Potential Contractor ________________________________________________________________

Address ________________________________________________________________

Street ________________________________________________________________

City, Town, etc. ________________________________________________________________

Telephone __________________ Title __________________

If applicable, Responsible Corporate Officer

Name __________________ Title __________________

Signature ______________________________________
IF BIDDER(S) (ARE) A PARTNERSHIP, COMPLETE THE FOLLOWING:
NAMES OF PARTNERS OR PRINCIPALS LEGAL RESIDENCE

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

IF BIDDER(S) (ARE) A CORPORATION, COMPLETE THE FOLLOWING:
NAME LEGAL RESIDENCE

President:

Secretary:

Treasurer:

President:

Secretary:

Treasurer:

**Joint or combined bids** by companies or firms must be certified on behalf of each participant.

Legal name of person, firm or corporation

By ____________________________________________

Name __________________________________________

Title __________________________________________

Address _______________________________________

City, State ______________________________________

Legal name of person, firm or corporation

By ____________________________________________

Name __________________________________________

Title __________________________________________

Address _______________________________________

City, State ______________________________________

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
SAMPLES

Bidder Supplied Sample(s) The Director reserves the right to request from the bidder/contractor a representative sample(s) of the product offered at any time prior to or after award of a contract. Unless otherwise instructed samples shall be furnished within the time specified in the request. Untimely submission of a sample may constitute grounds for rejection of bid or cancellation of the contract. Samples must be submitted free of charge and be accompanied by the bidder’s name, address, and any descriptive literature relating to the sample. Where applicable, samples must be properly labeled with the appropriate bid/contract reference.

A sample may be held by the Director during the entire term of the contract and for a reasonable period thereafter for comparison with deliveries. At the conclusion of the holding period the sample, where feasible, will be returned as instructed by the bidder, at the bidder’s expense and risk. Where the bidder has failed to fully instruct the Director as to the return of the sample (i.e. mode and place of return etc.) or refuses to bear the cost of its return, the sample shall become the sole property of the receiving entity at the conclusion of the holding period.

Conformance with Sample(s) Submission of a sample (whether or not such sample is tested by, or for, the Director) and approval thereof shall not relieve the Contractor from full compliance with all conditions and terms, performance related and otherwise, specified in the bid documents. If in the judgment of the Director the sample or product submitted is not in accordance with the specifications or testing requirements prescribed in the bid documents, the Director may reject the bid. If an award has been made, the Director may cancel the contract at the expense of the Contractor.

Testing All samples are subject to tests in the manner and place designated by the Director, either prior to or after contract award. Unless otherwise stated in the bid specifications, bidder sample(s) consumed or rendered useless by testing will not be returned to the bidder.

Enhanced Sample(s) When an approved sample exceeds the minimum specifications, all products delivered must be of the same enhanced quality and identity as the sample. Thereafter, in the event of a Contractor’s default, the Director may procure a commodity substantially equal to the enhanced sample from other sources, charging the Contractor for any additional costs incurred.

IMPORTANT NOTE: The Director reserves the right to accept or reject any and all bids, or separable portions of offers, and waive technicalities, irregularities, and omissions if the Director determines the best interests of the NHCC will be served. The Director, in his sole discretion, may accept or reject ineligible, incomplete or vague bids and his/her decision shall be final. A conditional or revocable bid which clearly communicates the terms or limitations of acceptance may be considered and contract award may be made in compliance with the bidder’s conditional or revocable terms in the offer. Prior to award, the Director reserves the right to seek clarifications, request bid revisions, or to request any information deemed necessary for proper evaluation of bids from all bidders deemed to be eligible for contract award. Failure to provide requested information may result in rejection of the bid.
Procurement Law Requirements

State Finance Law §§ 139-j and 139-k (collectively, the “Procurement Requirements”) apply to this sealed bid. The Procurement Requirements (1) govern permissible communications between potential respondents and NHCC with respect to this sealed bid during the procurement process; and (2) establish sanctions for knowing and willful violations of the provisions of the Procurement Requirements, including disqualification from eligibility for an award of any contract pursuant to this solicitation.

Compliance with the Procurement Requirements requires that (a) all communications regarding this sealed bid, from the issuance of this sealed bid through final award and approval of any resulting contract (the “Restricted Period”), be conducted only with the buyer listed on the first page of this bid; (b) the completion by respondents of the Offerer Disclosure of Prior Non-Responsibility Determinations and the Offerer’s Affirmation of Understanding of and Agreement pursuant to State Finance Law, copies of which are attached to this sealed bid as attachments to Appendix A, and (c) periodic updating of such forms during the term of any contract resulting from this sealed bid. Respondents must submit both of these forms, properly completed, as part of their proposals. The Procurement Requirements also require NHCC employees to obtain and report certain information when contacted by prospective bidders during the Restricted Period, make a determination of the responsibility of bidders and make all such information publicly available in accordance with applicable law. If a prospective bidder is found to have knowingly and willfully violated the State Finance Law provisions, that prospective bidder and its subsidiaries, related or successor entities will be determined to be a non-responsible bidder and will not be awarded any contract issued pursuant to this sealed bid.

A copy of the State Finance Law Sections 139-j and 139-k can be found at http://www.ogs.state.ny.us/aboutogs/regulations/advisoryCouncil/StatutoryReferences.html. All potential Respondents are solely responsible for full compliance with the Procurement Requirements.

APPENDIX A

REQUIRED DISCLOSURE OF INFORMATION: THE FORMS SET FORTH BELOW MUST BE FULLY COMPLETED AND RETURNED WITH A RESPONDING FIRM’S SUBMISSION. A SUBMISSION WILL NOT BE CONSIDERED COMPLETE WITHOUT SUBMISSION OF THIS ATTACHMENT.

Offerer’s Affirmation of Understanding and Agreement

Instructions:

A Government Entity must obtain the required affirmation of understanding and agreement to comply with procedures on procurement lobbying restrictions regarding permissible Contacts in the Restricted Period for a procurement contract in accordance with State Finance Law §§ 139-j and 139-k. It is recommended that this
affirmation be obtained as early as possible in the procurement process, such as when the Offerer submits its proposal or bid. The following language can be used to obtain the affirmation.

Offerer affirms that it understands and agrees to comply with the procedures of NHCC relative to permissible Contacts as required by State Finance Law §§ 139-j (3) and 139-j (6)(b).

By - Print Name

Title:

Date ________________________________

Contractor Name: ____________________________

Contractor Address:

______________________________________________________________________________

Signature : ________________________________

SIGN HERE
Offerer Disclosure of Prior Non-Responsibility Determinations

Background:

Under New York State Finance Law § 139-k (2), covered governmental entities are obligated to obtain specific information regarding prior non-responsibility determinations. In accordance with State Finance Law §139-k, an Offerer must be asked to disclose whether there has been a finding of non-responsibility made within the previous four (4) years by a Governmental Entity due to: (a) a violation of State Finance Law §139-j or (b) the intentional provision of false or incomplete information to a Governmental Entity. The terms “Offerer” and “Governmental Entity” are defined in State Finance Law §139-k (1). State Finance Law §139-j sets forth detailed requirements about the restriction on Contacts during the procurement process. A violation of State Finance Law §139-j includes, but is not limited to, an impermissible Contact during the restricted period (for example, contacting a person or entity other than the designated contact person, when such Contact does not fall within one of the exemptions).

As part of its responsibility determinations, a covered governmental entity must consider whether an Offerer fails to timely disclose accurate or complete information regarding the above non-responsibility determination. In accordance with law, no Procurement Contract shall be awarded to any Offerer that fails to timely disclose accurate or complete information under this section, unless a finding is made that the award of the Procurement Contract to the Offerer is necessary to protect public property or public health safety, and that the Offerer is the only source capable of supplying the required Article of Procurement within the necessary timeframe.

Instructions:

A Governmental Entity must include a disclosure request regarding prior non-responsibility determinations in its solicitation of proposals or bid documents or specifications or contract documents, as applicable, for procurement contracts. The attached form is to be completed and submitted by the individual or entity seeking to enter into a Procurement Contract.
Disclosure of Prior Non-Responsibility Determinations Form

Name of Individual or Entity Seeking to Enter into Procurement Contract:
____________________________________________________________________

Address: ____________________________________________________________________
____________________________________________________________________________

Name and Title of Person Submitting this Form: __________________________________________________________________
____________________________________________________________________________

Contract Procurement Number: ____________________________
Date: ________________________________

1. Has any Governmental Entity made a finding of non-responsibility regarding the individual or entity seeking to enter into the Procurement Contract in the previous four years? (Please Circle): No Yes

If yes, please answer the next questions:

2. Was the basis for the finding of non-responsibility due to a violation of State Finance Law §139-j? (Please Circle): No Yes

3. Was the basis for the finding of non-responsibility due to the intentional provision of false or incomplete information to a Governmental Entity? (Please Circle): No Yes

4. If you answered ‘yes’ to any of the above questions, please provide details regarding the finding of non-responsibility below:

   Governmental entity: ___________________________________________________________________________________

   Date of Finding of Non-Responsibility: __________________________

   Basis of Finding of Non-Responsibility: ___________________________________________________________________
   ____________________________________________________________________________________________

(Add additional pages as necessary)
5. Has any Governmental Entity or other governmental agency terminated or withheld a Procurement Contract with the above-named individual or entity due to the intentional provision of false or incomplete information? (Please circle) No Yes

6. If yes, please provide details below.

Governmental Entity: ________________________________

Date of Termination or Withholding of Contract: ________________________________

Basis of Termination or Withholding: ________________________________

____________________________________________________________________
____________________________________________________________________

(add additional pages as necessary)

Offerer certifies that all information provided to the Governmental Entity with respect to State Finance Law §139-k is complete, true and accurate.

Signature: ________________________________

Printed Name: ________________________________ Date: ________________________________

Title: ________________________________
Nassau University Medical Center
Guidelines for the Prevention of Nosocomial Infection

Relevant Only
During Hospital Construction and Remodeling

1. Purpose
To prevent the airborne spread of fungal spores, which may cause disease in susceptible individuals during hospital construction, demolition, and remodeling activities. Construction / renovation require substantial planning to minimize the risk of airborne infection both during projects and after their completion. A multidisciplinary team coordinates Fire Safety and Infection Control risk assessments.

2. Construction / Remodeling Coordination Team
A - The team considers the following prior to initiating any construction or repair activity:
   1. Design and function of the new structure.
   2. Assessment of environmental risks for airborne disease and opportunities for prevention.
   3. Measures to contain dust and moisture during construction.
B - The following disciplines are included:
   1. Engineering Department
   2. Medical Director and Manager of the involved and adjacent patient care areas
   3. Safety and Security Department
   4. Infection Control Department
   5. Planning Department / Architects
   6. Project Managers
C - Responsibility and Accountability
   1. Coordinate members’ input in developing a comprehensive project management plan.
   2. Conduct a risk assessment of the project to determine potential hazards to susceptible patients.
   3. Prevent unnecessary exposure of patients, visitors and staff.
   4. Overseer all infection control aspects of construction activities
   5. Establish site-specific infection control protocols for specialized areas.
   6. Ensure compliance with construction standards and any applicable safety regulations.
   7. Establish a mechanism to correct problems quickly.
   8. Implement “interim life safety measures” as required
Infection Control Risk Assessment Form

Task / Project Description:

Location: ___________________________ ___________________________ ___________________________ ___________________________
Facility  Bldg  Floor  Section / Area

Step One: Using the following table, identify the Type of Construction Project or Maintenance Activity (Type A - D)

<table>
<thead>
<tr>
<th>TYPE</th>
<th>Inspection and Non-Invasive Activities.</th>
</tr>
</thead>
<tbody>
<tr>
<td>TYPE A</td>
<td>Includes, but is not limited to:</td>
</tr>
<tr>
<td></td>
<td>• removal of ceiling tiles for visual inspection limited to 1 tile per 50 square feet</td>
</tr>
<tr>
<td></td>
<td>• painting (but not sanding)</td>
</tr>
<tr>
<td></td>
<td>• wall covering, electrical trim work, minor plumbing, and activities which do not generate dust or require cutting of walls or access to ceilings other than for visual inspection</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TYPE B</th>
<th>Small scale, short duration activities which create minimal dust</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Includes, but is not limited to:</td>
</tr>
<tr>
<td></td>
<td>• installation of telephone and computer cabling</td>
</tr>
<tr>
<td></td>
<td>• access to chase spaces</td>
</tr>
<tr>
<td></td>
<td>• cutting of walls or ceiling where dust migration can be controlled</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TYPE C</th>
<th>Work that generates a moderate to high level of dust or requires demolition or removal of any fixed building components or assemblies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Includes, but is not limited to:</td>
</tr>
<tr>
<td></td>
<td>• sanding of walls for painting or wall covering</td>
</tr>
<tr>
<td></td>
<td>• removal of floor-covering, ceiling tiles and casework</td>
</tr>
<tr>
<td></td>
<td>• new wall construction</td>
</tr>
<tr>
<td></td>
<td>• minor duct work or electrical work above ceilings.</td>
</tr>
<tr>
<td></td>
<td>• major cabling activities</td>
</tr>
<tr>
<td></td>
<td>• any activity which cannot be completed within single work-shift</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TYPE D</th>
<th>Major demolition and construction projects</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Includes, but not limited to:</td>
</tr>
<tr>
<td></td>
<td>• activities which requires consecutive work shifts</td>
</tr>
<tr>
<td></td>
<td>• requires heavy demolition or removal of a complete cabling system</td>
</tr>
<tr>
<td></td>
<td>• new construction</td>
</tr>
</tbody>
</table>
Step Two: Using the following table, identify the Patient Risk Groups that will be affected. If more than one group will be affected, select the higher risk group:

<table>
<thead>
<tr>
<th>Low risk - Office areas</th>
<th>Medium risk</th>
<th>High risk</th>
<th>Highest Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Endoscopy</td>
<td>1. Bronchoscopy</td>
<td>1. Any area caring for immunocompromised patients</td>
<td></td>
</tr>
<tr>
<td>2. Laboratories (specimen)</td>
<td>2. Dialysis</td>
<td>2. Burn Center</td>
<td></td>
</tr>
<tr>
<td>5. Physical Therapy</td>
<td>5. Intensive Care Units</td>
<td>5. Operating rooms</td>
<td></td>
</tr>
<tr>
<td>7. Respiratory Therapy</td>
<td>7. Pharmacy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Treatment Rooms</td>
<td>8. Post Anesthesia Care Unit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Waiting Areas</td>
<td>9. Pulmonary Care Unit</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Step Three: Match the Patient Risk Group (Low, Medium, High, Highest) with the planned Construction Project Type (A,B,C,D) on the following matrix, to find the Class of Precautions (I, II, III, or IV) or level of infection control activities required.

Class I – IV Precautions are delineated on the following page.

IC Matrix - Class of Precautions: Construction Project by Patient Risk

<table>
<thead>
<tr>
<th>Construction Project / Maintenance Activity Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Risk Group</td>
</tr>
<tr>
<td>LOW Risk Group</td>
</tr>
<tr>
<td>MEDIUM Risk Group</td>
</tr>
<tr>
<td>HIGH Risk Group</td>
</tr>
<tr>
<td>HIGHEST Risk Group</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LOW Risk Group</th>
<th>Type A</th>
<th>Type B</th>
<th>Type C</th>
<th>Type D</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDIUM Risk Group</td>
<td>II</td>
<td>III</td>
<td>II</td>
<td>III / IV</td>
</tr>
<tr>
<td>HIGH Risk Group</td>
<td>II</td>
<td>III / IV</td>
<td>III / IV</td>
<td>IV</td>
</tr>
<tr>
<td>HIGHEST Risk Group</td>
<td>II</td>
<td>III / IV</td>
<td>III / IV</td>
<td>IV</td>
</tr>
</tbody>
</table>

Note: Infection Control approval will be required when the Construction Activity and Risk Level indicate that Class III and Class IV control procedures are necessary.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE

TITLE

REV 3.7.07  Printed 02/03/2010, 2:27 PM
## Description of Required Infection Control Precautions by Class

### During Construction Project

<table>
<thead>
<tr>
<th>Class I</th>
<th>Class II</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Execute work by methods to minimize raising dust from the construction operators.</td>
<td>1. Provide active means to prevent airborne dust from dispersing into atmosphere</td>
</tr>
<tr>
<td>2. Immediately replace a ceiling tile displaced for visual inspection.</td>
<td>2. Water mist work surfaces to control dust while cutting</td>
</tr>
<tr>
<td>3. Seal unused doors with duct tape.</td>
<td>3. Seal unused doors with duct tape.</td>
</tr>
<tr>
<td>4. Block off and seal air vents.</td>
<td>4. Block off and seal air vents.</td>
</tr>
<tr>
<td>5. Place dust mat at entrance and exit of work area.</td>
<td>5. Place dust mat at entrance and exit of work area.</td>
</tr>
<tr>
<td>6. Remove or isolate HVAC system in areas where work is being performed.</td>
<td>6. Remove or isolate HVAC system in areas where work is being performed.</td>
</tr>
</tbody>
</table>

### Upon Completion of Project

<table>
<thead>
<tr>
<th>Class III</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Remove or Isolate HVAC system in area where work is being done to prevent contamination of duct system</td>
</tr>
<tr>
<td>2. Complete all critical barriers e.g.: sheetrock, plywood, plastic, to seal area from non-work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins.</td>
</tr>
<tr>
<td>3. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units.</td>
</tr>
<tr>
<td>4. Contain construction waste before transport in tightly covered containers</td>
</tr>
</tbody>
</table>
| 5. Cover transport receptacles or carts. Tape covering unless solid lid.    | 6. Remove isolation of HVAC system in areas where work is being performed.

### CLASS IV

| 1. Isolate HVAC system in area where work is being done to prevent contamination of duct system | 1. Do not remove barriers from work area until completed project is inspected by the owner’s Safety Department and Infection Control Department and thoroughly cleaned by the owner’s Environmental Services Department. |
| 2. Complete all critical barriers e.g.: sheetrock, plywood, plastic, to seal area from non-work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins. | 2. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. |
| 3. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. | 3. Vacuum work area with HEPA filtered vacuums |
| 4. Seal holes, pipes, conduits, and punctures appropriately. | 4. Wet mop area with disinfectant. |
| 5. Construct anteroom and require all personnel to pass through this room so they can be evacuated using a HEPA vacuum cleaner before leaving work site or they can wear clothing or paper coveralls that are removed each time they leave the work site. | 5. Remove isolation of HVAC system in areas where work is being performed. |
| 6. All personnel entering work site are required to wear shoe covers. Shoe covers must be changed. | 6. Vacuum work area with HEPA filtered vacuums. |
| 7. Do not remove barriers from work area until completed project is inspected by the owner’s Safety Department and Infection Control Department and thoroughly cleaned by the owner’s Environmental Services Department. | 7. Wet mop area with disinfectant. |
Step Four: Implement the appropriate level of infection control precautions as indicated in the above table.

This project requires the following class

<table>
<thead>
<tr>
<th>Evaluated by:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Infection Control Department</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engineering / Maintenance or Planning</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Signature</th>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
</table>

Contractor’s Notification Declaration

Contractors Performing Work At Nassau Health Care Corporation Facilities

Please complete the blanks below, sign and date.

(Contracting Company Name)

The person whose signature appears below, a proprietor, partner or officer authorized to sign for company listed above, has read the rules and regulations described above and agrees to abide by the content and intent of this procedure.

Signature

Print Name

Title

Date

SIGN HERE
New York State Department of Taxation and Finance
Contractor Certification Form (ST-220)

TAX LAW § 5-A

Tax Law § 5-a, is effective with all solicitations to purchase issued by covered agencies on or after January 1, 2005. It applies to contracts where (1) the total amount of such persons’ sales delivered into New York State are in excess of $300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made, and with respect to any affiliates, subcontractors, or affiliates of subcontractors whose sales delivered into New York State exceeded $300,000 for the four quarterly periods immediately preceding the quarterly period in which the certification is made, and (2) the contracts or agreements with state agencies or public authorities for the sale of commodities or services have a value in excess of $15,000. This law imposes upon certain contractors the obligation to certify whether or not the contractor, its affiliates, its subcontractors and affiliates of the subcontractors are required to register to collect state sales and compensating use tax. Where required to register, the contractor must also certify that it is, in fact, registered with the Department of Taxation and Finance (DTF). The law prohibits the Comptroller, or other approving agency, from approving a contract awarded to a vendor meeting the registration requirements but who is not so registered in accordance with the law.

Contractor certification forms and instructions for completing the forms are attached to this bid. Proposed contractors should complete and return the certification forms within two business days of request (if the forms are not completed and returned with bid submission). Failure to respond timely may render a bidder non-responsive and non-responsible. Bidders shall take the necessary steps to provide properly certified forms, within a timely manner to ensure compliance with the law.

Vendors may call the Tax Department at 1-800-972-1233 for any and all questions relating to Tax Law § 5-a and relating to a company’s registration status with the Tax Department. For additional information and frequently asked questions, please refer to the Department of Tax and Finance web site: http://www.nystax.gov/sbc/nys_contractors.htm.

Nassau Health Care Corporation reserves the right to terminate this contract in the event it is found that the certification filed by the Contractor in accordance with § 5-a of the Tax Law is not timely filed during the term of the contract or the certification furnished was intentionally false or intentionally incomplete. Upon such finding, Nassau Health Care Corporation may exercise its termination right by providing written notification to the Contractor.
ST-220

New York State Department of Taxation and Finance
Contractor Certification
(Pursuant to Section 5-a of the Tax Law)

For more information, see Publication 222, Question and Answers Concerning Tax Law Section 5-a.

Contractor name

Contractor’s principal place of business City State ZIP code

Mailing address (if different than above)

Estimated contract value

Contractor’s federal employer identification number (EIN) Contractor’s sales tax ID number (if different from contractor’s EIN)

Contractor’s telephone number Contracting state agency

Nassau Health Care Corporation

I, ____________________________, hereby affirm, under penalty of perjury, that I am ____________________________,
of the above-named contractor, that I am authorized to make this certification on behalf of such contractor, and that:

Part I. Contract services that are not services for purposes of Tax Law section 5-a
(Mark an X in the box if this statement is applicable. If you mark this box, you do not have to complete Parts II through V.)

☐ The requirements of Tax Law section 5-a do not apply because the subject matter of the contract concerns the performance of services which are not services within the meaning of Tax Law section 5-a.

(If you did not mark the box next to the statement in Part I, mark an X next to the applicable statement in Parts II through V.)

Part II. Contractor registration status

☐ The contractor has made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made, and is registered for New York State and local sales and compensating use tax purposes with the Commissioner of Taxation and Finance pursuant to sections 1134 and 1253 of the Tax Law.

☐ As of the date of this certification, the contractor has not made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made.

Part III. Affiliate registration status

☐ As of the date of this certification, the contractor does not have any affiliates.

☐ To the best of the contractor’s knowledge, the contractor has one or more affiliates having made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made, and each affiliate exceeding the $300,000 sales threshold during such periods is registered for New York State and local sales and compensating use tax purposes with the Commissioner of Taxation and Finance pursuant to sections 1134 and 1253 of the Tax Law. The contractor has listed on Schedule A of this certification the name, address, and identification number of each affiliate exceeding the $300,000 sales threshold during the four quarters.
quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made.

☐ To the best of the contractor's knowledge, the contractor has one or more affiliates and, as of the date of this certification, each affiliate has not made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made.

Part IV. Subcontractor registration status

☐ As of the date of this certification, the contractor does not have any subcontractors.

☐ The contractor has one or more subcontractors, and each subcontractor has informed the contractor of whether or not, as of the date of this certification, it has made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made. Each subcontractor informing the contractor that it has made sales in excess of the $300,000 threshold during such periods has further informed the contractor that it is registered for New York State and local sales and compensating use tax purposes with the Commissioner of Taxation and Finance pursuant to sections 1134 and 1253 of the Tax Law. The contractor has listed on Schedule A of this certification the name, address and identification number of each subcontractor exceeding the $300,000 sales threshold during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made.

☐ The contractor has one or more subcontractors, and each subcontractor has informed the contractor that, as of the date of this certification, it has not made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made.

Part V. Subcontractor affiliate registration status

☐ The contractor has one or more subcontractors, and each subcontractor has informed the contractor that, as of the date of this certification, it does not have any affiliates.

☐ The contractor has one or more subcontractors, and each subcontractor has informed the contractor of whether or not, as of the date of this certification, it has any affiliates having made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made. Each subcontractor informing the contractor that it has one or more affiliates having made sales in excess of the $300,000 threshold during such periods has further informed the contractor that each such affiliate is registered for New York State and local sales and compensating use tax purposes with the Commissioner of Taxation and Finance pursuant to sections 1134 and 1253 of the Tax Law. The contractor has listed on Schedule A of this certification the name, address and identification number of each affiliate exceeding the $300,000 sales threshold during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made.

☐ The contractor has one or more subcontractors, and each subcontractor has informed the contractor that, as of the date of this certification, it has no affiliate having made sales delivered by any means to locations within New York State of tangible personal property or taxable services having a cumulative value in excess of $300,000 during the four quarterly periods ending on the last day of February, May, August, and November which immediately precede the quarterly period in which this certification is made.

Sworn to this_____ day of ________, 20_____  

_________________________  _________________________
(signature)                   (title)  

Individual, Corporation, Partnership, or LLC Acknowledgment
COUNTY OF 

) 

On the day _______ of _________ in the year 20___, before me personally appeared ____________________, known to me to be the person who executed the foregoing instrument, who, being duly sworn by me did depose and say that he resides at ____________________________.

Town of ____________________________,

County of ____________________________,

State of ____________________________; and further that:

[Mark an X in the appropriate box and complete the accompanying statement.]

☐ (If an individual): he executed the foregoing instrument in his/her name and on his/her own behalf.

☐ (If a corporation): he is the ____________________________ of ____________________________, the corporation described in said instrument; that, by authority of the Board of Directors of said corporation, he is authorized to execute the foregoing instrument on behalf of the corporation for purposes set forth therein; and that, pursuant to that authority, he executed the foregoing instrument in the name of and on behalf of said corporation as the act and deed of said corporation.

☐ (If a partnership): he is the ____________________________ of ____________________________, the partnership described in said instrument; that, by the terms of said partnership, he is authorized to execute the foregoing instrument on behalf of the partnership for purposes set forth therein; and that, pursuant to that authority, he executed the foregoing instrument in the name of and on behalf of said partnership as the act and deed of said partnership.

☐ (If a limited liability company): he is a duly authorized member of ____________________________ LLC, the limited liability company described in said instrument; that he is authorized to execute the foregoing instrument on behalf of the limited liability company for purposes set forth therein; and that, pursuant to that authority, he executed the foregoing instrument in the name of and on behalf of said limited liability company as the act and deed of said limited liability company.

______________________________

Notary Public

Registration No. ________________________________
Schedule A - List of affiliates, subcontractors, and affiliates of subcontractors

<table>
<thead>
<tr>
<th>A</th>
<th>Relationship to Contractor</th>
<th>B</th>
<th>Name</th>
<th>C</th>
<th>Address</th>
<th>D</th>
<th>ID Number</th>
<th>E</th>
<th>Sales Tax ID Number</th>
<th>F</th>
<th>Proof of Registration</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Columns:
- **A**: Enter if the contractor; do not complete columns C, D, and E. Enter if an affiliate of the contractor; if a subcontractor; or if an affiliate of a subcontractor, and complete columns B through F.
- **B**: Name - If person is a corporation or limited liability company, enter the exact legal name as registered with the NY Department of State. If person is a partnership or sole proprietor, enter the name of the partnership and each partner's given name, or the given name(s) of the owner(s), as applicable. If person has a different DBA (doing business as) name, enter that name as well.
- **C**: Address - Enter the street address of person's principal place of business. Do not enter a PO box.
- **D**: ID number - Enter the federal identification number assigned to the person or person's business, as applicable.
- **E**: Sales tax ID number - Enter only if different from federal ID number in column D.
- **F**: Enter if a paper copy of the certificate of authority is attached; or if person is registered with DTF and has confirmed this status with DTF.

Privacy notification:
The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5a, 171, 171-1, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law, and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

This information is maintained by the Director of Records Management and Data Entry, NYS Tax Department, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the United States and outside Canada, call (518) 485-6800.
Tangible personal property means physical personal property, of any nature, that has a material existence and is perceptible to the human senses. Tangible personal property includes, without limitation: (1) raw materials, such as wood, metal, rubber and minerals; (2) manufactured items, such as gasoline, oil, diesel motor fuel and kero-jet fuel, chemicals, jewelry, furniture, machinery and equipment, parts, tools, supplies, computers, clothing, motor vehicles, boats, yachts, appliances, lighting fixtures, building materials; (4) artistic items such as sketches, paintings, photographs, moving picture films and recordings; (5) animals, trees, shrubs, plants and seeds; (6) bottled water, soda and beer; (7) candy and confections; (8) cigarettes and tobacco products; (9) cosmetics and toiletries; (10) coins and other numismatic items, when purchased for purposes other than for use as a medium of exchange; (11) postage stamps, when purchased for purposes other than mailing; and (12) precious metals in the form of bullion, ingots, wafers and other forms.

Completing Form ST-220
Identification information

Contractor name: Enter the exact legal name of the person or entity who is contracting to provide commodities or services to a covered agency of New York State. This is the name registered with the New York Department of State.

Contractor's principal place of business: Enter a street address, not a P.O. box number.

Mailing address: Enter the address where contractor receives mail, if different than the principal place of business.

Contracting state agency: Enter the state agency awarding the contract to the contractor.

Certification statement: If the contractor is a corporation, the statement must be completed by the president, vice president, treasurer, assistant treasurer, chief accounting officer, or other officer authorized by the corporation. If the contractor is a partnership, the statement must be completed by a partner or person authorized by the partnership. If the contractor is a limited liability company, the statement must be completed by a member of the LLC and be authorized by the LLC.

Part 1 - Contract services not pursuant to Tax Law section 5-a

If the services to be performed under the contract are not services within the meaning of Tax Law section 5-a, mark an X. You do not have to complete Parts II through V. You must sign and have the certification acknowledged.

For procurement law purposes, services means, other than with respect to contracts for State printing, the performance of a task or tasks and may include a material good or a quantity of material goods, and which is the subject of any purchase or other exchange. For procurement law purposes, technology is a service. The term services for procurement law purposes does not apply to contracts for architectural, engineering or surveying services, or to contracts with not-for-profit organizations approved in accordance with Article eleven-B of the State Finance Law.

The term taxable services for New York State and local sales and compensating use tax law purposes includes, but is not limited to: 1) providing information by printed, mimeographed or multigraphed matter or by duplicating written or printed matter in any other...
manner; 2) processing, assembling, fabricating, printing or imprinting tangible personal property furnished by a customer who did not purchase the tangible personal property for resale; 3) installing, maintaining, servicing, or repairing tangible personal property that is not held for sale by the purchaser of the service in the regular course of business (for example, servicing automobiles, installing appliances, and repairing radio and television sets); 4) storing tangible personal property that is not being held for sale; 5) renting safe deposit boxes, vaults, and similar storage facilities; 6) maintaining, servicing, or repairing real property both inside and outside buildings (for example, cleaning, painting, gardening, snow plowing, trash removal, and general repairs); 7) providing parking, garaging, or storing services for motor vehicles; 8) interior decorating and designing; 9) protective or detective services; and 10) entertainment or information services provided by means of telephony or telegraphy.

Parts II through V

If the contract is covered under Tax Law section 5-a, you must mark an X in one box in each of these parts. You must also sign and have the certification acknowledged, and complete Schedule A.

Schedule A

Column A - Relationship to the contractor

The contractor should enter a C. It is not necessary for the contractor to complete columns C through F since this information has been provided on page 1.

If the person listed in column B is an affiliate of the contractor, enter an A; if a subcontractor, enter an S, if an affiliate of a subcontractor, enter SA.

Column B - Name

Enter the exact legal name as registered with the New York Department of State of each corporation or limited liability company. If the person is a partnership or sole proprietor, enter each partner's or the owner's given name. If the person uses a different name or DBA (doing business as), enter that name as well.

Column C - Address

Enter the street address of the person's principal place of business. Do not enter a PO box.

Column D - ID number

If the person listed in column B is an individual, enter the social security number of that person. Otherwise enter the employer identification number (EIN) assigned to the person.

Column E - Sales tax ID number

Enter the sales tax identification number, if different from the federal identification.

Column F - Proof of registration

Enter C4 and attach a copy of the certificate of authority for the person.

If the certificate of authority is not readily available and if the person is registered with the Department of Taxation and Finance and has confirmed this status with the DTP, enter RC.

Return a signed and acknowledged original Form ST-220, and a copy, with the contract to the procuring state agency.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
The forms on the next two pages are to be filled out completely so that the information can be entered in our computer system for purchase orders and payments to be made.

**VENDOR INFORMATION FORM**

THIS FORM, **ALONG WITH THE ATTACHED “700” FORM MUST BE FILLED OUT AND SUBMITTED TO THIS OFFICE PROMPTLY BEFORE ANY PURCHASE ORDER OR PAYMENT CAN BE PROCESSED.**

**BUSINESS NAME:**

________________________________________________________________________

**BUSINESS Address:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Contact Person:

________________________________________________________________________

**Telephone Number:**

________________________________________________________________________

**FAX Number:**

________________________________________________________________________

**PLEASE NOTE:** ANY CHANGE IN VENDOR INFORMATION PREVIOUSLY PROVIDED, MUST BE ACCOMPANIED BY A NOTIFICATION OF SAID CHANGE ON VENDOR LETTERHEAD DULY SIGNED.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ___________________________________________ TITLE__________________
REQUEST FOR TAXPAYER
IDENTIFICATION NUMBER AND CERTIFICATION

Document Type: Initial Entry [ ] Revision [ ] 1099 Yes [ ] No [ ]

VENDOR / PAYEE ID □ □ □ □ □ □ □ □ □ VENDOR CLASS □

VENDOR / PAYEE NAME:
________________________
________________________

REMIT TO ADDRESS:
________________________
________________________

________________________
STATE □ □ ZIP □ □ □ □ □ □ □

Please answer the four questions below and sign at bottom. Incomplete forms will delay payment.

1. The vendor/pay ID number provided above is: vendor Federal ID # [ ] Social Security # [ ]
2. Is vendor/payee incorporated: Yes [ ] No [ ]
3. Is medical or legal service ever provided by vendor Yes [ ] No [ ]
4. Is vendor/payee an employee of Nassau Health Care Corp. Yes [ ] No [ ]

Certification - Under penalties of perjury, I certify that: (1) The number shown on this form is my correct identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends or (c) the IRS has notified me that I am no longer subject to backup withholding. (3) The information provided on this form is correct to the best of my knowledge.

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 of under reporting interest or dividends on your tax return. For real estate transactions, item (2) does not apply.

PLEASE SIGN HERE __________________________
DATE __________________________ TITLE __________________________

Form submitted by: __________________________
(Name) __________________________ (NUMC Dept.)

Nassau Health Care Corp.
201 Hempstead Turnpike East Meadow, NY 11554

Form 700-W9

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
WATER TREATMENT SERVICE

Proposals submitted hereunder shall be in accordance with the following detailed specifications. Awarded bidder shall maintain compliance with all applicable state, federal and county laws and regulations applicable to bidders performance hereunder. Bidder will comply with NHCC’s Compliance Program requirements applicable to all NHCC vendors, contractors, consultants, and agents. This information is available via NHCC’s website at: <http://www.numc.edu/htmls/procurement.htm>. In addition, bidder shall comply with the NHCC’s policies and procedures.

SPECIFICATIONS

IT IS THE INTENT OF THE NASSAU HEALTH CARE CORPORATION (NHCC), TO ESTABLISH A MULTI-YEAR CONTRACT FOR WATER TREATMENT SERVICES AT NASSAU HEALTH CARE CORPORATION FACILITIES WITH THE FOLLOWING SPECIFICATIONS; (NOTE: THE “PART 1” SECTION OF THIS BID WILL BE FOR WATER TREATMENT SERVICE AT OUR A. HOLLY PATTERSON EXTENDED CARE FACILITY, WHILE THE “PART II” SECTION OF THIS BID SHALL BE FOR SERVICE AT OUR NASSAU UNIVERSITY MEDICAL CENTER)

PART 1

A. Holly Patterson Extended Care Facility

Water Treatment Specifications for: A. Holly Patterson Extended Care Facility (A.H.P.)

Address:
875 Jerusalem Ave.
Uniondale, NY 11553

Questions on the A.H.P. Specifications Should be Directed to: Tom Evans @ 516-572-1654

A.H.P. wishes to establish a multi-year “Plan A” (Full Service) and “Plan B” (Time & Material) contract with a qualified vendor to supply water treatment chemicals and professional services under the following terms and conditions:

A.H.P. is requesting a “fixed annual delivered lump sum price” for “all” the water treatment program chemicals, services, test reagents, lab equipment and chemical feed equipment necessary to implement the water treatment program. The water treatment program will provide the boiler plant and steam system piping with protection against deposition and corrosion with an emphasis on overall plant operating efficiency and reliability.

The pricing must be firm for “5” years. Escalation provisions are not acceptable during the “5” year period.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
It is the bidder’s responsibility to visit the facility and sample the systems to ensure that they understand the plant operation and details. **NOTE:** All bidder’s **must** contact Tom Evans (516-572-1654) at A.H.P. to schedule a site visit.

**Program Technologies:**
The water treatment program provider **must** include a section in their proposal which identifies the products/technologies that will be used to provide the boiler/feed water systems with protection against deposition and corrosion. This section **must** also identify the product/technology that will be used to provide the steam/condensate system with protection against corrosion. **All technologies must be liquid.**

**Program Recommendations/Observations:**
The water treatment program provider **must** include a section in their proposal which identifies program recommendations and observations describing their water treatment program. This section should be used to demonstrate how the water treatment program provider’s program will provide A.H.P.’s boiler plant with protection against deposition and corrosion and help ensure the overall plant operating efficiency and reliability.

**Plant Operating Data:**
The following A.H.P. plant operating data has been provided as an estimate of the plant operating profile. However, A.H.P. will make no guarantees regarding this data. The water treatment vendor **must** visit A.H.P. and make their own assumptions regarding plant operating characteristics, for providing a basis for their pricing.

**A.H.P. Plant Operating Data is as Follows:**
Four “4” 1992 Nebraska D Frame Boilers, 13,000 #’s/hr.
One “1” Duplex Softener System
One “1” Deaerator
Steam production ➔ 80 million pounds annually
Make-up ➔ 2 Million gallons annually
Boiler Pressure ➔ 120 psi

**Primary Service Representative and Back-up:**
The primary service representative is the person that visits A.H.P. each month to provide the water treatment testing, services and consultation. The back-up representative is the person that will visit A.H.P. in the event that the Primary Service Representative is not available.

The primary service representative and back-up, as a minimum **must** have the following qualifications:
- A four year technical degree in Mechanical/Chemical engineering or related science from an accredited college or university.
- Minimum 5 years of field experience servicing water treatment applications.
- One hour on-site response time when requested by A.H.P. personnel.
- Both the primary service representative and the back-up **must** be full time employees of the water treatment provider.
- The bidder **must** provide a resume for both the primary and back-up representative.
References:
The bidder **must** provide a reference list with contact names and phone numbers for "all" water treatment applications performed on Long Island. Of particular interest are those references which are in the Hospital/Health Care industry. On the reference list please provide the name of the Primary Service Representative for each application.

**Chemical Delivery, Storage and Handling:**
A.H.P. **will not** accept drums of chemical. It is A.H.P.'s directive to improve operator safety, space utilization and eliminate all drum handling costs via the "drum-less delivery" of all chemicals. There must be a direct chemical feed for operator safety.

With regard to Chemical Delivery, Storage and Handling the bidder as part of their annual fixed pricing **must**:

- Provide tanks/containment for each of the chemicals. All containment must represent 110% of the tank storage volume.
- Provide a diagram and specification of the tanks/containment to be used at A.H.P.
- Complete all deliveries via full time employees of their company, via their own trucks.
- Provide a detailed description of their company's delivery systems and related certifications.
- The bidder will be responsible for positioning, setting up and maintenance/repair of the tanks.
- All tanks must meet or exceed all local, state and federal laws, regulations and guidelines.

**Chemical Feeding:**
It is A.H.P.'s directive to improve operator safety and water treatment program control by feeding the water treatment program chemicals directly from the chemical tanks to the boiler/feedwater system in a "hands-off manner". To this end "all products" will need to be liquid.

As mentioned under "Pricing" all required chemical feed equipment e.g. pumps, tanks, tubing and injection nozzles **must** be included in the lump sum price.

The bidder **must** provide a description of their proposed chemical injection system, including the location that they recommend each chemical be injected.

Operator training sessions must be provided by the winning bidder at no additional cost for the life of the contract.

**ISO 9000 Certification**
The bidder **must** be ISO 9000 Certified. The water treatment suppliers manufacturing operations, analytical laboratory and field services **must** be ISO certified. The water treatment supplier **must** provide a copy of their ISO Certification Certificate with their bid response.

**Laboratory Testing**
The water treatment vendor **must** maintain a modern research laboratory, equipped with modern, high technology equipment, to support the specialized needs of customers and field personnel. All laboratory services **must** be provided as part of the "Lump Sum pricing", at no additional charge to A.H.P.
At minimum the water treatment supplier’s laboratory must be able to provide the following:

- Atomic absorption spectrophotometer for accurate, low level determinations of metals in water and deposit samples and fuel oil samples. Graphite furnace attachment for low level analysis (ppb) of trace metals.
- Conventional ion exchange resin analyses, including salt splitting capacity, total capacity tests, microscopic examinations, identification of resin foulants and contaminants, resin clean-up recommendations, photomicrography, etc.
- Conventional laboratory analyses of corrosion coupons, using ASTM approved methods for coupon preparation, cleaning and weighing, with computerized reporting.
- Spectro Analytical "Spectroflame M120E" (or equivalent), Inductively Coupled Plasma (ICP) spectrometer for rapid, automated sequential elemental analysis of water and/or deposits interfaced with a data handling computer.
- Light microscopy - both compound and dissecting with CCD photomicrographic capabilities for the examination and documentation of microbiological and other physical specimens.
- Computerized Laboratory Information Management System for sample, database, analytical data collection, archiving, report generation, etc.

**Field Support Capabilities**

In addition to the analytical services performed at their laboratory facility, the water treatment supplier must be able to provide the following at no additional cost to A.H.P.

- Video inspection equipment for recording images from inside the boiler tube.
- Orbisphere analyzer for performing dissolved oxygen studies on the deaerator.
- As part of their bid package, the bidder must provide a detailed description of the equipment that will be available for these inspections, if necessary.

**In Plant Services**

A.H.P. recognizes that on-going support and communication with plant personnel is critical to the success of the water treatment program. At minimum the water treatment supplier must provide the following as part of their water treatment program.

- During each visit, the primary service representative will provide a detailed inspection of the plant and water chemistry. The findings and recommendations will be discussed with plant personnel to identify what action if any is necessary to keep the program moving forward in a positive direction.
- The details of the visit will be outlined in a Field Service Report to serve as a reference for A.H.P. and the primary representative.
- The primary service representative will be on location at minimum monthly, to perform their detailed inspection of the plant and water chemistry.
• The bidder **must** provide as part of their bid package an example of the level of detail that A.H.P. can expect with each monthly service report.
• The primary service representative will inspect and report on the boiler’s water side services as they become available.
• The primary service representative will be expected to report on the softener and deaerator performance.
• The bidder will also make recommendations with regard to overall plant operating efficiency as it relates to steam and water consumption. The bidder **must** provide as part of their bid package a sample report with regard to such recommendations.

**Program Control Manual**

A.H.P. plant personnel have other responsibilities beyond the water treatment program. For this reason the water treatment vendor **must** provide plant personnel with the tools and services necessary to help the program stay on track.

One of these tools is a **Program Control Manual** that provides the operator with a current reference for program administration. The selected water treatment vendor will be expected to provide A.H.P. with a Program Control Manual that contains:

- Program Control Charts
- Chemical Program Testing Log
  1. Trouble Shooting Tips
  2. Test Procedures
  3. Product Bulletins
  4. Tech Notes and Best Practice
  5. Service Reports and General Correspondence

**ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED**
PART I: PRICE SUMMARY for A.H.P.

Pricing for A.H.P. “Plan A” (Full Service) Portion of this Contract:

1a.) Total Annual Cost “Plan A” (Full Service) $ ____________ /Annual

1b.) Total Monthly Cost “Plan A” (Full Service) $ ____________ /Monthly

(Note: Billing Shall Be Monthly).

Pricing for A.H.P. “Plan B” (Time & Material) Portion of this Contract:

2a.) Normal Hourly Rate (Mon. – Fri. 8a.m. – 5p.m.) $ ____________ /Hr.

2b.) Overtime Hourly Rate (Mon. – Fri., other than 8a.m. – 5p.m.) $ ____________ /Hr.

2c.) Holiday Hourly Rate (Saturday, Sunday & Holidays) $ ____________ /Hr.

2d.) Percent Discount From Manufacturers/Vendors List Price _________%

2e.) Mark Up Over Cost Where There Is No Mfg. List Price _________%

******* End Of Specifications for Part 1, A.H.P. Location******

---

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

BIDDER SIGN HERE ___________________________________________ TITLE __________________________

REV 3.7.07  Printed 02/03/2010, 2:27 PM
PART II

Nassau University Medical Center Specifications

Water Treatment Services for: Nassau University Medical Center (N.U.M.C.)
Address: 2201 Hempstead Turnpike
East Meadow, N.Y. 11554

Questions on the N.U.M.C. Specifications Should be Directed to: Patrick Degree @ 516-572-5290

NOTES:

1) For “PART II” Detailed Water Treatment Specifications for the Nassau University Medical Center, See “Attachment No. 1”, To This Formal Bid Request.

2) All Vendor’s Responding to the N.U.M.C. Section (PART II), of this Formal Bid Shall Insert Their Pricing on “Attachment No. 1”.

##########################################################

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED
ATTACHMENT NO. 1

PART II

Specifications For
Nassau University Medical Center
Water Treatment Services

Water Treatment Services for: Nassau University Medical Center (N.U.M.C.)

Address: 2201 Hempstead Turnpike
East Meadow, N.Y. 11554

Questions on the N.U.M.C. Specifications Should be Directed to:
Patrick Degree @ 516-572-5290

Specification of Requirements

Water Treatment Services for

Condensate Return Systems,

Cooling Towers, Chemical Injection

Systems and General Use
1. PURPOSE

1.1. Nassau University Medical Center (N.U.M.C.) wishes to establish a multi-year “Plan A” (Full Service) and “Plan B” (Time & Material) contract with a qualified Vendor to provide Water Treatment Services under the following terms and conditions:

2. SCOPE

2.1. This specification shall cover all Water Treatment Services used at Nassau University Medical Center (N.U.M.C.)

2.2. These services shall be divided into a Plan A and Plan B category.

2.2.1. Plan A (Full Service) - Services are to be scheduled and delivered periodically. The cost of this service shall be at a fixed annual cost billed on a monthly basis.

2.2.2. Plan B (Time & Material) - Services are not scheduled but may be required on an as needed basis. They are to be billed as utilized using a fixed rate for labor and a fixed price plus markup/discount for material.

2.3. Plan A – services included within the scope of this contract are steam boilers, condensate water return systems, cooling towers, chemical injection systems and other miscellaneous water systems.

2.3.1. Cooling Tower 1 15 Ton Indoor Metal Tower

2.3.2. Cooling Tower 1 60 Ton Indoor Metal Tower

2.3.3. Condensate 1 Condensate Return System

2.3.4. Chemical Injection Systems – all - as required for chemical treatment of aforementioned systems

2.4. Plan B – all other systems shall be covered under plan B.
3. SPECIFICATIONS

3.1. Plan A - Condensate Return Systems

3.1.1. Provide a Chemical Treatment Management Plan that is designed to maximize the effective operational life expectancy of the condensate return system.

3.1.2. This Chemical Treatment Management Plan should consist of chemicals used to minimize the corrosion rate of the condensate return systems as well as maintain the quality of the condensate water being returned.

3.1.3. The proposed Chemical Treatment Management Plan should, at minimum, consist of a plan to minimize dissolved oxygen in the water and a form of a buffered pH control to reduce corrosion rates.

3.1.4. The Chemical Treatment Management Plan will be analyzed for chemical effectiveness as well as cost effectiveness.

3.1.5. Training shall be given (as needed throughout the life of the agreement), to plant operational personnel in the following areas so they can implement the Chemical Treatment Management Plan.

3.1.5.1. Chemical Testing
3.1.5.2. Chemical Addition / Adjustment
3.1.5.3. Chemical Handling

3.1.6. Periodic monitoring and oversight of the Chemical Treatment Management Plan shall be conducted by the Vendor to ensure that operational personnel are both knowledgeable and proficient in the tasks described above and that the Chemical Treatment Management Plan is being implemented in a manner that will prolong the effective life span of the condensate return system.

3.1.7. The Vendor shall monitor / trend the chemical testing results for signs of concern and make recommendations for adjustments to chemical additions, blow downs, modifications to chemicals added and other required changes in the Chemical Treatment Management Plan.
3.1.8. The Vendor shall perform independent monthly periodic chemical testing.

3.1.9. The Vendor shall provide detailed reports of all testing performed and chemical added upon request.

3.1.10. The Vendor shall provide written reports and test results required to insure and exhibit proper system treatment.

3.1.11. The Vendor shall provide technical recommendation as to the course of action to be followed in the future treatment of the cooling towers and to overcome concerns that may arise.

3.1.12. The Vendor shall provide all required chemicals used in the Chemical Treatment Management Plan.

3.1.13. The Vendor shall deliver all chemicals to the point of use and shall be responsible for their proper containment.

3.1.14. The steam generated by the boilers receiving this condensate is used in direct steam humidification, medical equipment sterilization and direct contact cooking. Therefore, all chemicals used must either not be carried over into the steam or FDA approved for the aforementioned applications.

3.1.15. The condensate returned from the NUMC system is sent to Nassau Energy Corp. for use in a Gas Turbine driven cogeneration unit. Therefore, all condensate chemicals added at N.U.M.C. must be compatible with their system and system chemistry.

3.2. Plan A – Cooling Towers

3.2.1. Cooling tower operation is non-seasonal and therefore is utilized throughout the year.

3.2.2. Provide a Chemical Treatment Management Plan that is designed to maximize the effective operational life expectancy of the two (2) cooling towers at Nassau University Medical Center. One system is located in the Dynamic Care Building 3-3 Fan Room and the other in Building Q 4th floor fan room.
3.2.3. This Chemical Treatment Management Plan should consist of chemicals used to minimize the corrosion rate of the towers, maximize the heat transfer rates of the condensers as well as maintain the towers free of biological growth.

3.2.4. The proposed Chemical Treatment Management Plan should, at minimum, consist of a plan to minimize the presence of biological matter, minimize the corrosion of the system and maximize the rate of heat transfer at all interfaces.

3.2.5. The Chemical Treatment Management Plan will be analyzed for chemical effectiveness as well as cost effectiveness.

3.2.6. The Vendor shall implement the Chemical Treatment Management Plan.

3.2.7. The Vendor shall perform all periodic testing and be responsible for adjusting chemical addition rates, as well as maintaining all chemical analysis results.

3.2.7.1. The Vendor shall perform monthly periodic chemical and biological testing except for Legionella.

3.2.7.2. Legionella testing shall be performed annually.

3.2.8. Training shall be given (as needed throughout the life of the agreement), to plant operational personnel in the following areas so they can monitor the Chemical Treatment Management Plan.

3.2.8.1. Chemical Testing

3.2.9. The Vendor shall supply bacteriological testing kits to be used by Nassau Health Care Corporation personnel for the purpose of sampling and testing the cooling towers in the event of a suspected biological outbreak or event.

3.2.10. Periodic monitoring of plant operation personnel shall be conducted by the Vendor to insure that operational personnel are both knowledgeable and proficient in the tasks described above.

3.2.11. The Vendor shall monitor / trend the chemical testing results for signs of concern and make recommendations for adjustments to chemical additions, blow downs, modifications to chemicals added
and other required changes in the Chemical Treatment Management Plan.

3.2.12. The Vendor shall provide detailed reports of all testing performed and chemical added upon request.

3.2.13. The Vendor shall provide written reports and test results required to insure and exhibit proper system treatment.

3.2.14. The Vendor shall provide technical recommendation as to the course of action to be followed in the future treatment of the cooling towers and to overcome concerns that may arise.

3.2.15. The Vendor shall provide all required inhibitors, biocides and other chemicals to control scale, corrosion and algae accumulation.

3.2.16. The Vendor shall deliver all chemicals to the to point of use and shall be responsible for their proper containment.

3.3. Plan A – Chemical Injection Systems

3.3.1. Survey existing chemical feed and control equipment.

3.3.2. Repair or replace existing equipment as required to insure proper system operation.

3.3.3. Where equipment is lacking or is no longer serviceable, make recommendation for replacement components to provide proper system operation. Recommendations are to include equipment type and quantity required, equipment pricing and estimated installation price.

3.3.4. Maintain all chemical injection controls, pumps, water meters, solenoid valves and other associated equipment that is required for proper chemical treatment and chemical treatment system operating efficiency.

3.3.5. Make all necessary adjustments to pumps, controls and related equipment required for proper chemical treatment and chemical treatment system operating efficiency.
3.3.6. Report to the Director of Engineering or his designee any situations that may require attention, including repair or replacement requirements.

3.4. Plan B – Miscellaneous Chemical Water Treatment

3.4.1. The Vendor shall provide a schedule of labor rates to be extended for miscellaneous chemical water treatment related work.

  3.4.1.1. The extended labor rate schedule is to be stated in an hourly rate for normal hours, overtime hours and holiday hours and when each rate applies.

  3.4.1.2. Normal Hourly Rate (Mon.-Fri. 8a.m.-5p.m.)

  3.4.1.3. Overtime Hourly Rate (Mon.-Fri. other than 8a.m.-5p.m.)

  3.4.1.4. Holiday Hourly Rate (Saturday, Sunday & Holidays)

3.4.2. The Vendor shall provide a price to be extended for materials that are to be used.

  3.4.2.1. For materials directly supplied by the Vendor, the Vendor shall supply a price list, with applicable discount to be extended under this contract.

  3.4.2.2. For materials indirectly supplied by the Vendor, the Vendor shall supply a percentage discount from manufacturers list price or a markup over cost where no price list exists.

  3.4.2.3. Note that a copy of the original invoice shall accompany all materials that are indirectly supplied under this contract.

3.4.3. All work to be performed under the Plan B section of this contract must be authorized by the Nassau Health Care Corporation representative or his designee and a purchase order must be issued by the Corporation.

3.4.4. Work that may be accomplished under Plan B may include, but is not limited to,

  3.4.4.1. Provide the labor and material to chemically clean the waterside of all the listed cooling towers as requested.
3.4.4.2. Provide corrosion evaluation utilizing pre-weighted coupons or spool pieces to test for steel, copper or any other required metals. Provide analysis and written results and recommendations.

3.4.4.3. Provide Biological Monitoring and testing.

3.5. Chemicals

3.5.1. The vendor shall maintain licensing for the chemicals used in treating cooling towers.

3.5.2. All chemicals to be used in the Chemical Treatment Management Plan are subject to approval by the authorized Nassau University Medical Center representative prior to commencement of the contract.

3.5.2.1. Labels of all materials must be submitted at this time with Material Safety Data Sheet and Technical Data Sheet for approval by Nassau University Medical Center.

3.5.3. All chemical drums, chemical waste and excess chemicals are the responsibility of the Vendor and must be stored in proper containment vessels and removed as soon as practical, in accordance with all applicable Federal, State and local regulations.

3.5.4. The Vendor shall maintain all required records necessary by all applicable Federal, State and local regulations as to amounts of chemical used, disposition and other pertinent information.

4. NOTES

4.1. All items listed in this specification are to be included at the quoted price.

4.2. N.U.M.C. reserves the right to add or delete items from this specification at any time during the contract period by providing thirty (30) days prior written notice to the contractor. The price of the contract will be negotiated and adjusted to reflect these changes.

4.3. For the purpose of this contract the authorized N.U.M.C. Representative shall be the Director of Engineering / Maintenance.
4.4. Compliance with all Federal, New York State and local laws will be the responsibility of the Vendor.

5. BILLING

5.1. Although the cost for “Plan A” is to be given as an annual cost, “Plan A” Services may be invoiced monthly for the services rendered.

5.2. The “Plan B” services and material costs are to be invoiced as incurred.

6. PART II: PRICE SUMMARY for N.U.M.C.

6.1. Prospective Vendors will submit quotations to Corporate Procurement.

6.2. The Quotations will at minimum contain pricing for the following items.

6.2.1. “Plan A” (Full Service) – N.U.M.C. Condensate

   6.2.1.1. Total Annual Cost Plan A (Full Service) $ ________/Annual
   6.2.1.2. Total Monthly Cost Plan A (Full Service) $ ________/Monthly

6.2.2. “Plan A” (Full Service) – N.U.M.C. Cooling Towers

   6.2.2.1. Total Annual Cost Plan A (Full Service) $ ________/Annual
   6.2.2.2. Total Monthly Cost Plan A (Full Service) $ ________/Monthly

6.2.3. “Plan A” (Full Service) – N.U.M.C. Chemical Injection Systems

   6.2.3.1. Total Annual Cost Plan A (Full Service) $ ________/Annual
   6.2.3.2. Total Monthly Cost Plan A (Full Service) $ ________/Monthly
6.2.4. "Plan B" (Time & Material) Pricing – N.U.M.C.

6.2.4.1. Normal Hourly Rate (Mon.-Fri. 8a.m.-5p.m.) $__________/Hr.

6.2.4.2. Overtime Hourly Rate (Mon.-Fri. other than 8a.m.-5p.m.) $__________/Hr.

6.2.4.3. Holiday Hourly Rate (Saturday, Sunday & Holidays) $__________/Hr.

6.2.4.4. Percent Discount From Manufacturers/Vendors List Price ______

6.2.4.5. Mark-Up Over Cost Where There Is No Mfg. List Price ______%

7. EMPLOYEE SAFETY AND HEALTH

7.1. The Vendor shall follow all applicable Federal, State and Local Environmental and Safety regulations in the performance of this contract.

7.2. The Vendor is responsible to ensure that the Vendor’s personnel observes all safety precautions and utilizes proper safety equipment while operating or using mobile and powered equipment or other tools and equipment.

7.3. The Vendor shall have a general safety plan that has been reviewed and accepted by Nassau Health Care Corporation prior to the award of this contract.
8. GENERAL REQUIREMENTS

8.1. Vendor must be licensed to do business in the County of Nassau and the State of New York.

8.2. Vendor must carry, at a minimum, one million dollars in liability insurance.

8.3. Vendor must carry all employees under workman’s compensation.

8.4. Vendor must list Nassau Health Care Corporation as a third party on their insurance policies for notification of cancellation of liability insurance or workman’s compensation insurance.

*** End Of Specifications For Part II, N.U.M.C. Location ***