

**TABULATION SHEET**

**Bid No. 2015-066-6520 Contract for the Purchase of 2015 Passenger Vehicles, Vans and Trucks**  
**Opening Date: 3-Aug-2015**  
**Initial Contract Period: Date of Purchase Order**  
**Buyer Name and Telephone: Sam Cooper 214-653-6304**

**Recommended for Award:**  
**NCTRCA Certified Vendor (M/Wbe)**  
**Certified by other Agency**  
**EE0-1 Form Completed**  
**Dallas County Taxpayer?**  
**How were you notified?**

**VENDOR #1**

**Freedom Chevrolet**  
  
 Tim Middlebrooks  
 8008 Marvin D. Love Freeway  
  
 Dallas, TX 75237  
  
 Tel: 972-707-9438  
 Fax: 214-350-0085

No  
 No  
 Yes  
 Yes  
 Dallas County Website

**VENDOR #2**

**Randall Reed's Prestige Ford**  
  
 Admir Sarac  
 P.O. Box 472247  
  
 Garland, TX 75047  
  
**Tel: 972-864-6815**

**Items 1, 2 and 3**  
 No  
 No  
 Yes  
 Yes  
 Bid Sync

**VENDOR #3**

**Rush Enterprises**  
  
 Cera Roberts  
 4000 Irving Blvd.  
  
 Dallas, TX 75247  
  
 Tel: 817-688-4083  
 Fax: 214-678-5999  
**BID FOR ITEM #4 WITHDRAWN ON AUGUST 10, 2015.**

No  
 No  
 Yes  
 Yes

**VENDOR #4**

**Sam Pack's Five Star Ford**  
  
 Alan Rosner  
 1635 S. I35E  
  
 Carrollton, TX 75006  
  
 Tel: 214-837-3054

**Item 4**  
 No  
 No  
 Yes  
 Yes  
 Dallas County Website

ITEM	DESCRIPTION	QTY.	U/I	UNIT PRICE	EXTENDED PRICE	UNIT PRICE	EXTENDED PRICE	UNIT PRICE	EXTENDED PRICE	UNIT PRICE	EXTENDED PRICE
1	2015 Ford Escape S	18	each	\$0.00	\$0.00	\$18,800.00	\$338,400.00	\$0.00	\$0.00	\$19,307.00	\$347,526.00
	Specify Year/Make/Model Being Proposed:					2016 Ford Escape S				2016/Ford/Escape	
	Specify any additional costs or comments (if applicable) associated with this vehicle:									N/A	
	Specify Manufacturer Standard Warranty Period:					3/36k Bumper to Bumper, 5/60k power train				3yr/36k Bumper to Bumper 5yr/60k power train	
	Specify Vehicle Manufacturer cut-off deadline for ordering this vehicle type									31-Aug-15	
	Specify the Estimated Delivery Timeframe (from date of order to delivery to Dallas County site after receipt of Purchase Order					7-8 weeks				120 days	
1A	2015 Chevrolet Equinox LS	18	each	\$20,746.40	\$373,435.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Specify Year/Make/Model Being Proposed:					2016 Chevrolet Equinox					
	Specify any additional costs or comments (if applicable) associated with this vehicle:					N/A					
	Specify Manufacturer Standard Warranty Period:					3 yr 36k B2B Syrlook Powertrain					
	Specify Vehicle Manufacturer cut-off deadline for ordering this vehicle type					N/A					
	Specify the Estimated Delivery Timeframe (from date of order to delivery to Dallas County site after receipt of Purchase Order					120-150 days					

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 Garland, TX 75047  
  
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 Alan Rosner  
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	<b>Note: Items 1 and 1A: A total of eighteen (18) vehicles will be purchased, either 18 Ford vehicles, 18 Chevrolet vehicles or a combination of Ford and Chevrolet vehicles, totaling 18.</b>										
2	2015 Ford Explorer	4	each	\$0.00	\$0.00	\$24,980.00	\$99,920.00	\$0.00	\$0.00	\$25,515.44	\$102,061.76
	Specify Year/Make/Model Being Proposed:					2016 Ford Explorer				2016/Ford/Explorer	
	Specify any additional costs or comments (if applicable) associated with this vehicle:									N/A	
	Specify Manufacturer Standard Warranty Period:					3/36 B/B, 5/60k P.T.				3yr/36k Bumper to Bumper 5yr/60,000 power train	
	Specify Vehicle Manufacturer cut-off deadline for ordering this vehicle type					Dec-15				8/31/2015	
	Specify the Estimated Delivery Timeframe (from date of order to delivery to Dallas County site after receipt of Purchase Order)					7-8 weeks				120 days	
2A	2015 Chevrolet Traverse LS	4	each	\$25,000.00	\$100,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Specify Year/Make/Model Being Proposed:					2016 Chevrolet Traverse					
	Specify any additional costs or comments (if applicable) associated with this vehicle:					N/A					

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	Specify Manufacturer Standard Warranty Period: Specify Vehicle Manufacturer cut-off deadline for ordering this vehicle type Specify the Estimated Delivery Timeframe (from date of order to delivery to Dallas County site after receipt of Purchase Order)			3yr 36k B2B Syrlook Powertrain N/A 120-150 days							
3	2015 Ford Transit Connect Specify Year/Make/Model Being Proposed:  Specify any additional costs or comments(if applicable) associated with this vehicle:  Specify Manufacturer Standard Warranty Period:  Specify Vehicle Manufacturer cut-off deadline for ordering this vehicle type Specify the Estimated Delivery Timeframe (from date of order to delivery to Dallas County site after receipt of Purchase Order)	3	each	\$0.00	\$0.00	\$19,600.00	\$58,800.00	\$20,528.46	\$61,585.38	\$19,967.46	\$59,902.38
						2016 Ford Transit Connect		2015 Ford/Transit Connect		2016/Ford/Transit Connect	
						3/36k B/B, 5/60k P.T.		3yr/36,000 Bumper to Bumper. 5yr/60,000 roadside assist		3yr/36k Bumper to Bumper 5yr/60k Power Train	
						Open till Jan. 2016		2 week time frame		42247.00	120 days
4	2015 Ford F-350 Specify Year/Make/Model Being Proposed:  Specify any additional costs or comments (if applicable) associated with this vehicle:	5	each	\$0.00	\$0.00	\$42,600.00	\$213,000.00	\$32,084.80	\$160,424.00	\$41,553.45	\$207,767.25
						2016 Ford F350 (1 ton)		2015 Ford F-350		2016/Ford/F350 Crew Cab SRW XL N/A	

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	Specify Manufacturer Standard Warranty Period:					3/36k B/B, 5/100k P.T.		3yr/36,000 Bumper to Bumper. 5yr/60,000 roadside		3yr/36000 Bumper to Bumper - 5yr/60000 power train 42247.00	
	Specify Vehicle Manufacturer cut-off deadline for ordering this vehicle type Specify the Estimated Delivery Timeframe (from date of order to delivery to Dallas County site after receipt of Purchase Order					8-10 weeks		2 week time frame		120 days	
	Specify any additional comments/cost/etc. included with your bid proposal, if applicable:			N/A		Offering Knapheide service body (same set up).		Offering Knapheide service body			
	Specify Prompt Payment Discount Terms			N/A		0% 0 days				0% 0 days	
	Is this an "All or None" Bid? Yes _____ No _____			No				No		All	
	Did your company check Dallas County website for any addendums, updates, and/or changes to the bid solicitation? Yes _____ No _____			Yes				Yes		Yes	
	Specify the name, telephone number and e-mail address of the account representative who will be handling this account:										
	Account Representative:			Tim Middlebrooks		Admir Sarac		Cera Roberts		Alan Rosner	
	Telephone Number:			972-707-9438		972-864-6815		817-319-5108		214-837-3054	
	E-Mail Address:			<a href="mailto:tmiddlebrooks@freedomfleetsales.com">tmiddlebrooks@freedomfleetsales.com</a>		<a href="mailto:admirs@prestige-garland.com">admirs@prestige-garland.com</a>		<a href="mailto:robertsC2@rush-enterprises.com">robertsC2@rush-enterprises.com</a>		<a href="mailto:alanr@spford.com">alanr@spford.com</a>	

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Specify the Alternate (Back-Up) Contact Person:

Contact Person Name:

Telephone Number:

E-Mail Address:

Bert Stull  
 972-707-9436  
[bstull@freedomfleetsales.com](mailto:bstull@freedomfleetsales.com)

Scott Kirby  
 817-319-5108  
[kirbyS1@rushenterprises.com](mailto:kirbyS1@rushenterprises.com)

Jorge Guerra  
 214-837-3055  
[jguerra@spford.com](mailto:jguerra@spford.com)

Cooperative Purchasing: Should other Governmental Entities decide to participate in this contract, would you, the awarded Contractor agree that all terms, conditions, specifications and pricing would apply to that entity? Yes \_\_\_\_\_ No \_\_\_\_\_

Yes

Yes

Yes

Yes

Does your firm/company have the required insurance coverage stated under Section 3 - INSURANCE REQUIREMENTS and agree to comply with these requirements during the duration of this contract?

Yes

Yes

Yes

If No, will your firm be able to acquire the required coverage within ten (10) days upon notification of contract award? Yes \_\_\_\_\_ No \_\_\_\_\_

Yes

**Information on Provision of Health Insurance Coverage for Employees**

a) Does your company provide health insurance coverage to its employees?

Yes

Yes

Yes

Yes

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b) If your company does provide health insurance coverage to its employees, does the company share in the cost a minimum of:

95% for employee only coverage?

Yes

No

Yes

85% for employee + children coverage?

Yes

No

No

73% for employee + spouse?

Yes

No

No

71% for employee +family coverage?

Yes

No

No

c) If your company does provide health insurance coverage to its employees, is the coverage comparable to the services provided by Dallas County as described in the attached summary plan description? (See Attachment A) Yes \_\_\_\_\_ No \_\_\_\_\_

Yes

Yes

Yes

No

**For Statistical Gathering Purposes Only:**

Is your company certified through the North Central Texas Regional Certification Agency (NCTRCA) Yes \_\_\_\_ No \_\_\_\_\_

No

No

No

No

If you answered yes, please indicate your certification number and expiration date below.

Certification/Registration Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Is your company certified through an agency other than NCTRCA? Yes \_\_\_\_\_ No \_\_\_\_\_

No

No

No

No

