TACOMA RAIL

ADDENDUM NO. 1    DATE:  October 3, 2023

REVISIONS TO:
RFB Specification No. TR23-0194N
Drug and Alcohol Testing

NOTICE TO ALL BIDDERS:
This addendum is issued to clarify, revise, add to or delete from, the original specification documents for the above project. This addendum, as integrated with the original specification documents, shall form the specification documents. The noted revisions shall take precedence over previously issued specification documents and shall become part of this contract.

REVISIONS TO THE SUBMITTAL DEADLINE:
The submittal deadline has been changed to 11:00 a.m., Pacific Time, Wednesday, October 11, 2023.

REVISIONS TO THE PRICE PROPOSAL PAGE:
Remove price proposal page in its entirety and replace with price proposal page marked addendum no 1:

NOTE: Acknowledge receipt of this addendum by initialing the corresponding space as indicated on the signature page. Vendors who have already submitted their bid/proposal may contact the Purchasing Division at 253-502-8468 and request return of their bid/proposal for acknowledgment and re-submittal. Or a letter acknowledging receipt of this addendum may be submitted in an envelope marked Request for Bid Specification No. TR23-0194N Drug and Alcohol Testing Addendum No.1. The City reserves the right to reject any and all bids, including, in certain circumstances, for failure to appropriately acknowledge this addendum.
To offer alternate bids, copy and submit the appropriate pages.

All prices are to be FOB Destination and be in U.S. dollars and include all associated fees. The City will not pay any additional fees, tariffs, add-ons or surcharges.

Enter the cost (Unit Price) for each item below. The unit price and total cost must be shown in the spaced provided. Total cost shall be determined by multiplying the unit price by the estimated quantity (Quantity). Unit costs shall be all-inclusive and include all components needed for the delivery of the goods and services as described in this solicitation.

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>DESCRIPTION</th>
<th>UNIT</th>
<th>On-Site Fees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Urine Specimen Collection-5 Panel Lab Based Test</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>2.</td>
<td>Alcohol Screening</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>3.</td>
<td>Alcohol Confirmation</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>4.</td>
<td>On-Site Time Fee</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>5.</td>
<td>Minimum Event Charge</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>6.</td>
<td>Lab Services - 5 panel test</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>7.</td>
<td>Medical Review Officer (MRO) Services – 5 panel test</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>8.</td>
<td>Short Notice (less than 24 hours)</td>
<td>EA</td>
<td>$___________</td>
</tr>
<tr>
<td>9.</td>
<td>After Hours (Weekends, Holidays, &amp; 6 pm – 6:50 am)</td>
<td>EA</td>
<td>$___________</td>
</tr>
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<td>------------------------------------------------------------------------------</td>
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</tr>
</tbody>
</table>
| 10.     | Excess Travel fee (Round Trip in Excess of 100 miles)                        | EA   | $_____________
| 11.     | Mileage (Based on prevailing IRS reimbursement rate)                         | EA   | $_____________

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</table>
| 12.     | Donor Refusal (after paperwork has been started)                             | EA   | $_____________
| 13.     | Cancellation Charge (if Collector is already in route for testing)           | EA   | $_____________
| 14.     | Director Observer (if different than Collector)                               | EA   | $_____________
| 15.     | Parking, Tolls, Hotel & other out of pocket expenses                          | EA   | $_____________
| 16.     | Vendor Surcharges (e.g., fuel cost driven by economy)                        | EA   | $_____________
| 17.     | FRA Mandatory Post Accident                                                  | EA   | $_____________
| 18.     | Supervisory Training                                                         | EA   | $_____________
| 19.     | Oral Fluids Testing                                                          | EA   | $_____________
| 20.     | Urine Specimen Collection-10 Panel Lab Based Test (non-DOT)                  | EA   | $_____________
| 21.     | Lab Services - 10 panel test (non-DOT)                                       | EA   | $_____________
|         | Medical Review Officer (MRO) Services – 10 panel test (non-DOT)              | EA   | $_____________
| 22.     | DOT 40.25 Background Checks                                                  | EA   | $_____________
| 23.     | Physical Exams                                                               | EA   | $_____________
25. MRO Services – Physical Exam Review  
   EA  $______________

26. 49 CFR Part 219 Policy Development  
   EA  $______________

27. Shipping (Cost +%)  
   EA  $______________

SubTotal:  $______________

Sales Tax 10.3%  $______________

TOTAL:  $______________

Note: The unit price and extended price are to be shown in the spaces provided. Extended price shall be determined by multiplying the unit price by the quantity.

A. Prompt Payment Discount _____% _____ days, net 30. 
Payment discount periods of 20 calendar days or more will be considered in determining lowest responsive bid.

B. Does your firm accept payment by EFT/ACH? ___Y ___N 
(Electronic Funds Transfer (EFT) by Automated Clearing House (ACH))

C. Does your firm accept payment by Visa credit card? ___Y ___N 
NOTE: The City of Tacoma will not accept price changes or pay additional fees when a credit card is used.

D. Successful Bidder will deliver materials within _________ days from receipt of order.

E. Most Favorable Prices and Terms 
   1. All prices, terms and benefits offered are equal to or better than the equivalent prices, terms and benefits being offered by Respondent to any other state or local government unit or commercial customer. 
      ___Y ___N

   2. If any contract, agreement or arrangement for comparable products and volumes provides lower prices, more favorable terms or greater benefits to any other government unit or commercial customer, during the term of this Contract, this Contract shall thereupon be deemed amended to provide the same or better prices, terms and benefits to the City. 
      ___Y ___N
F. Small Business Enterprise (SBE)

Is your firm a certified City of Tacoma Small Business Enterprise?

____Y   ____N

Is your firm partnering with, or subcontracting to, a certified City of Tacoma Small Business Enterprise?

____Y   ____N

G. Minority and Women’s Business Enterprise (MWBE)

Is your firm a minority/woman owned firm certified with the Washington State Office of Minority and Women’s Business Enterprises?

____Y   ____N

Is your firm partnering with, or subcontracting to, a minority/woman owned firm certified with the Washington State Office of Minority and Women’s Business Enterprises?

____Y   ____N

H. Respondent’s statement of warranty terms. Provide details of warranty coverage, including whether provided by manufacturer or Respondent. Provide additional pages if needed.

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

*NOTE: The City cannot legally accept a substantial deviation from the Specification. Bids/Proposals containing any substantial deviation will be rejected as non-responsive. If you state exception “IS NOT” taken to this Specification, but include statements or attach materials deviating from the standards established by this Specification, it is agreed that you will perform according to the highest standard indicated in this Specification.