



**TARRANT COUNTY
PURCHASING DEPARTMENT**

JACK BEACHAM, C.P.M.
PURCHASING AGENT

ROY EDWARDS, C.P.M.
ASSISTANT

December 12, 2003

ADDENDUM #1

BID NO. 2004-025

**ANNUAL CONTRACT FOR INDUSTRIAL AND MEDICAL GASES AND CYLINDERS
(LABORATORY, WELDING, AND EQUIPMENT)**

BIDS DUE DECEMBER 22, 2003

1. *Change:*

The due date for this bid has been changed to December 22, 2003 at 2:00 p.m.

2. *Change:*

Discard pages 3, 12, 18, 19, & 20 of the original specification package and replace with the revised pages.

This addendum must be signed and returned with your bid.

NAME AND ADDRESS OF COMPANY:

AUTHORIZED REPRESENTATIVE:

Signature _____
Name _____
Title _____
Tel. No. _____

Fax No. _____

**ANNUAL CONTRACT FOR INDUSTRIAL AND MEDICAL GASES AND CYLINDERS
(LABORATORY, WELDING, AND EQUIPMENT)**

Tarrant County is requesting bids for the **ANNUAL CONTRACT FOR INDUSTRIAL AND MEDICAL GASES AND CYLINDERS (LABORATORY, WELDING, AND EQUIPMENT)** for **VARIOUS COUNTY DEPARTMENTS**. All bids must be submitted on the attached Bid Proposal Form. Vendors may bid on any or all sections, but must bid on every item in any one section. Award will be based per section totals for Columns C & D. Tarrant County will not enter into any contract where the cost is provisional upon such clauses as "escalator" or "cost-plus" clauses.

All **insurance requirements**, including Workers' Compensation as outlined in the Texas State Statutes, shall be met prior to any delivery and shall remain in effect during the life of this contract.

All bids shall specify terms and conditions of payment which will be considered as part of, but not control, the award of bid. County review, inspection, and processing procedures ordinarily require thirty (30) days after receipt of invoice, materials, or service. Bids which call for payment before thirty (30) days from receipt of invoice, or cash discounts given on such payment, will be considered only if, in the opinion of the Purchasing Agent, the review, inspection, and processing procedures can be completed as specified.

Invoices shall be sent directly to the Tarrant County Auditor's Office, Attention: Accounts Payable, 100 East Weatherford, Room 506, Fort Worth, Texas 76196. It is the intention of Tarrant County to make payment on completed orders within thirty days after receipt of invoice or items; whichever is later, unless unusual circumstances arise. **Invoices must be fully documented as to labor, materials, and equipment provided and must reference the Tarrant County Purchase Order Number in order to be processed. No payments shall be made on invoices not listing a Purchase Order Number.**

Continuing non-performance of the vendor in terms of Specifications shall be a basis for the termination of the contract by the County. The County shall not pay for work, equipment, or supplies which are unsatisfactory. Vendors will be given a reasonable opportunity before termination to correct the deficiencies. This, however, shall in no way be construed as negating the basis for termination for non-performance.

The **contract may be terminated** by either party upon written thirty (30) days notice prior to cancellation.

Bids will be considered irregular if they show any omissions, alteration of form, additions or conditions not called for, or irregularities of any kind. However, Tarrant County reserves the right to waive any irregularities and to make award in the best interest of the County.

Tarrant County reserves the right to accept or reject in part or in whole any bids submitted, and to waive any technicalities for the best interest of the County. Bids may be rejected, among other reasons, for any of the following specific reasons:

1. Bids received after the time limit for receiving bids.
2. Bids containing any irregularities.
3. Unbalanced value of any items.

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Evaluation criteria shall include, but is not limited to the following:

- a. Unit Price and Cylinder Daily Rental Rate
- b. Delivery
- c. Vendor's past performance record with Tarrant County
- d. Tarrant County's evaluation of vendor's ability to perform
- e. Tarrant County's experience with products bid
- f. Special needs and requirements of Tarrant County
- g. Vendor's agreement to extend pricing under this contract to other governmental entities

Quantities indicated on the Bid Proposal Forms are estimates based upon the best available information. The County reserves the right to increase or decrease the quantities to meet its actual needs without any adjustments in the bid price.

Any **catalog, brand name or manufacturer's reference** used is considered to be descriptive -- not restrictive -- and is indicative of the type and quality the County desires to purchase. Bids on similar items of like quality will be considered if the bid is noted and fully descriptive brochures are enclosed. If notation of substitution is not made, it is assumed vendor is bidding item specified. Successful vendor will not be allowed to make unauthorized substitutions after award.

**ANNUAL CONTRACT FOR INDUSTRIAL AND MEDICAL GASES
(LABORATORY, WELDING, AND EQUIPMENT)**

BID PROPOSAL

SECTION I: INDUSTRIAL GASES

DESCRIPTION	UNIT SIZE	(A) CYLINDER SIZE REQ.	(B) VENDOR AVAILABLE CYLINDER SIZE	(C) DAILY RATE CYLINDER RENTAL	(D) REFILL PRICE PER UNIT
1. Liquid Nitrogen, 180 Liter, dewar	Liter				
2. Liquid Nitrogen, 35 Liter	Liter				
3. Zero Helium, 330 Cu. Ft., Size A	Cu. Ft.				
4. Zero Hydrogen, 330 Cu. Ft., Size A	Cu. Ft.				
5. Ultra Pure Helium, 330 Cu. Ft. Size A	Cu. Ft.				
6. Oxygen, 281 Cu. Ft.	Cu. Ft.				
7. Oxygen, 125 Cu. Ft.	Cu. Ft.				
8. Acetylene, 147 Cu. Ft.	Cu. Ft.				
9. Nitrogen, 255 Cu. Ft.	Cu. Ft.				
10. Argon, 380 Cu. Ft.	Cu. Ft.				
11. Argon, 330 Cu. Ft.	Cu. Ft.				
12. MXI Compressed Gas, 75 Argon, 25 CO2	Cu. Ft.				
TOTAL SECTION I, COLUMNS C & D :					

13. Hazmat Charge Per Trip, Section I \$ _____

14. Guaranteed Response Time, Section I _____ Hrs. After Receipt of Order

Unit Price bid must include inside delivery and return charges.

**ANNUAL CONTRACT FOR INDUSTRIAL AND MEDICAL GASES
(LABORATORY, WELDING, AND EQUIPMENT)**

BID PROPOSAL

SECTION II: MEDICAL GASES

DESCRIPTION	UNIT SIZE	(A) CYLINDER SIZE REQ.	(B) VENDOR AVAILABLE CYLINDER SIZE	(C) DAILY RATE CYLINDER RENTAL	(D) REFILL PRICE PER UNIT
1. Oxygen, 160 Liters, Size D	Liter				
2. Oxygen, 180 Liters, Size E	Liter				
3. Carbon Dioxide, 50 lb.	Lb.				
TOTAL SECTION II, COLUMNS C & D :					

4. Hazmat Charge Per Trip, Section II \$ _____

5. Gurananteed Response Time, Section II _____ Hrs. After Receipt of Order

Unit Price bid must include inside delivery and return charges.

**ANNUAL CONTRACT FOR INDUSTRIAL AND MEDICAL GASES
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ESTIMATED ANNUAL REQUIREMENTS, PER DEPARTMENT

Gas Type / Size	Public Health	Precinct 1	Precinct 2	Precinct 3	Precinct 4	Central Garage	Medical Examiner
<u>Industrial Gases</u>							
Liquid Nitrogen, 180 Liter							12
Liquid Nitrogen, 35 Liter	2						
Zero Helium, 330 Cu. Ft., Size A							25
Zero Hydrogen, 330 Cu. Ft., Size A							15
Ultra Pure Helium, 330 Cu. Ft. Size A							16
Oxygen, 281 Cu. Ft.		96	21		20		
Oxygen, 125 Cu. Ft.		24		12		24	
Acetylene, 147 Cu. Ft.		48	21	12	20	24	
Nitrogen, 255 Cu. Ft.		12	3				
Argon, 380 Cu. Ft.			6				
Argon, 330 Cu. Ft.							4
MXI Compressed Gas, 75 Argon, 25 CO2		24					
<u>Medical Gases</u>							
Oxygen, 160 Liters, Size D	9						
Oxygen, 180 Liters, Size E	9						
Carbon Dioxide, 50 lb.	36						