



**TOWN OF RIVERHEAD**  
*Sean M. Walter, Supervisor*  
**200 Howell Avenue**  
**Riverhead, New York 11901-2596**  
**631-727-3200**

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## **ADDENDUM No. 2**

**BID #1600001**

**TOWN OF RIVERHEAD**

**20 PASSENGER HANDICAP ACCESSIBLE BUS**

**SEE PHOTO ON PAGE 3\***

Please note that this is the second addendum to the Bid for Passenger Handicap Accessible Bus and that to the extent that there are inconsistencies between the Bid Specifications, Addendum No. 1 and this Addendum (Addendum No. 2), the corrections and clarifications set forth in this Addendum No. 2 shall supersede and prevail as the bid specifications and shall hereby be made a part of the Contract Documents of the above bid for the Town of Riverhead.

The Town seeks to make the following additional corrections and clarifications to the bid specifications:

### Corrections

- The Town requires a Model E-450 chassis and as such manufacturer's specifications make available either a 5.4 Liter or 6.8 Liter engine. \*The Bidder may bid and provide pricing for the bus with either the 5.4 Liter engine or 6.8 Liter or both. (See bid sheets annexed and made part of this Addendum No. 2) Note, while reference is made to a Model E-450 manufactured by Ford as set forth in the bid specifications the Town will consider all bids submitted with "equal" substitutes as to manufacturer and components.
- The Town requires and deems necessary a rear for both passenger comfort and safety as it will act as another emergency exit in the event of an accident. (See photographs annexed hereto)

### Clarifications:

- The Town has labeled the Bid as "20 Passenger Handicap Accessible Bus" due to \*passenger capacity, size (dimensions), and projected costs for purchase based upon the specifications to meet the requirements for the intended use. As this bus will be used

predominately for programs through the Town's Senior Department, the Town requires a minimum one wheelchair securement location but prefers two wheelchair securement locations. \*It is the Town's understanding and acceptance that each wheelchair location may reduce the passenger capacity by either one to two passengers. The Bidder may bid and provide pricing for the bus with one wheelchair securement location or two wheelchair securement locations or both. (See bid sheets annexed and made part of this Addendum No. 2)

- Notwithstanding anything the above, the bus must meet all New York State Department of Transportation Bus & Passenger Vehicle Regulations and must meet ADA Requirements and meet all such other applicable laws and requirements. (Below identifies some of the applicable New York and ADA regulations.

### **New York State Department of Transportation Bus & Passenger Vehicle Regulations**

- Padded Stanchions
- Plexiglas behind driver
- White Standee Line & sign
- Anti-Ride rear bumper
- Buzzer on wheelchair door if equipped
- Red Lights over Egress Windows
- Additional drive shaft guard
- Special entry door modesty panel
- 2 egress windows per side of bus
- Modesty panel at wheelchair lift (extend from floor to ceiling)
- 2" red light over ear door
- Install MCL-57RB red light over driver activated if wheelchair door is not secure (must be activated by door rod)

### **ADA Requirements**

The following minimum requirements has been established by the American with Disabilities Act (ADA) of 1990 regarding the transportation of handicapped passengers.

### **Demand Response Requirements**

- Para transit lift door (mounted behind entrance door on rear passenger side)
- Wheelchair lift 30" to 48" with side handrails, front and rear barriers, and stow lock
- Transmission interlock system
- All ADA decals
  - Priority Seating sign
  - Wheelchair Decal (international Symbol of Accessibility)- see in photo attached
- Interior light in lift area

- Exterior light in lift area
- Overhead handrail – seen in attached photo
- Forward-facing wheelchair restraint

**Fixed Route Requirements**

- All of the above demand response requirements
- Public address system
- Signal system
- Route signs on both front and curb side

**This Addendum No. 2 for the 20 PASSENGER HANDICAP ACCESSIBLE BUS\* does not change the bid due date. Bids must be received by the Town of Riverhead in the Office of the Town Clerk, 200 Howell Avenue, Riverhead, New York, on or before 2:00 p.m. on FEBRUARY 16, 2016 at which time they will be publicly opened and read aloud.**



**As per Addendum No. 2 Bid Sheet**

<p align="center"><b>Manufacturer's Name &amp; Model # of Items Offered</b></p> <p align="center"><b><u>PASSENGER HANDICAP BUS</u></b> <b><u>With one wheelchair securement</u></b> <b><u>location</u></b></p> <p>Name: _____</p> <p>Model #: _____ Engine# _____</p>	<p align="center"><b>Model Year</b></p> <p align="center">_____</p>
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**\*\*Delivery Charges MUST be Included in total Price\*\***

**Unit Price Written in Numerical Form for Model # \_\_\_\_\_**  
**Engine# \_\_\_\_\_ : \$ \_\_\_\_\_**

**Unit Price Written in Words:**

*If Bidder seeks to bid using alternate engine type, please complete below*

**Unit Price Written in Numerical Form for Model # \_\_\_\_\_**  
**Engine# \_\_\_\_\_ : \$ \_\_\_\_\_**

**Unit Price Written in Words:**

<p align="center"><b>Manufacturer's Warranty/ Guarantee</b></p> <p align="center">_____ Months</p>	<p align="center"><b>Days to Delivery After Receipt of Purchase Order</b></p> <p align="center">_____ Days</p>
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1) Please list any suggested options with associated pricing.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2) Please list the name and address of the location where the Town may obtain full factory parts and service.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3) Does the item your firm proposes have any Alternatives to the Minimum requirements? If yes, please list below. If no, enter N/A.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

After the award of the bid, the placing of an order by the Purchasing Agent of the TOWN OF RIVERHEAD, with the bidder for the supplies and/or services herein described, shall be deemed an acceptance of this proposal, and shall constitute a contract between the TOWN OF RIVERHEAD, and the bidder for supplying the supplies and/or services herein described in accordance with the terms of this proposal and at the prices named herein.

AUTHORIZED SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

**ACKNOWLEDGMENT**

STATE OF NEW YORK, COUNTY OF \_\_\_\_\_) ss.:

On the \_\_\_\_ day of \_\_\_\_\_ in the year 2014 before me, the undersigned, personally appeared, \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
 NOTARY PUBLIC

Vendor Name \_\_\_\_\_

**As per Addendum No. 2 Bid Sheet**

<p align="center"><b>Manufacturer's Name &amp; Model # of Items Offered</b></p> <p align="center"><b><u>PASSENGER HANDICAP BUS</u></b> <b><u>With two wheelchair securement</u></b> <b><u>locations</u></b></p> <p>Name: _____</p> <p>Model #: _____ Engine# _____</p>	<p align="center"><b>Model Year</b></p> <p align="center">_____</p>
<p><b>**Delivery Charges MUST be Included in total Price**</b></p> <p><b>Unit Price Written in Numerical Form for Model # _____</b> <b>Engine# _____ : \$ _____</b></p> <p><b>Unit Price Written in Words:</b></p> <p><i>If Bidder seeks to bid using alternate engine type, please complete below</i></p> <p><b>Unit Price Written in Numerical Form for Model # _____</b> <b>Engine# _____ : \$ _____</b></p> <p><b>Unit Price Written in Words:</b></p>	
<p align="center"><b>Manufacturer's Warranty/ Guarantee</b></p> <p align="center">_____ Months</p>	<p align="center"><b>Days to Delivery After Receipt of Purchase Order</b></p> <p align="center">_____ Days</p>

1) Please list any suggested options with associated pricing.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) Please list the name and address of the location where the Town may obtain full factory parts and service.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Does the item your firm proposes have any Alternatives to the Minimum requirements? If yes, please list below. If no, enter N/A.

\_\_\_\_\_  
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\_\_\_\_\_

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AUTHORIZED SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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\_\_\_\_\_  
NOTARY PUBLIC

Vendor Name: \_\_\_\_\_