

Amendment of Solicitation

Date of Issuance: <u>08/15/2019</u>	S	olicitation No. <u>3400001653</u>	}
Requisition No. 3400022028	An	nendment No. 1	_
Hour and date specified for receipt of offers is ch	anged: 🗵 No	☐ Yes, to:	CS
Pursuant to OAC 260:115-7-30(d), this documen above. Such notice is being provided to all suppli			
Suppliers submitting bids or quotations shall ack date specified in the solicitation as follows:	nowledge receipt o	of this solicitation amendmen	nt <u>prior</u> to the hour and
(1) Sign and return a copy of this amendment(2) If the supplier has already submitted a return the solicitation deadline. All amendment	sponse, this ackno	owledgement must be signe	ed and returned prior to
number and bid opening date printed cle	arly on the front of	the envelope.	
ISSUED BY and RETURN TO: <u>U.S. Postal Delivery:</u> 3400001653	Donna Dods	on	
OSDH	Contracting (Officer	
1000 NE 10 th St	405 - 271 - 4	043	
OKC, OK 73117 - 1299	Phone Num	ber	
or Personal or Common Carrier Delivery:	donnad@he	alth.ok.gov	
SAME	E-Mail Addr	ess	
,ОК -			

Description of Amendment:

a. This is to incorporate the following:

QUESTION #1

Regarding solicitation # 3400001653 (attached), under the Supplier Remarks on page 21 "2 site visits per year" is specified; however, the listed visit quantities indicate that there should be 1 visit per year for each system. Can you please confirm how many visits each system should have per year?

ANSWER #1

Service maintenance contract to include the following instrumentation:

Century Range Milli-Q Gradient Model# ZMQS6V001 Serial #F4HN79704K - 2 visits per year

Direct-Q 8UV Model # ZRQSVR800 Serial # F2JA21293E - 1 visit per year

Milli-Q Advantage A10Model # Z00Q0V0T0 Serial# F3EA95917A - 1 visit per year

Milli-Q Advantage A10Model # Z00Q0V0T0 Serial# F7EA05055E - 1 visit per year

Milli-Q Advantage A10Model # Z00Q0V0T0 Serial # F7EA05055I - 1 visit per year

Milli-Q Direct 8 Model # ZR0Q00800 Serial # F7CA80528D - 1 visit per year

b. All other terms and conditions remain unchanged.	
Supplier Company Name (PRINT)	Date
Authorized Representative Name (PRINT) Title	Authorized Representative Signature