



State of West Virginia  
Department of Administration  
Purchasing Division  
2019 Washington Street East  
Post Office Box 50130  
Charleston, WV 25305-0130

## Solicitation

NUMBER
MCH13057

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
ROBERTA WAGNER 304-558-0067

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Vendor #709022745  
Brechtbuhler Scales, Inc.  
526 31<sup>st</sup> Street  
Parkersburg, WV 26101

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HEALTH AND HUMAN RESOURCES  
BPH - MATERNAL & CHILD HEALTH  
VARIOUS LOCALES AS INDICATED

DATE PRINTED
11/21/2012

BID OPENING DATE:

11/29/2012

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 1						
1. TO ADD THE PURCHASING AFFIDAVIT AND THE VENDOR PREFERENCE CERTIFICATE INADVERTENTLY LEFT OF THE ORIGINAL SOLICITATION.						
2. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR BID.						
END OF ADDENDUM NO. 1						
11/28/12 11:25:17 AM West Virginia Purchasing Division						
0001	14	EA		475-00-99-001	\$1,790.49	25,066.86
DETECTO 6550 FOLDING PORTABLE WHEELCHAIR SCALES OR						
Doran DS9100 Wheelchair Scale - compares to the Detecto 6550 Wheelchair Scale See enclosed specifications sheet						
0002	1	JB		962-24-00-000	\$251.47	2,766.17
SHIPPING CHARGES						

SIGNATURE	TELEPHONE	DATE
<i>Susan Wright</i>	304-428-1792	11-27-12
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE
Office Manager	34-0858812	

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELLED "MEMORANDUM"



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HEALTH AND HUMAN RESOURCES  
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VARIOUS LOCALES AS INDICATED

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0001	14	EA		475-00-99-001	\$1,790.49	\$25,066.86
DETECTO 6550 FOLDING PORTABLE WHEELCHAIR SCALES OR EQUAL						
Doran DS9100 Wheelchair Scale - compares to the Detecto 6550 Wheelchair Scale See enclosed specifications sheet						
0002	1	JB		962-24-00-000	\$251.47	\$2,766.17
SHIPPING CHARGES						
TO ESTABLISH A CONTRACT FOR THE ONE TIME PURCHASE OF 14 DETECTO 6550 FOLDING WHEELCHAIR SCALES OR EQUAL FOR THE OFFICE OF MATERNAL, CHILD AND FAMILY HEALTH TO BE DROP SHIPPED TO 11 NUTRITION CLINICS STAFFED BY REGISTERED DIETICIANS PER THE ATTACHED SPECIFICATIONS.						
THE MODEL/BRAND/SPECIFICATIONS NAMED HEREIN ESTABLISH THE ACCEPTABLE LEVEL OF QUALITY ONLY AND ARE NOT INTENDED TO REFLECT A PREFERENCE OR FAVOR ANY PARTICULAR BRAND OR VENDOR. VENDORS WHO ARE BIDDING ALTERNATES SHOULD SO STATE AND INCLUDE PERTINENT LITERATURE AND SPECIFICATIONS. FAILURE TO PROVIDE INFORMATION FOR ANY ALTERNATES MAY BE GROUNDS FOR REJECTION OF THE BID. THE STATE RESERVES THE RIGHT TO WAIVE MINOR IRREGULARITIES IN BIDS OR SPECIFICATION IN ACCORDANCE WITH SECTION 148-1-4(F) OF THE WEST VIRGINIA LEGISLATIVE RULES AND REGULATIONS.						

SIGNATURE

*Susan Wright*

TELEPHONE

304-428-1792

DATE

11-27-12

TITLE

Office Manager

FEIN

34-0858812

ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

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EXHIBIT A				
COST SHEET FOR MCH13057				
ITEM	QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
1	14	Doran DS9100 Wheelchair Scale PORTABLE WHEELCHAIR SCALES	\$1,790.49	
2	1	DROP SHIP CHARGE TO 11 LOCATIONS	\$251.47	
TOTAL COST				\$27,833.03

THIS WILL BE A ONE-TIME PURCHASE OF FOLDING PORTABLE WHEELCHAIR SCALES, WITH DROP SHIP CHARGES TO THE ELEVEN (11) LOCATIONS THAT WILL RECEIVE THE SCALES. INSIDE DELIVERY IS REQUIRED AT THE ELEVEN (11) LOCATIONS. PRODUCT MUST BE SHIPPED F.O.B. DESTINATION, ACCORDING TO MANUFACTURER'S SPECIFICATIONS.

EVALUATION OF BIDS WILL BE BASED ON TOTAL COST AND AWARD WILL BE MADE TO THE LOWEST BID WHICH MEETS SPECIFICATIONS.

VENDOR NAME: Vendor #709022745  
Brechtbuhler Scales, Inc.

VENDOR ADDRESS: 526 31<sup>st</sup> Street  
Parkersburg, WV 26101

VENDOR TELEPHONE: 304-428-1792

VENDOR FAX NUMBER: 304-428-7461

EMAIL ADDRESS: SWright@bscales.com

REMIT TO ADDRESS: 526 31<sup>st</sup> Street  
Parkersburg, WV 26101

PRINTED NAME: Susan Wright

SIGNATURE: Susan Wright

DATE: 11-27-12



# Wheelchair Scale

## Model DS9100

The ultimate in versatility, the heavy-duty DS9100 can serve as a wheelchair scale as well as a handrail or stand-on scale – all in a compact, portable design. The 1,000 lb capacity scale platform is large enough to accommodate any wheelchair, including bariatric wheelchairs. When the patient is on the scale, the ramp does not touch the floor, ensuring that an accurate weight is displayed.

### MAXIMUM CAPACITY

1000 x 0.1 lb (454 x 0.05 kg)

### ACCURACY

+/- 0.1 lb (0.05 kg)

### PLATFORM SIZE

33" W x 32.5" D x 3" H

### SCALE DIMENSIONS - RAMP EXTENDED

49" W x 42" D x 45.5" H

### DISPLAY

1" High LCD

### OPTIONS

RS-232 or USB Communications,  
Second Ramp, and AC Adapter

### BMI CALCULATOR

Input data in FT/IN or CM

### POWER

Six AA Batteries (Included)

### BATTERY LIFE

Two Years

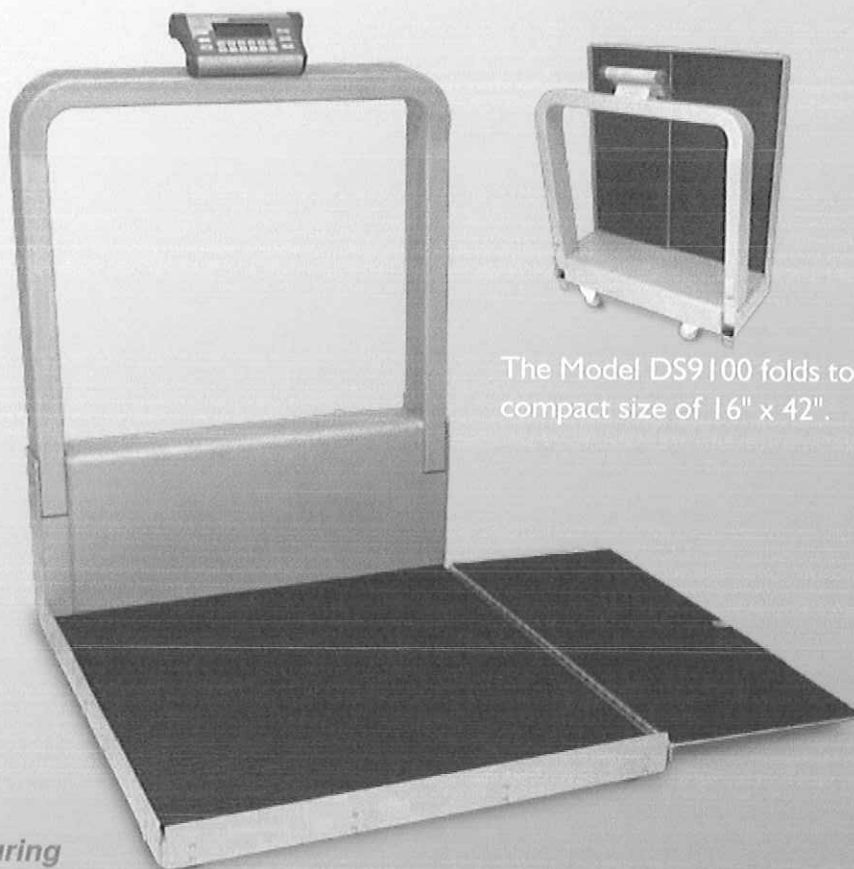
### CONSTRUCTION

Aluminum and Mild Steel Construction  
with Plastic Trim

### WARRANTY

Three Years

The wheelchair tare memory function can store and recall the weights of up to 10 different wheelchairs, eliminating hand calculations to determine the patient's weight. In addition, you can simply enter the tare weight of wheelchairs through the numeric keypad.



The Model DS9100 folds to a compact size of 16" x 42".



Featuring  
**Motion Lock**  
Technology

Entering up to 10 wheelchair  
tare weights is easy with the  
numeric keypad





**SOLICITATION NUMBER: MCH13057****Addendum Number: 1**

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The purpose of this addendum is to modify the solicitation identified as MCH13057 ("Solicitation") to reflect the change(s) identified and described below.

**Applicable Addendum Category:**

- ☐ Modify bid opening date and time
- ☐ Modify specifications of product or service being sought
- ☐ Attachment of vendor questions and responses
- ☐ Attachment of pre-bid sign-in sheet
- ☐ Correction of error
- ☒ Other

**Description of Modification to Solicitation:** See attached

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

**Terms and Conditions:**

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

STATE OF WEST VIRGINIA  
Purchasing Division**PURCHASING AFFIDAVIT**

**MANDATE:** Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

**DEFINITIONS:**

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

**AFFIRMATION:** By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

**WITNESS THE FOLLOWING SIGNATURE:**Vendor's Name: Brechbuhler ScalesAuthorized Signature: Susan Wright Date: 11-27-12State of W. Va.County of Wood, to-wit:Taken, subscribed, and sworn to before me this 27th day of November, 2012My Commission expires 4/15, 2021.NOTARY PUBLIC Barbara Radiker



**VENDOR PREFERENCE CERTIFICATE**

Certification and application\* is hereby made for Preference in accordance with *West Virginia Code*, §5A-3-37. (Does not apply to construction contracts). *West Virginia Code*, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the *West Virginia Code*. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

1. **Application is made for 2.5% resident vendor preference for the reason checked:**  
☐ Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,  
☐ Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,  
☐ Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2. **Application is made for 2.5% resident vendor preference for the reason checked:**  
☐ Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
3. **Application is made for 2.5% resident vendor preference for the reason checked:**  
☐ Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
4. **Application is made for 5% resident vendor preference for the reason checked:**  
☐ Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5. **Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:**  
☐ Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
6. **Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:**  
☐ Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
7. **Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with *West Virginia Code* §5A-3-59 and *West Virginia Code of State Rules*.**  
☐ Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Under penalty of law for false swearing (*West Virginia Code*, §61-5-3), Bidder hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: Brechbuhler Scales

Signed: Sharon Wright

Date: 11-27-12

Title: Office Manager

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: MCH13057**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**

(Check the box next to each addendum received)

<input checked="" type="checkbox"/> Addendum No. 1	<input type="checkbox"/> Addendum No. 6
<input type="checkbox"/> Addendum No. 2	<input type="checkbox"/> Addendum No. 7
<input type="checkbox"/> Addendum No. 3	<input type="checkbox"/> Addendum No. 8
<input type="checkbox"/> Addendum No. 4	<input type="checkbox"/> Addendum No. 9
<input type="checkbox"/> Addendum No. 5	<input type="checkbox"/> Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Brechbuhler Scales

Company

Lusan Wright

Authorized Signature

11-27-12

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.  
 Revised 6/8/2012

CERTIFICATION AND SIGNATURE PAGE

By signing below, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid or proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

Breehbuhler Scales, Inc.  
(Company)

Susan Wright  
(Authorized Signature)

Susan Wright, Office Manager  
(Representative Name, Title)

304-428-1792      304-428-7401  
(Phone Number)      (Fax Number)

11-27-12  
(Date)

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 Company

Susan Wright  
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