



## MARQUETTE TOWNSHIP FIRE DEPARTMENT

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### Marquette Township Fire Rescue

#### Seeks Proposals for the purchase of the following

**Scott Air-Pak x3 Pro Self Contained Breathing Apparatus and Related Equipment.**

**One NSC E#-7.5-A6, 3 stage air compressor with 6 NSC 6000psi air cylinders installed.**

The Marquette Township Fire Rescue seeks proposals to purchase 15 Scott Air-Pak x3 Pro Self Contained Breathing Apparatus (SCBA) and related equipment.

The successful proposal must be a factory-authorized distributor authorized to sell the equipment specified herein and provide written proof from the manufacturer.

#### GENERAL SPECIFICATIONS

SCBA - must comply with the NFPA 1981 Standard, 2019 Edition

Integrated PASS device - must comply with the NFPA 1982 Standard, 2018 Edition

Must be most current design

Mask mounted regulator

Voice amplification capability

4500 psi, 45 minute carbon fiber cylinders (Must be less than 60 days old at time of delivery)

Snap Chang Cylinder Connection

Integrated Drag Loop

Remote airline capability

## **WARRANTY**

Must include a life time, as long as we own it warranty. A copy of the warranty shall be included in the proposal. If a periodic overhaul is required to keep the warranty in effect, include the cost of the overhaul in the proposal. This shall be shown as a separate item. If no overhaul is needed, a letter from the **MANUFACTURER (NOT THE LOCAL DEALER)** must be included in the proposal stating this condition.

## **ADDITIONAL REQUIREMENTS**

The successful proposal shall work with the Fire Department to insure the equipment purchased, all supporting paperwork, and all documentation meets the requirements of the Assistance to Firefighter's Grant program. The proposal **MUST** include a statement, signed by the proposal, stating their agreement with this requirement.

All SCBA components will be NIOSH approved to the current standard at the time of the bid opening. No exceptions.

The proposal shall be an authorized sales and service center for the product bid. Written documentation must be provided from the manufacturer as proof.

The successful proposal shall prepare the equipment for operation including but not limited to the installation of batteries, attachment of brackets, and filling of cylinders.

The successful proposal shall provide basic operations/orientation training classes to all members of the department. A description of how this training will be performed shall be included in the proposal.

The successful proposal shall provide a field level maintenance training class to fourteen (6) members of the department. An explanation of how this will be done shall be included in the proposal.

The bid shall include a description of the batteries used by the SCBA. The description shall include the size of battery, recommended battery manufacturer, estimated battery life before the battery needs to be changed, and how the battery is used in the SCBA.

The SCBA shall have the capability of utilizing 4500 psi pressured cylinders in durations of 30 minute, 45 minute, or 60 minute bottles.

NxG CGA – the cylinder shall attach to the harness by way of an NxG Snap Change Connection.

CGA The cylinder shall be refillable with a CGA thread

Cylinders shall not require hydrostatic testing for not less than 5 year intervals

Each console will display the SCBA wearer's HUD status on the front of the console. Status shall also displayed 360 degrees so that it may be seen by personnel other than the firefighter themselves.

Before delivering the SCBA to the department, a function test shall be performed on the SCBA. This shall be a complete function test; not just a flow test. This is to insure the SCBA are in complete operating order when delivered. Upon delivery, a copy of the computer generated report shall be provided with each unit to verify the units are in optimum functioning condition. A sample copy of the report shall be included with each proposal.

The bid shall include certification documents that the units bid meet current NIOSH and NFPA standards.

The bid shall contain a complete description of how warranty and/or service work will be accomplished.

Delivery off all air paks shall be within 10 weeks of award of contract

The bid shall include all delivery and/or freight costs.

Failure to include any of this requested information is grounds to have bid disqualified.

**MARQUETTE TOWNSHIP FIRE RESCUE**

**BID REQUIREMENT QUESTIONNAIRE**

The following questionnaire must be completed and submitted with bid proposals. ANY VENDOR WHO FAILS TO ANSWER THE QUESTIONNAIRE WILL BE DISQUALIFIED AND DEEMED NON-RESPONSIVE.

1. How many years has your company been selling and servicing SCBA equipment in the State of Michigan/Wisconsin? \_\_\_\_\_

2. How many years has your company been an authorized distributor of the SCBA product that you are bidding? \_\_\_\_\_

3. How many certified service technicians does your company employ to support the product line being bid? \_\_\_\_\_

4. Are your service technicians available for on-site mobile field services? \_\_\_\_\_

Is there any service call charges associated with this service? \_\_\_\_\_

If so, what is the cost of the on-site mobile service call? \_\_\_\_\_

What is the maximum response time to the Marquette Township Fire Rescue? \_\_\_\_\_

5. How many mobile service vehicles does your company have? \_\_\_\_\_

6. Proposals shall submit a copy of the service technician's certificate showing that the technician is certified to make repairs to the product being bid.

7. **ALL SCBA SHALL** be delivered with a current **FUNCTIONAL FLOW TEST RECORD** from the successful **Proposal**. Flow test records from the manufacturer are **NOT ACCEPTABLE**.

8. All delivered SCBA shall have all batteries installed, current flow test sticker and be ready for installation for in-service requirements.

9. SCBA cylinders being furnished shall have a manufacturing date within **sixty (60) days of delivery**.

**Please provide pricing on the following equipment:**

- 15 Scott Air-Pak x3 Pro Self-Contained Breathing Apparatus complete with Full Face Piece Assembly (final size of masks to be determined after fit testing). Must be able to accept a NxG snap change cylinder, AV-3000HT face mask with a 4 strap Kevlar head harness, regulator, harness assembly, 4500 psi/45 minute carbon cylinders with NxG snap change valves, remote airline capability, and integrated PASS device.
- 15 Additional 4500 psi/45 minute carbon cylinders with NxG Snap Change valves.
- Please provide an optional price to perform an annual function test on the SCBA for five years after the initial function test.
- One NSC E3-7.5-A6, 3 stage air compressor and 6 NSC 6000psi cylinders installed

**POINT OF CONTACT**

If you have any questions concerning the above specifications, please submit them in writing to Marquette Township Fire Rescue, Chief Dan Shanahan by email at [dans@marquettetownship.org](mailto:dans@marquettetownship.org). Requests for information must be received by February 20, 2020 at 3:00 p.m.

**REJECTION OF PROPOSALS**

The Charter Township of Marquette reserves the right to reject any or all proposals, to negotiate with one or more parties, or to award the contract in the Townships' best interests, including proposed contractor's schedule. The Township reserves the right to re-advertise for additional proposals and to extend the deadline for submission of the proposals.

Sealed proposals for the Scott X3 SCBA and associated equipment described above shall be received at Marquette Township Fire Rescue, Chief Dan Shanahan at 1000 Commerce Drive Marquette, Michigan 49855 until 3:00 p.m. on February 20, 2019.

**PROPOSAL EVALUATION**

Proposals will be reviewed and evaluated by Department staff based on the information provided in the proposal. Additional information may be requested prior to final selection. It is anticipated that a decision will be made within 7 days of the due date.

**THIS FORM MUST BE COMPLETED FOR THE BID TO BE ACCEPTED. IF NOT COMPLETED, THE BID WILL BE CONSIDERED NON-RESPONSIVE AND NOT CONSIDERED.**

MANUFACTURER (s): \_\_\_\_\_

TOTAL BID PRICE: \_\_\_\_\_

Proposal Name: \_\_\_\_\_

Person Submitting Bid: \_\_\_\_\_

Signature: \_\_\_\_\_

Proposal Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_