01/01/01/01/01		ľ		14 1 14		
SYNOPSIS	- St St	Charlouala k		Vendor #1		
Bid No. 2014-034-6416 Annual Contract for Infectious	18 18	Stericycle, li Ms. Patricia				
Bio-Hazard Waste Removal, Pick-Up	3 3		<i>.</i>	Acct. Specia	lict	
and Disposal	19 Q.	4010 Comm		Acci. Specie	mot	
	- C - C - C	Northbrook,				
Contract period: 8/2/14 thru 8/1/15		847-943-601				
Buyer: Lenora Sevillian (214) 653-776	3	866-781-148				
	3 3		stericycle.c	om		
			er Service			
Emergency Contact		866-978-3	744 or 866	-		
	-91 - 91 - 1 1	783-	7422			
		SECOND	LOWEST BID	DDER RECON	MENDED FO	RAWARD
	Estimated	Unit Cost	Cost		Fee	Number of
	Annual Quantities	Per LB.	Extension	Extra Fees	Extension	Days
ITEM/DESCRIPTION	Quantities					Notice
			19 H			19 19
SECTION 1	3 3			3 3	9 B.	3 3
333333	S. S.	9.00	20.20	2.00	0.0	2.2
Waste Steam Type: Routine Infectious						
and Bio-Hazardous Material Waste						
Disposal Services, Packing/Shipping	45,000	\$0.22	\$9,900.00			
Material and all Supplies, per the terms	pounds	40.2Z	ψ7,700.00			
and conditions set forth in bid						
specification requirements.						
Specifiy the Type of Disposal Method					CINERATION	
Being Bid:			AUTOCLAV		SINENATION	1
Removal / Pick-up and Transportation	1/0			\$25.00	\$4,075.00	
Charge(if any):	163			STOP FEE	+ .,01 0.00	
Specify days of advance notice required						
for removal/pick-up and disposal						
services, so that "no extra charge/fee"						N/A
is applied if outside the pre-determined						
removal/pcik-up and disposal schedule:						
Specify additional charge(if any) for						
Emergency and Non-Scheduled	2			NC		
Removal/Pick-up and Disposal Services						
Note: Emergency and Non-						
Scheduled is defined as the						
removal/pick-up of infectious and						
bio-hazardous medical waste on the						
same business day from the initial call request.						
Specify the minimum number of pounds				\$75.00		
of infectious and bio-hazardous medical				MINIMUM		
waste required for each removal/pick-	107			PICK-UP	\$8,025.00	
up or the minimum service charge				FEE		
amount per service location (if any).						
Note: Dallas County will only pay						
the minimum service charge amount						
or the "actual poundage disposed per service removal/pick-up"						
whichever is greater(one or the other						
- not both).						
Specify other applicable disposal						
options that are available from your						
company, and all cost associated with				NONE LISTE	D	
that disposal method for the Waste				LIGI LI		
Stream Type: Infectious and Bio- Hazarddous Medical Waste.						
Hazarddous Medical Waste.	- transferences	-0-0-0-0				10.000
			1.1			11 A
SECTION 2				19		19
						1.
Waste Stream Type: Formalin(10%-						
20%) Fixed Tissue Chunks/Pices	9,000					
Disposal Services, Packing/Shipping Material and all Supplies, per the terms	9,000 pounds	\$2.79	\$25,110.00			
and conditions set forth in bid	pounus					
specification requirements.						
Specify the Type of Disposal Method	1				N	
Being Bid:				NCINERATIO		
Removal/Pick-up and Transportation	21			\$200.00	\$4,200.00	
Charge(if any).	21			¥200.00	Ψ1,200.00	
			1	1		

		1					
SYNOPSIS	1.1	o		Vendor #1			
Bid No. 2014-034-6416 Annual Contract for Infectious		Stericycle, Inc.					
	1. 1.	Ms. Patricia	,	Acat Casala	liet		
Bio-Hazard Waste Removal, Pick-Up and Disposal	3.3.	4010 Comme		Acct. Specia	list		
	19.19	Northbrook,					
Contract period: 8/2/14 thru 8/1/15	1999	847-943-601					
Buyer: Lenora Sevillian (214) 653-776	, : · · ·	866-781-148					
Buyer. Lenora Sevillian (214) 035-770			stericycle.c	om			
	18 H H		r Service	.0111			
Emergency Contact	3 3		744 or 866				
Energency conduct	4.4		7422				
	19.66		· ·				
		SECOND	LOWEST BI	DER RECON	MENDED FO	RAWARD	
Calada adalar adalar s	Estimated	320010	Low Di	DENTEOON	MENDEDIO	Number of	
	Annual	Unit Cost	Cost	Extra Fees	Fee	Days	
ITEM/DESCRIPTION	Quantities	Per LB.	Extension		Extension	Notice	
	10 - 10 - 1	10.10	10.10	4 4 A	10.10	19 19	
Specify the number of days advance							
notice required for removal/pick-up and							
disposal services so that "no extra						7 DAYS	
charge/fee" is applied if outside of the							
pre-determined removal/pick-up and							
disposal schedule:							
Specify additional charge(if any) for							
Emergency and Non-Scheduled	2			\$200.00	\$400.00		
Removal/Pick-up and Disposal Services							
Note: Emergency and Non-							
Scheduled is defined as the							
removal/pick-up of infectious and bio-hazardous medical waste on the							
same business day from the initial							
call request.							

Specify the minimum number of pounds							
of infectious and bio-hazardous medical							
waste required for each removal/pick-				N/A			
up or the minimum service charge							
amount per service location (if any).							
Note: Dallas County will only pay							
the minimum service charge amount							
or the "actual poundage disposed							
per service removal/pick-up"							
whichever is greater(one or the other							
- not both).							
DOT and Texas Commission on							
Environmental Quality approved	100 each	\$15.56	\$1,556.00				
Packing and Shipping container. Size: 5		EACH					
gallon pail / drum.							
Note: The cost to replace pails							
picked up by the vendor must be							
included in the bid price for disposal (2.1): this line item allows Dallas							
<i>County to purchase extra containers</i>							
if needed.							
Specify other applicable disposal							
options that are available from your							
company and all cost associated with		NONE LISTED					
that disposal method for the Waste							
Stream Type: Formalin (10%-20%)							
Fixed Tissue Chunks / Pieces							
		1 I I	19 19	19	19 19	19	
Specify any additional							
comments/costs/etc. included with				NONE LISTEI	C		
your bid proposal, if applicable" for				LIGI LI			
Section 1 and 2:				1			
							
TOTAL			\$36,566.00	450.0111	\$16,700.00		
GRAND TOTAL W/FEES				\$53,266.00			
1	1						