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Request for Quote

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS ONE CAPITOL HILL PROVIDENCE RI 02908

> CREATION DATE: 11-APR-17 BID NUMBER: 7551549

Medical Waste Pickup & Disposal - Medical

Examiner's Office

BLANKET START: 01-JUL-17 **BLANKET END**: 30-JUN-20

BID CLOSING DATE AND TIME:11-MAY-2017 10:00:00

Н **DOH MEDICAL EXAMINER CHAPIN BLDG, 1ST FLOOR** ı Ρ 48 ORMS ST **PROVIDENCE, RI 02904**

Т US 0

BUYER: Righter, Max W PHONE #: 401-574-8179

DOA CONTROLLER

ONE CAPITOL HILL, 4TH FLOOR L L

SMITH ST

PROVIDENCE, RI 02908

т US 0

Requistion Number:

Note to Bidders: Questions regarding this solicitation must be emailed and received by the Division of Purchases at max.righter@purchasing.ri.gov no later than Thursday April 27th, 2017 at 5:00 pm (EST), in a Microsoft Word attachment with the corresponding solicitation number. Questions, if any, and responses will be posted on the Division of Purchases website at www.purchasing.ri.gov as an addendum to this solicitation.

Bids must be placed in accordance with attached 2-page bid specification sheet.

Line	Description	Quantity	Unit	Unit Price	Total
2	7/1/2017 - 6/30/2018 Removal & Disposal of all Regulated Medical Waste	7,200.00	Pound		
3	7/1/2018 - 6/30/2019 Removal & Disposal of all Regulated Medical Waste	7,200.00	Pound		
4	7/1/2019 - 6/30/2020 Removal & Disposal of all Regulated Medical Waste	7,200.00	Pound		

Delivery:	
Terms of Payment:	

GIATE O'ISLAND

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Department of Administration

DIVISION OF PURCHASES

One Capitol Hill, 2nd floor Providence, RI 02908 TEL: (401) 574-8100 FAX: (401) 574-8387 TDD: (401) 574-8228

Website: www.purchasing.ri.gov

Bid Specifications

Solicitation # 7551549

Medical Waste Pickup & Disposal – Medical Examiner's Office

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Scope / Bidding Requirements

Rhode Island Department of Health Office of State Medical Examiners Regulated Medical Waste Specifications Contract Period July 1, 2017 through June 30, 2020

Remove and dispose of all regulated medical waste (**RMW**) from the Office of the State Medical Examiners (OSME) within the Rhode Island Department of Health (**HEALTH**), in compliance with Rhode Island Department of Environmental Management (**DEM**) regulations.

The Office of State Medical Examiners generates approximately 500 to 600 pounds of RMW per month. The medical waste consists primarily of examination gloves, hospital gowns, personal protective equipment such as Tyvek suits and respirators, as well as other miscellaneous items resulting from post mortem examinations.

Specifications:

- 1. The vendor must be permitted and registered through the DEM as meeting the industry standards and/or rules and regulations governing the removal and disposal of medical waste.
- 2. The vendor must supply a full service program including packing supplies, transportation, manifesting, and legal disposal of waste.
- 3. Packing supplies must include RMW corrugated boxes (approx.. 18" x 18" x 24", 30 gallon capacity, three (3) millimeter red biohazard plastic bags (two per box), packing tape and manifest forms.
- 4. Manifest forms must be completed by the vendor, signed by the vendor and HEALTH representative upon removal from the premises. Completed manifests (after disposal) will be returned to HEALTH within the prescribed time period.

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- 5. Transportation must be provided in properly permitted/licensed trucks from HEALTH to a registered and legal disposal/incineration site. All waste must be treated in accordance with DEM, federal, and local requirements.
- 6. Consultation and education regarding regulated medical waste management must be available to HEALTH staff from the vendor, at no additional cost.
- 7. Vendor must provide HEALTH with written company policies and procedures for packaging, types of wastes permitted, labeling requirements, etc.
- 8. Vendor must serve as a liaison between HEALTH's OSME and regulatory agencies to obtain and provide accurate and up-to-date information pertaining to regulations at no additional cost.
- 9. Vendor must provide liability and environmental impairment insurance coverage in accordance with local and state laws.
- 10. RMW must be picked up by the vendor once per week at HEALTH's Office of State Medical Examiners, 48 Orms Street, Providence, RI during business hours (8:30 AM-4:00 PM, M-F).
- 11. This contract is for a period of three (3) years.
- 12. All work must be completed in a professional manner.
- 13. Bidding for services shall be on a **per-pound basis** for the duration of the contract (price/pound should be listed for each year).

Contract Terms and Conditions

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Terms and Conditions

BID STANDARD TERMS AND CONDITIONS

TERMS AND CONDITIONS FOR THIS BID

CHARGES PERMITTED

NO CHARGES OTHER THAN PARTS AND LABOR ON THE JOB - NO TRAVEL, NO MILEAGE, NO MISCELLANEOUS CHARGES, NO PORTAL TO PORTAL.

DELIVERY PER AGENCY

DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.

INSURANCE REQUIREMENTS (ADDITIONAL)

ANNUAL RENEWAL INSURANCE CERTIFICATES FOR WORKERS' COMPENSATION, PUBLIC LIABILITY, PROPERTY DAMAGE INSURANCE, AUTO INSURANCE, PROFESSIONAL LIABILITY INSURANCE (AKA ERRORS & OMISSIONS), BUILDER'S RISK INSURANCE, SCHOOL BUSING AUTO LIABILITY, ENVIRONMENTAL IMPAIRMENT (AKA POLLUTION CONTROL), VESSEL OPERATION (MARINE OR AIRCRAFT) PROTECTION & INDEMNITY, ETC., MUST BE SUBMITTED TO THE SPECIFIC AGENCY IDENTIFIED IN THE "SHIP TO" SECTION OF THE PURCHASE ORDER. CERTIFICATES ARE ANNUALLY DUE PRIOR TO THE BEGINNING OF ANY CONTRACT PERIOD BEYOND THE INITIAL TWELVE-MONTH PERIOD OF A CONTRACT. FAILURE TO PROVIDE ANNUAL INSURANCE CERTIFICATION MAY BE GROUNDS FOR CANCELLATION.

MULTI YEAR AWARD

THIS IS A MULTI-YEAR BID/CONTRACT. PER RHODE ISLAND STATE LAW 37-2-33, CONTRACT OBLIGATIONS BEYOND THE CURRENT FISCAL YEAR ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.

RIVIP INFO - ADDITIONAL BID SUBMISSION REQS - 1

This offer may not be considered unless Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

PURCHASE AGREEMENT BID

BIDDING (a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State. (b) Quantities, if any, are estimated

only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered. (c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost. (d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request. ORDERING (a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period. (b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.

Mailing Address for Bid Proposals issued by the State of Rhode Island, Division of Purchases:

All Bid Proposals must be submitted to the following address:

State of Rhode Island Department of Administration Division of Purchases, 2nd Floor One Capitol Hill Providence, RI 02908