



**SEDGWICK COUNTY, KANSAS**  
***DIVISION OF FINANCE***

**PURCHASING DEPARTMENT**

525 N. Main, Suite 823 ~ Wichita, KS 67203

Phone: 316 660-7255 Fax: 316 383-7055

<http://sedgwickcounty.org/finance/purchasing.asp>

**REQUEST FOR PROPOSAL**

**#16-0066**

**CAPILLARY ELECTROPHORESIS INSTRUMENT (GENETIC ANALYZER)**

June 16, 2016

**PURPOSE**

Sedgwick County, Kansas, will be accepting proposals for a Capillary Electrophoresis Instrument. It is anticipated that an official contract or purchase order will be issued after Board of County Commission approval of the recommended proposal. It should be noted, however, that the County cannot guarantee the purchase of services/products described herein.

**SUBMITTALS**

Carefully review this Request for Proposal. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate, submit one (1) complete original and one (1) electronic copy (CD or USB) of the Proposal Response Form with any supplementary materials to:

ATTN: Kara Kingsley  
Sedgwick County Purchasing Department  
525 N. Main St., Suite 823  
Wichita, KS 67203

SUBMITTALS are due NO LATER THAN 1:45 p.m., CDT, Tuesday June 28, 2016. Responses must be sealed and marked on the lower left-hand corner with the firm name and address, Proposal number, and Proposal due date. Late or incomplete responses will not be accepted and will not receive consideration for final award.

Proposal responses will be acknowledged and read into record at bid opening which will occur at 2:00 p.m.CDT, on the due date.

**QUESTIONS AND CLARIFICATIONS**

All requests for clarifications of the RFP process and document content should be directed to Kara Kingsley at email [kara.kingsley@sedgwick.gov](mailto:kara.kingsley@sedgwick.gov). Questions are due **in writing** no later than 5 p.m. CDT on June 20, 2016. Any questions of a substantive nature will be responded to in addendum form to be sent to all vendors no later than 5 p.m. CDT on June 21, 2016.

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Kara Kingsley  
Purchasing Agent

*RFP #16-0066*

*Sedgwick County... Working for you*

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## 1. About this Document

This document is a Request for Proposal. It differs from a Request for Bid or Quotation in that the County is seeking a solution, as described on the cover page and in the following background information section, not a bid or quotation meeting firm specifications for the lowest price. As such, the lowest price proposed will not guarantee an award recommendation. As defined in Charter Resolution No. 65, Competitive Sealed Proposals will be evaluated based upon criteria formulated around the most important features of the product(s) and/or service(s), of which quality, testing, references, service, availability or capability, may be overriding factors, and price may not be determinative in the issuance of a contract or award. The proposal evaluation criteria should be viewed as standards that measure how well a vendor's approach meets the desired requirements and needs of the County. Criteria that will be used and considered in evaluation for award are set forth in this document. The County will thoroughly review all proposals received. The County will also utilize its best judgment when determining whether to schedule a pre-proposal conference before proposals are accepted, or meetings with vendors after receipt of all proposals. A Purchase Order/Contract will be awarded to a qualified vendor submitting the best proposal. **Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service(s) and/or product(s) which best meets its required needs, quality levels and budget constraints.**

## 2. Background

Sedgwick County, located in south-central Kansas, is the most populous of Kansas' 105 counties with a population estimated at more than 504,000 persons. It is the sixteenth largest in area, with 1,008 square miles, and reportedly has the second highest per capita wealth among Kansas' counties. Organizationally, the County is a Commission/Manager entity, employs nearly 2,800 persons, and provides a full range of municipal services; e.g., public safety, public works, criminal justice, recreation, entertainment, cultural, human/social, and education.

The Sedgwick County Regional Forensic Science Center (RFSC) is seeking responses for the demo/evaluation and potential purchase of a Capillary Electrophoresis Instrument (genetic analyzer). It is anticipated that RFSC will be awarded a grant for calendar year 2017, with a tentative January 2017 date of purchase. Grant award and purchase is not guaranteed. The demo/evaluation period will last up to six months. If more than one vendor meets all criteria, the committee will short list and demo/evaluate the short listed instruments. However, it is anticipated that only one instrument will be purchased.

## 3. Specifications and Requirements

Any exceptions to the specifications should be clearly identified and detailed in your response.

The genetic analyzer must:

- Be a fluorescent based Capillary Electrophoresis Instrument capable of single base pair resolution and sizing in a resolution range encompassing 40-420 base pairs.
- Be capable of detecting and analyzing a minimum of 6 fluorescent dyes simultaneously.
- Be a 96-well plate formatted auto sampler that processes a minimum of 8 samples per run.
- Have undergone developmental validation for casework and paternity applications in accordance with the FBI Quality Assurance Standards.
- Have developmentally validated protocols for the use of NDIS approved kits which allow for simultaneous genotyping of the following loci (at minimum): D3S1358, D5S818, D7S820, D8S1179, D13S317, D16S539, D18S51, D21S11, CSF1PO, FGA, TH01, TPOX, vWA, D1S1656, D2S441, D2S1338, D10S1248, D12S391, D19S433 and D22S1045.
- Be designed to work with a computer workstation that runs Windows 7 Professional operating system.
- Generate files in standard ABIF format for downstream analysis and interpretation using GeneMapper® ID-X software.
- Be accompanied with system software that supports and contains security and audit trail features.
- Run off standard voltage.
- Be fully supported with reagents and consumables.

The vendor must:

- Supply the lab with a Genetic Analyzer for demo/evaluation on-site; this must include delivery, basic installation, and on-site instrument use and maintenance training.
- Be able to supply developmentally validated kits optimized for the instrument in the area of human identification; validation shall have been conducted in accordance with the FBI Quality Assurance Standards.
- Supply, at minimum, STR amplification chemistry (kits) sufficient to conduct internal validations in accordance with the FBI Quality Assurance Standards as well as studies related to complex mixtures and compromised forensic samples.
- Provide technical phone support.
- Be able to deliver the instrument by August 1, 2016.

4. **Request for Proposal Timeline**

The following dates are provided for information purposes and are subject to change without notice. Contact Kara Kingsley, [kara.kingsley@sedgwick.gov](mailto:kara.kingsley@sedgwick.gov), to confirm any and all dates.

|  |                         |
|--|-------------------------|
| Distribution of Request for Proposal to interested parties                     | June 16, 2016           |
| Clarification, Information and Questions submitted in writing by 5:00 p.m. CDT | June 20, 2016           |
| Addendum Issued  | June 21, 2016           |
| Sealed Proposal due before 1:45pm CDT  | June 28, 2016           |
| Evaluation Period  | June 2016- January 2017 |
| Board of Bids and Contracts Recommendation                                     | January 2017            |
| Board of County Commission Award   | January 2017            |

5. **Insurance Requirements**

Liability insurance coverage indicated below must be considered as primary and not as excess insurance. Contractor shall furnish a certificate evidencing such coverage, with County listed as an additional insured, except for professional liability, workers’ compensation and employer’s liability. Certificate shall be provided with bid/proposal submittals. Certificate shall remain in force during the duration of the project/services and will not be canceled, reduced, modified, limited, or restricted until thirty (30) days after County receives written notice of such change. All insurance must be with an insurance company with a minimum BEST rating of A-VIII and licensed to do business in the State of Kansas (**must be acknowledged on the bid/proposal response form**).

**NOTE:** If any insurance is subject to a deductible or self-insured retention, written disclosure must be included in your proposal response and also be noted on the certificate of insurance.

It is the responsibility of Contractor to require that any and all approved subcontractors meet the minimum insurance requirements. Contractor shall obtain the above referenced certificate(s) of insurance, and in accordance with this Agreement, provide copies of such certificates to County.

**Workers’ Compensation:**

Applicable coverage per State Statutes  
**Employer’s Liability Insurance:** \$100,000.00

**Commercial General Liability Insurance:**

**Bodily Injury:**

Each Occurrence \$500,000.00  
 Aggregate \$500,000.00

**Property Damage:**

Each Occurrence \$500,000.00  
 Aggregate \$500,000.00

**Personal Injury:**

|  |              |
|--|--------------|
| Each Occurrence  | \$500,000.00 |
| General Aggregate                                      | \$500,000.00 |
| <b>Automobile Liability-Owned, Non-owned and Hired</b> |              |
| Each Occurrence Bodily Injury and Property damage      | \$500,000.00 |
| General Aggregate                                      | \$500,000.00 |
| <b>Professional Liability</b>                          |              |
| <b>If required</b>                                     |              |

**6. Indemnification**

To the fullest extent of the law, the provider, its subcontractor, agents, servants, officers or employees shall indemnify and hold harmless Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, from any and all claims brought by any person or entity whatsoever, arising from any act, error, or omission of the provider during the provider's performance of the agreement or any other agreements of the provider entered into by reason thereof. The provider shall indemnify and defend Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, with respect to any claim arising, or alleged to have arisen from negligence, and/or willful, wanton or reckless acts or omissions of the provider, its subcontractor, agents, servants, officers, or employees and any and all losses or liabilities resulting from any such claims, including, but not limited to, damage awards, costs and reasonable attorney's fees. This indemnification shall not be affected by any other portions of the agreement relating to insurance requirements. The provider agrees that it will procure and keep in force at all times at its own expense insurance in accordance with these specifications.

**7. Proposal Conditions**

All times indicated in this solicitation document are central standard/central daylight as applicable. In submitting a response to this Request for Proposal, vendors hereby understand the following as applicable: [http://www.sedgwickcounty.org/purchasing/pdf\\_files/Proposal%20Terms%20%20Conditions.pdf](http://www.sedgwickcounty.org/purchasing/pdf_files/Proposal%20Terms%20%20Conditions.pdf)

**8. General Contract Provisions**

In submitting a response to this Request for Proposal, vendors hereby understand the following as applicable: [http://www.sedgwickcounty.org/purchasing/pdf\\_files/General%20Contractual%20Provisions.pdf](http://www.sedgwickcounty.org/purchasing/pdf_files/General%20Contractual%20Provisions.pdf)

**Pricing Information**

| Description   | UOM | Unit Pricing |
|---|-----|--------------|
| CAPILLARY ELECTROPHORESIS INSTRUMENT (GENETIC ANALYZER) | 1   | \$           |

Are you self-insuring your proposed instrument?

Are you able to deliver the proposed instrument by August 1, 2016?

Once awarded the Grant, RFSC plans to purchase the proposed instrument that will be demo/evaluated; are you willing to sell the demo/evaluated instrument?

Please provide three references currently using your proposed instrument.

**PROPOSAL RESPONSE FORM**

**#16-0066**

**CAPILLARY ELECTROPHORESIS INSTRUMENT (GENETIC ANALYZER)**

The undersigned, on behalf of the proposer, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a proposal on the same project; (2) is in all respects fair and without collusion or fraud; (3) the person whose signature appears below is legally empowered to bind the firm in whose name the proposer is entered; (4) they have read the complete Request for Proposal and understands all provisions; (5) if accepted by the county, this bid is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted proposal will be their responsibility.

NAME \_\_\_\_\_

DBA/SAME \_\_\_\_\_

CONTACT \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ HOURS \_\_\_\_\_

STATE OF INCORPORATION or ORGANIZATION \_\_\_\_\_

COMPANY WEBSITE ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

NUMBER OF LOCATIONS \_\_\_\_\_ NUMBER OF PERSONS EMPLOYED \_\_\_\_\_

TYPE OF ORGANIZATION: Public Corporation \_\_\_\_\_ Private Corporation \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_

Partnership \_\_\_\_\_ Other (Describe): \_\_\_\_\_

BUSINESS MODEL: Small Business \_\_\_\_\_ Manufacturer \_\_\_\_\_ Distributor \_\_\_\_\_ Retail \_\_\_\_\_

Dealer \_\_\_\_\_ Other (Describe): \_\_\_\_\_

Not a Minority-Owned Business: \_\_\_\_\_ Minority-Owned Business: \_\_\_\_\_ (Specify Below)

\_\_ African American (05) \_\_ Asian Pacific (10) \_\_ Subcontinent Asian (15) \_\_ Hispanic (20)

\_\_ Native American (25) \_\_ Other (30) - Please specify \_\_\_\_\_

Not a Woman-Owned Business: \_\_\_\_\_ Woman-Owned Business: \_\_\_\_\_ (Specify Below)

\_\_ Not Minority -Woman Owned (50) \_\_ African American-Woman Owned (55)

\_\_ Asian Pacific-Woman Owned (60) \_\_ Subcontinent Asian-Woman Owned (65) \_\_ Hispanic Woman Owned (70)

\_\_ Native American-Woman Owned (75) \_\_ Other - Woman Owned (80) - Please specify \_\_\_\_\_

ARE YOU REGISTERED TO DO BUSINESS IN THE STATE OF KS: \_\_\_\_\_ Yes \_\_\_\_\_ No

**ACKNOWLEDGE RECEIPT OF ADDENDA:** All addendum(s) are posted to our RFQ/RFP web page and it is the vendor's responsibility to check and confirm all addendum(s) related to this document by going to [www.sedgwickcounty.org/finance/purchasing.asp](http://www.sedgwickcounty.org/finance/purchasing.asp) .

NO. \_\_\_\_\_, DATED \_\_\_\_\_; NO. \_\_\_\_\_, DATED \_\_\_\_\_; NO. \_\_\_\_\_, DATED \_\_\_\_\_

In submitting a response to this document, vendor acknowledges acceptance of all sections of the entire document and has clearly delineated and detailed any exceptions.

Signature \_\_\_\_\_ Title \_\_\_\_\_

Print Name \_\_\_\_\_ Dated \_\_\_\_\_