

**Bid Tabulation Packet
for
Solicitation 06221-11**

Services: Morgue Transport



Collin County

Bid #06221-11 - Services: Morgue Transport

Creation Date **Jun 9, 2011**End Date **Jul 28, 2011 2:00:00 PM CDT**Start Date **Jul 12, 2011 3:25:17 PM CDT**Awarded Date **Not Yet Awarded**

06221-11--01-01 Transport from location within Collin County to Collin County Medical Examiner					
Supplier	Unit Price	Qty/Unit	Total Price	Attch.	Docs
Weatherall Family Funeral Service LLC	First Offer - \$125.00	1 / each	\$125.00		Y
Product Code: Agency Notes:		Supplier Product Code: Supplier Notes:			
NorthStar EMS	First Offer - \$139.00	1 / each	\$139.00	Y	Y
Product Code: Agency Notes:		Supplier Product Code: Supplier Notes: NorthStar EMS reserves the right to bill for extended on-scene time at \$25.00 per 15 minute interval after initial 60 minutes.			

06221-11--01-02 Transport from location outside Collin County to Collin County ME					
Supplier	Unit Price	Qty/Unit	Total Price	Attch.	Docs
NorthStar EMS	First Offer - \$139.00	1 / each	\$139.00		Y
Product Code: Agency Notes:		Supplier Product Code: Supplier Notes: \$139.00 base rate / \$3.50 per loaded mile for out of County transports. NorthStar EMS reserves the right to bill for extended on-scene time at \$25.00 per 15 minute interval after initial 60 minutes.			
Weatherall Family Funeral Service LLC	First Offer - \$175.00	1 / each	\$175.00		Y
Product Code: Agency Notes:		Supplier Product Code: Supplier Notes:			

Supplier Totals

NorthStar EMS		\$278.00 (2/2 items)
Bid Contact	Billy Skiles bskiles@northstarems.com Ph 940-383-0555 Fax 940-382-6951	Address 1100 S. Stemmons Lake Dallas, TX 75065
Bid Notes	The uploaded attachment applies for both solicitations 06221-11--01-01 and 06221-11--01-02. Thank you for giving us this opportunity if you have any questions please do not hesitate call contact me directly at 940-210-0373.	
	Thank you, Billy Skiles	
Agency Notes:	Supplier Notes: The uploaded attachment applies for both solicitations 06221-11--01-01 and 06221-11--01-02. Thank you for giving us this opportunity if you have any questions please do not hesitate call contact me directly at 940-210-0373.	
	Thank you, Billy Skiles	
Weatherall Family Funeral Service LLC		\$300.00 (2/2 items)
Bid Contact	Gerald Weatherall GERALD_WEATHERALL@YAHOO.COM Ph 972-804-5995	Address PO Box 150423 Dallas, TX 75315
Qualifications	MBE WBE	
Agency Notes:	Supplier Notes:	

**

NorthStar EMS

Bid Contact **Billy Skiles**
bskiles@northstarems.com
 Ph 940-383-0555
 Fax 940-382-6951

Address 1100 S. Stemmons
 Lake Dallas, TX 75065

Bid Notes The uploaded attachment applies for both solicitations 06221-11--01-01 and 06221-11--01-02. Thank you for giving us this impportunity if you have any questions please do not hesitate call contact me directly at 940-210-0373.

Thank you,

Billy Skiles

Item #	Line Item Notes	Unit Price	Qty/Unit	Total Price	Attch.	Docs
06221-11--01-01	Transport from location within Collin County to Collin County Medical Examiner	Supplier Product Code:	First Offer -	\$139.00	1 / each	\$139.00 Y Y
		Supplier Notes: NorthStar EMS reserves the right to bill for extended on-scene time at \$25.00 per 15 minute interval after initial 60 minutes.				
06221-11--01-02	Transport from location outside Collin County to Collin County ME	Supplier Product Code:	First Offer -	\$139.00	1 / each	\$139.00 Y
		Supplier Notes: \$139.00 base rate / \$3.50 per loaded mile for out of County transports. NorthStar EMS reserves the right to bill for extended on-scene time at \$25.00 per 15 minute interval after initial 60 minutes.				
Supplier Total					\$278.00	

NorthStar EMS

Item: **Transport from location within Collin County to Collin County Medical Examiner**

Attachments

Collin County ME RFP.pdf

NorthStar EMS Response to Solicitation 06221-11

Services: Morgue Transport





Collin County Medical Examiner
700 B Wilmeth Rd.
Mckinney, Texas 75069

Attention: William Rohr, M.D.

July 27, 2011

NorthStar EMS would like to thank you for allowing us the opportunity to participate in your quest for a morgue transportation provider for Collin County.

We understand the importance of collaborating with an experienced provider, who is dedicated to implementing a high-standard medical transportation program tailored to your needs. NorthStar EMS is eager to demonstrate our commitment to such a program, to include our dedication to on-time compliance, professionalism, clinical expertise, and to upholding a strong partnership.

We compliment your commitment to the community in which you serve, and we to believe in working with those around us to create true partnerships with citizens, businesses and other agencies in the area.

We believe you will find that NorthStar EMS will provide you the greatest opportunity for accomplishing your goals, and we look forward to developing a strong and long lasting relationship motivated toward this end.

Again, thank you for allowing us to be a part of this crucial process.

Sincerely,

Donna P. Russell, CEO

MEET NORTHSTAR EMS

**Response to Solicitation 06221-11
Morgue Transportation Provider
For Collin County, Texas**





Welcome to NorthStar EMS

NorthStar EMS – “*leading the way...*”



NorthStar EMS leads the way by setting the standard for the private ambulance industry in Texas. At NorthStar EMS, we strive toward active and beneficial involvement with the communities in which we

serve. We are not merely a business, but an integral partner in our society.

Our success lies in matching the needs of our customers with superior ambulance and wheelchair transportation services, creating a seamless transition between patient transportation and facility care.

Since our “humble” beginnings, NorthStar EMS has continually strived to exceed the needs of our customers, patients and their families, as well keeping pace with the needs of our own personnel. We tailor our services to each customer with the understanding that diversity and flexibility are essential to our industry.

Offering a variety of services to accommodate all of those we serve, we hope you will find this proposal informative and that it will offer valuable insight regarding our integrity and the benefits of a long-lasting partnership with NorthStar EMS.

The patient care and services provided by NorthStar EMS will follow a team approach. To this end, it is the goal of NorthStar EMS to assist all patients in realizing and maintaining a quality state of well-being.

Company Milestones

It all started with a decision. Our company originated through the heartfelt decision of Mr./Mrs. Mike and Donna Russell; a loving Christian couple with a growing family who, through their own careers, both served as certified medical personnel tending to the needs of thousands. The Russell's, with a strong faith base, courage, and unwavering drive to serve, were called to "offer something better".

The motivation for their decision was simple: Mike and Donna saw a need to offer a higher level of quality care to the patients they served. What they saw in their patients was more than a mere stranger; "they deserve compassion and someone to carry them through their ordeal if, at least, for the brief moment during transport."



Second, the Russell's saw the need to offer a better place of employment for those within the field of EMS; to offer better benefits, health insurance, paid time off, higher overall compensation and some sense of retirement.

Their motto; *"take care of those who take care of you"*.

The name says it all. The Russell's referred to the bible for inspiration. After long contemplation, a decision was made. What better reference than that of the North Star? The North Star is considered one of the most reliable navigational tools to those experiencing dangerous and unpredictable challenges. The North Star is seen as stationary and dependable providing a fixed reference point and consistency. In the Bible we see the North Star as the guiding light of truth & security; ultimately and with confidence, taking you to a "stable" destination.

You can always rely on NorthStar EMS to lead you to safety and security.

A company on the move. NorthStar EMS was incorporated in November 1998. The immediate success of NorthStar EMS' low-cost, high-quality care soon caused the company's owners to consider enhancing their service capabilities. In just a matter of a short few years, NorthStar EMS soon developed operations in more areas, including Greater Houston, Lake Dallas, N.E. Tarrant County, Plano, Denton, and more to better serve its client base.



OUR DESIRE TO BECOME A PART
OF YOUR COMMUNITY

Response to Solicitation 06221-11
Morgue Transportation Provider
For Collin County, Texas



OUR DESIRE TO BECOME A PART OF YOUR COMMUNITY

Com-mu-ni-ty: *a social group of any size whose members reside in a specific locality, share government, and often have a common cultural and historical heritage.*



All successful communities begin in a similar manner. An individual or small group of like minded people plant a seed around a common vision. Over time that vision grows, and the most prosperous examples hold tight to the principals upon which they were founded.

NorthStar EMS is proud to be active within the communities we serve.

A few examples include:



Owners Mike and Donna Russell support of tomorrow's leaders through participation in the Humble ISD FFA's livestock auction



NorthStar EMS pursues membership in the Chamber of Commerce for our various station locations



Little League Team sponsorship is a fun and gratifying way that NorthStar EMS has been able to show our appreciation to communities

Service Capabilities

Fleet Resources

The average age of NorthStar EMS' fleet is less than three years old, with a large majority of the fleet acquired within the past year.



Considerations for additional resources are detailed below.

- NorthStar EMS manages its North Texas offices in Lake Dallas (Denton County), just a short drive to the center of Collin County. NorthStar EMS operates in Plano and Richardson currently.
- Nearly 50 vehicles fleet-wide (company-wide) including support and specialty units. In North Texas NorthStar EMS operates

- 4** MICU capable licensed ambulances
- 2** Alternative Transport Service vehicles
- 1** Administrative / support vehicles

By organizing our patient care system around a fleet of MICU capable ambulances, NorthStar EMS can more readily provide advanced services over other providers. In addition, NorthStar EMS has added other strategic building blocks, which continue to strengthen our commitment to quality transportation and customer satisfaction.

CAAS Accreditation: NorthStar EMS is actively preparing for the most important step toward obtaining the highest recognition and acknowledgement of our quality through ambulance accreditation by the **Commission on Accreditation of Ambulance Services (CAAS)**. We expect to complete the preparation and inspection process by the conclusion of 2011.



You may visit their website at <http://www.caas.org/>



Transport Personnel: NorthStar EMS retains the best medical personnel in the industry. This group of highly trained professionals are strategically staffed in a variety of configurations to meet the dynamic needs of our clients' demand.

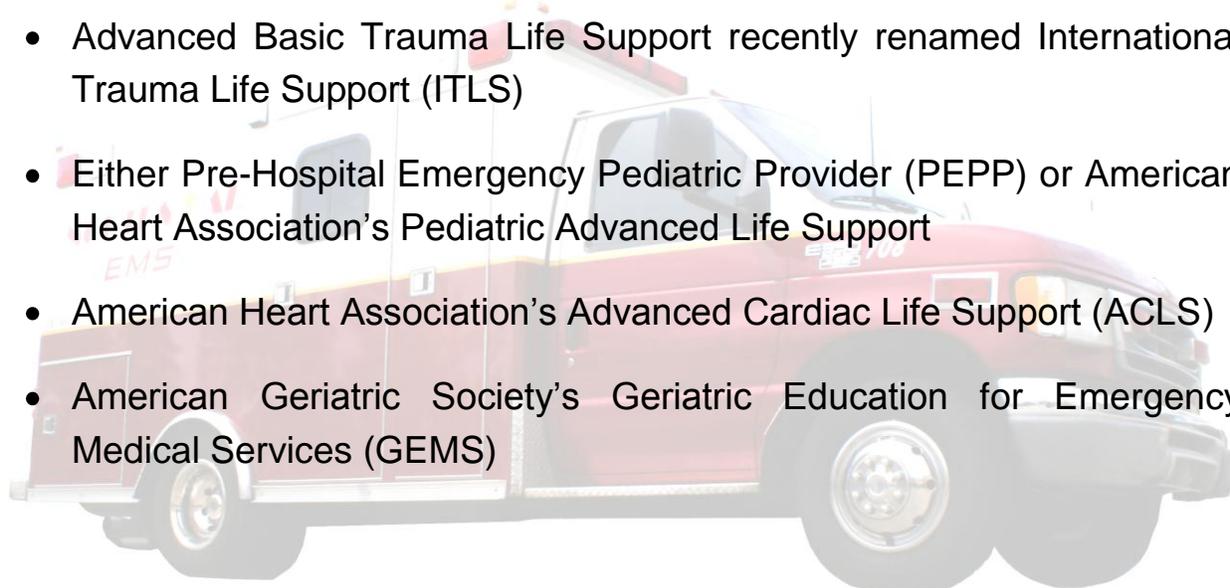
Medical Configuration(s):

- MICU – The ambulance unit for Collin County Morgue Transport will be staffed with a minimum of 2 team members. Majority of units are staffed with double paramedic crews.

Staff Certifications and Curriculum Vitae: NorthStar EMS requires all EMT-Paramedics maintain current certification with the Texas Department of State Health Services, in addition we require continued advanced competency in the following as a condition of continued employment. (Employees must obtain each of these certifications within three-(3) months of employment and are required to maintain these certifications throughout their employment).

As a condition of employment, these include:

- Advanced Basic Trauma Life Support recently renamed International Trauma Life Support (ITLS)
- Either Pre-Hospital Emergency Pediatric Provider (PEPP) or American Heart Association's Pediatric Advanced Life Support
- American Heart Association's Advanced Cardiac Life Support (ACLS)
- American Geriatric Society's Geriatric Education for Emergency Medical Services (GEMS)



NorthStar EMS is currently in good standing, and pledges to remain current in all reporting, with the Texas Department of State Health Services (including but not limited to adherence to reporting standards as defined by “Summary Description of Reporting Requirements §103.1 – §103.8” as it relates to trauma registry submission).

Staff Supervision And Accountability:

As with any solid partnership, NorthStar EMS invites Collin County Medical Examiner’s input towards staffing and operational decisions. It is our intent to dedicate the crews necessary to fulfill our commitment so that your Community becomes familiar with the same faces..

With an established open line of communication between our agency’s leadership and yours, many potential conflicts can be avoided. And those that do arise will be dealt with from a team perspective with the best interests of both parties at the forefront.



Goals and Objectives of the Quality Assurance Plan:

The following are the goals and objectives of the quality improvement plan:

- improve our personnel's' awareness of potential health and safety problems,
- identify and correct operational problems to include any areas of concern with ambulances, equipment, or personnel issues regarding patient care or conduct,
- evaluate compliance with all NorthStar EMS policies and procedures, clinical operating guidelines, and including any state or federal regulations.
- Provide continuing in house training and education to all personnel to ensure their skills are maintained at an optimal level.

Description of Information measured:

- NorthStar EMS will annually measure the following information. We will further review and use any findings to improve our Clinical Operating Guidelines, administrative and operational policies, and procedures, standards for transportation, response times, our complaint resolution process, and our preventative maintenance program for vehicles and equipment.
- The Board of Directors will review all administrative and operational policies and procedures at the annual meeting and will approve any changes during that meeting. Ongoing changes will occur to the policies and procedure as needed throughout the year via directives and will be added to the official policies when re-evaluated annually. Communication of any changes will be through communications from the Operations supervisor, company meetings, memos, or other publications as necessary to communicate with all personnel.

Fleet Maintenance: NorthStar EMS manages their own in-house fleet maintenance department that performs all vehicle maintenance and repair for our vehicles which meets, if not exceeds, manufacturers requirements. NorthStar EMS' fleet maintenance department has over thirty-(30) years of emergency response vehicle repair experience.



OUR PERFORMANCE STANDARDS

**Response to Solicitation 06221-11
Morgue Transportation Provider
For Collin County, Texas**



Response-Time Reliability

NorthStar EMS will respond to the Medical Examiners call for service within 1 hour. NorthStar EMS agrees to constantly monitor and report response times on a monthly basis,.

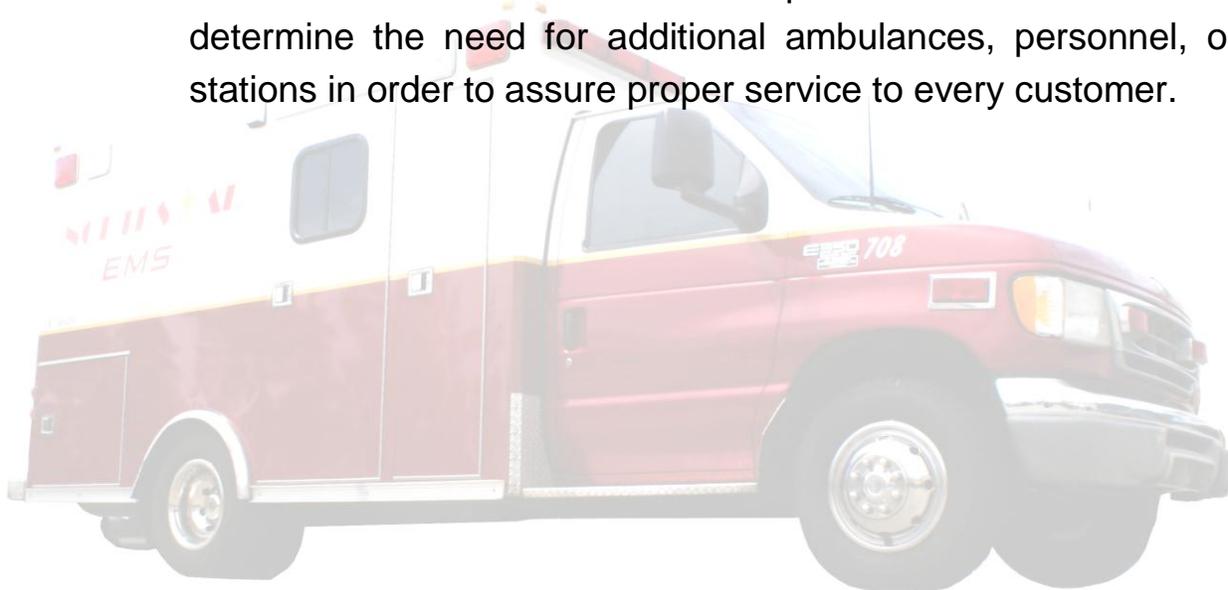
Fractile Response-Time Measurement

NorthStar EMS, like many high-performance emergency ambulance services use a different methodology to measure response times to ensure service equality to all patients: *fractile distribution* reported at the 90 percentile. This methodology places each response within the minute it is achieved and stacks the minutes in ascending order to establish a fractile response-time distribution. The point at which the fractile response time crosses the percentile measures the point of the service's response-time reliability.

The Commission on Accreditation of Ambulance Services (CAAS) is a nationally recognized independent Commission that maintains a comprehensive series of standards for the ambulance service industry. NorthStar EMS commits to maintaining response times that fall within the published criteria as certified by CAAS.

System Status Management: NorthStar EMS will utilize a form of System Status Management in the deployment of the closest most appropriate vehicle for each request for transport. As a matter of practice, NorthStar EMS dispatching personnel position units according to geographic demand and call priority. Staff is trained to proactively position units in a manner that will meet necessary response times for our clients. For situations in which all available resources are appropriated, changes are made according to call priority so that high priority transports are given preference.

- A. In all circumstances every effort is made to meet contractual response expectations. To insure our continued ability to meet these expectations:
- i. The Communications Director will review the actual response times each month on an on-going basis to determine if the appropriate unit was dispatched to each response.
 - ii. NorthStar EMS will utilize the practice of System Status Management for the most effective use of system resources.
 - iii. NorthStar EMS will utilize the response time evaluations to determine the need for additional ambulances, personnel, or stations in order to assure proper service to every customer.



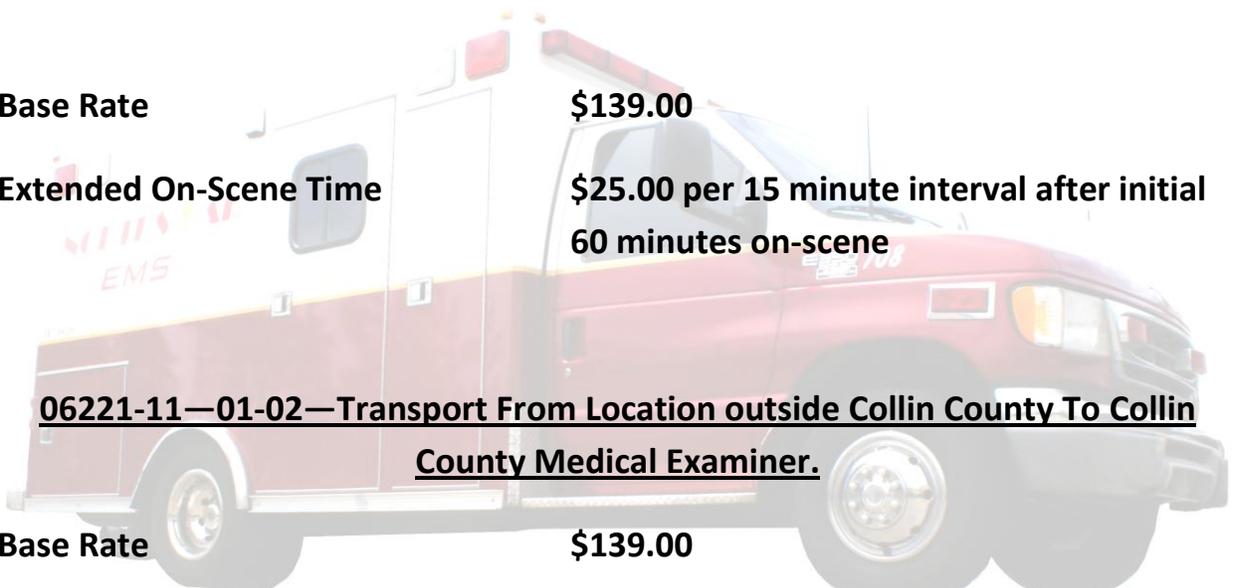
FINANCIAL CONSIDERATIONS

**Response to Solicitation 06221-11
Morgue Transportation Provider
For Collin County, Texas**



NORTHSTAR EMS MORGUE TRANSPORT RATES

06221-11—01-01—Transport From Location within Collin County To Collin County Medical Examiner.

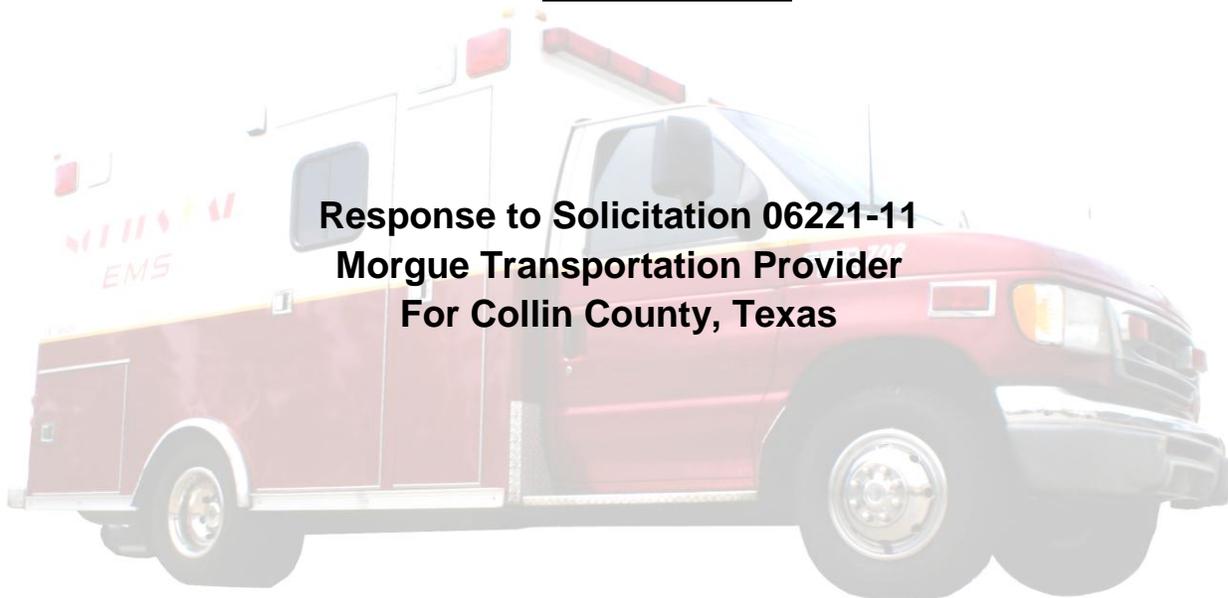


Base Rate	\$139.00
Extended On-Scene Time	\$25.00 per 15 minute interval after initial 60 minutes on-scene

06221-11—01-02—Transport From Location outside Collin County To Collin County Medical Examiner.

Base Rate	\$139.00
Mileage	\$3.50 per loaded mile
Extended On-Scene Time	\$25.00 per 15 minute interval after initial 60 minutes on-scene

REFERENCES



**Response to Solicitation 06221-11
Morgue Transportation Provider
For Collin County, Texas**

Professional References

Reference #1

Organization Name: Kingwood Medical Center
Contact Name/Phone: Gay Nord, CEO
(281) 348-8599
Address: 22999 Hwy 59 North
Kingwood, Texas 77365

Services Provided: Critical Care Transport, cardiac procedure stand-by, Balloon Pump Transport, and Urgent Care Transport for higher level of care, discharges via stretcher and wheelchair van.

Reference #2

Organization Name: Nexus Specialty Hospital
Contact Name/Phone: Teri Frank, Director of Case Management
(281) 364-0317 ext. 3338
Address: 123 Vision Park Blvd.
Shenandoah, Texas 77384

Services Provided: Critical Care Transport, Urgent Care Transport, Outpatient Diagnostic Transport of ICU Patients, discharges via stretcher and wheelchair van.

Reference #3

Organization Name: Woodlands Healthcare
Contact Name/Phone: Josh White, Administrator
(281) 363-3535
Address: 4650 S. Panther Creek Dr.
Spring, Texas 77381

Services Provided: Emergent and Non Emergent Transport to ER, Outpatient testing/treatment transports to/from physicians' offices and clinics, wheelchair transportation.

Reference# 4

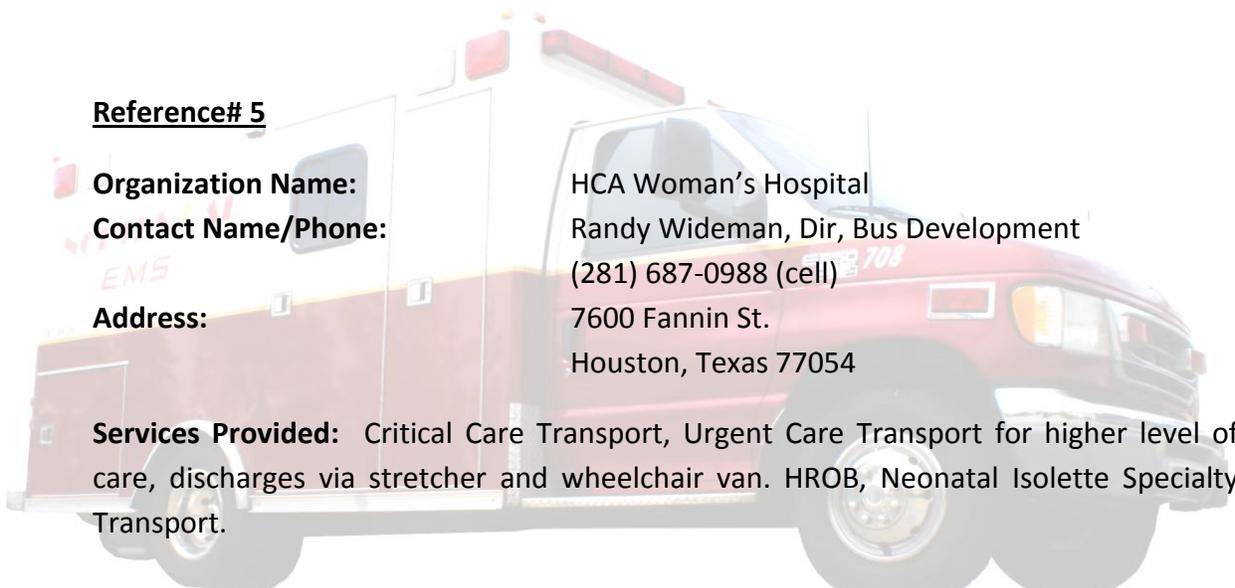
Organization Name: Humble Fire Department
Contact Name/Phone: Mike Legoudis, Assistant Fire Chief/EMS
(281) 852-2181
Address: 114 W. Higgins
Humble, Texas 77336

Services Provided: Back-up 911 response, transports from scene to downtown facilities for patient request.

Reference# 5

Organization Name: HCA Woman's Hospital
Contact Name/Phone: Randy Wideman, Dir, Bus Development
(281) 687-0988 (cell)
Address: 7600 Fannin St.
Houston, Texas 77054

Services Provided: Critical Care Transport, Urgent Care Transport for higher level of care, discharges via stretcher and wheelchair van. HROB, Neonatal Isolette Specialty Transport.





AMBNOT-01 SEAM

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 6/1/2011
PRODUCER AI Insurance Group P.O. Box 80568 Athens, GA 30608		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED North Star Emergency Medical Services, LP P.O. Box 2526 Humble, TX 77347-		INSURERS AFFORDING COVERAGE INSURER A: Northfield Insurance Company INSURER B: Illinois National Insurance INSURER C: Insurance Company of the State of PA INSURER D: The Travelers Lloyds Insurance Company INSURER E:
		NAIC #

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Sexual Abuse <input checked="" type="checkbox"/> \$100,000/\$300,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	WS115536	6/1/2011	6/1/2012	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
B	X	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> UM/UIM Limits <input checked="" type="checkbox"/> 25,000/50,000/25,000	CA 5455993	6/1/2011	6/1/2012	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ 1,000,000
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC 001213206	6/1/2011	6/1/2012	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D		OTHER Inland Marine	QT 6607619L295 TLC -10	11/13/2010	11/13/2011	Ambulance Medical Equip \$19,000 max per unit
A		Professional Liability	WS115536	6/1/2011	6/1/2012	Per Occurrence/Aggregate 1,000,000/3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

City of Dallas is an Additional Insured in regards to General Liability and Automobile Liability coverage.

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE

ACORD 25 (2001/08)

© ACORD CORPORATION 1988

Supplier: **NorthStar EMS**

**SIGNATURE FORM
COLLIN COUNTY, TEXAS**

DELIVERY WILL BE F.O.B. INSIDE DELIVERY AT COLLIN COUNTY DESIGNATED LOCATIONS AND ALL TRANSPORTATION CHARGES PAID BY THE SUPPLIER TO DESTINATION.

DELIVERY TO BE SPECIFIED IN CALENDAR DAYS FROM DATE OF ORDER. **30**

WE **DO NOT** TAKE EXCEPTION TO THE BID SPECIFICATIONS.

WE **TAKE** EXCEPTION TO THE BID SPECIFICATIONS (EXPLAIN):

30 Ramp up period

COMPANY INFORMATION/PROFILE/REFERENCES

Preferential Requirement: The County of Collin, as a governmental agency of the State of Texas, may not award a contract to a nonresident bidder unless the nonresident's bid is lower than the lowest bid submitted by a responsible Texas resident bidder by the same amount that a Texas resident bidder would be required to underbid a nonresident bidder to obtain a comparable contract in the state in which the nonresident's principal place of business is located (Government Code, Title 10, V.T.C.A., Chapter 2252, Subchapter A). Bidder shall make answer to the following questions by selecting the appropriate radio button or inserting information in the box provided:

Is your principal place of business in the State of Texas? Yes No

If the answer to question is "yes", no further information is necessary; if "no", please indicate:

in which state is your principal place of business is located: **n/a**

if that state favors resident bidders (bidders in your state) by some dollar increment or percentage: Yes No

if "yes", what is that dollar increment or percentage? **n/a**

Company Profile: IS YOUR FIRM?

Sole Proprietorship Yes No

General Partnership Yes No

Limited Partnership Yes No

Corporation Yes No

Other Yes No

List Legal Names in Company: **NorthStar EMS, LP**

List at least three (3) companies or governmental agencies where these same/like products/services, as stated herein, have been provided. Include company name, address, contact name and telephone number.

**Harris County Hospital District
City of Huffman ESD4
Jefferson and Harris County, Texas**

AS PERMITTED UNDER TITLE 8, CHAPTER 271, SUBCHAPTER F, SECTION 271.101 AND 271.102 V.T.C.A. AND TITLE 7, CHAPTER 791, SUBCHAPTER C, SECTION 791.025, V.T.C.A., OTHER LOCAL GOVERNMENTAL ENTITIES MAY WISH TO ALSO PARTICIPATE UNDER THE SAME TERMS AND CONDITIONS CONTAINED IN THIS CONTRACT. EACH ENTITY WISHING TO PARTICIPATE MUST ENTER INTO AN INTERLOCAL AGREEMENT WITH COLLIN COUNTY AND HAVE PRIOR AUTHORIZATION FROM VENDOR. IF SUCH PARTICIPATION IS AUTHORIZED, ALL PURCHASE ORDERS WILL BE ISSUED DIRECTLY FROM AND SHIPPED DIRECTLY TO THE LOCAL GOVERNMENTAL ENTITY REQUIRING SUPPLIES/SERVICES. COLLIN COUNTY SHALL NOT BE HELD RESPONSIBLE FOR ANY ORDERS PLACED, DELIVERIES MADE OR PAYMENT FOR SUPPLIES/SERVICES ORDERED BY THESE ENTITIES. EACH ENTITY RESERVES THE RIGHT TO DETERMINE THEIR PARTICIPATION IN THIS CONTRACT. WOULD BIDDER BE WILLING TO ALLOW OTHER LOCAL GOVERNMENTAL ENTITIES TO PARTICIPATE IN THIS CONTRACT, IF AWARDED, UNDER THE SAME TERMS AND CONDITIONS? Yes No

By signing and submitting this Bid/Proposal, Bidder/Offeror acknowledges, understands the specifications, any and all addenda, and agrees to the bid/proposal terms and conditions and can provide the minimum requirements stated herein. Bidder/Offeror acknowledges they have read the document in its entirety, visited the site, performed investigations and verifications as deemed necessary, is familiar with local conditions under which work is to be performed and will be responsible for any and all errors in Bid/Proposal submittal resulting from Bidder/Offeror’s failure to do so. Bidder/Offeror acknowledges the prices submitted in this Bid/Proposal have been carefully reviewed and are submitted as correct and final. If Bid/Proposal is accepted, vendor further certifies and agrees to furnish any and all products/services upon which prices are extended at the price submitted, and upon conditions in the specifications of the Invitation for Bid/Request for Proposal.

THE UNDERSIGNED HEREBY CERTIFIES THE FOREGOING BID/PROPOSAL SUBMITTED BY THE COMPANY LISTED BELOW HEREINAFTER CALLED “BIDDER/OFFEROR” IS THE DULY AUTHORIZED AGENT OF SAID COMPANY AND THE PERSON SIGNING SAID BID/PROPOSAL HAS BEEN DULY AUTHORIZED TO EXECUTE SAME. BIDDER/OFFEROR AFFIRMS THAT THEY ARE DULY AUTHORIZED TO EXECUTE THIS CONTRACT; THIS COMPANY; CORPORATION, FIRM, PARTNERSHIP OR INDIVIDUAL HAS NOT PREPARED THIS BID/PROPOSAL IN COLLUSION WITH ANY OTHER BIDDER/OFFEROR OR OTHER PERSON OR PERSONS ENGAGED IN THE SAME LINE OF BUSINESS; AND THAT THE CONTENTS OF THIS BID/PROPOSAL AS TO PRICES, TERMS AND CONDITIONS OF SAID BID/PROPOSAL HAVE NOT BEEN COMMUNICATED BY THE UNDERSIGNED NOR BY ANY EMPLOYEE OR AGENT TO ANY OTHER PERSON ENGAGED IN THIS TYPE OF BUSINESS PRIOR TO THE OFFICIAL OPENING OF THIS BID/PROPOSAL.

Company Name	NorthStar EMS
Street Address of Principal Place of Business	1100 S. Stemmons
City, State, Zip	Lake Dallas, Texas 75065
Phone of Principal Place of Business	214-943-0555
Fax of Principal Place of Business	940-382-6951
E-mail Address of Representative	bskiles@northstarems.com
Federal Identification Number	76-0587136
Date	7/25/2011
Acknowledgement of Addenda	#1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6 <input type="checkbox"/>
Authorized Representative Name	Billy Skiles
Authorized Representative Title	Business Development
Signature (Required for paper bid submission)	Billy Skiles

Supplier: **NorthStar EMS**

AFFIDAVIT OF COMPLIANCE

I, the undersigned, declare and affirm that my company is in compliance with the Immigration and Reform Act of 1986 and all employees are legally eligible to work in the United States of America.

I further understand and acknowledge that any non-compliance with the Immigration and Reform Act of 1986 at any time during the term of this contract will render the contract voidable.

Name of Company **NorthStar EMS**

Title of Officer **CEO**

Name of Officer **Donna Russell**

Date: **7/25/11**

Supplier: **NorthStar EMS**

CONFLICT OF INTEREST QUESTIONNAIRE FORM CIQ	
For vendor or other person doing business with local governmental entity	
<p>This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity.</p> <p>By law this questionnaire must be filed with the records administrator of the local government not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.</p> <p>A person commits an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.</p>	OFFICE USE ONLY
	Date Received
1	<p>Name of person doing business with local governmental entity.</p> <p>Donna Russell</p>
2	<p><input type="checkbox"/> Check this box if you are filing an update to a previously filed questionnaire.</p> <p>(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than September 1 of the year for which an activity described in Section 176.006(a), Local Government Code, is pending and not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)</p>
3	<p>Name each employee or contractor of the local governmental entity who makes recommendations to a local government officer of the governmental entity with respect to expenditures of money AND describe the affiliation or business relationship.</p> <p>None</p>
4	<p>Name each local government officer who appoints or employs local government officers of the governmental entity for which this questionnaire is filed AND describe the affiliation or business relationship.</p> <p>None</p>

Adopted 11/02/2005

FORM CIQ

CONFLICT OF INTEREST QUESTIONNAIRE

Page 2

For vendor or other person doing business with local governmental entity

5 **Name of local government officer with whom filer has affiliation or business relationship.
(Complete this section only if the answer to A, B, or C is YES.)**

This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or other relationship. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of the questionnaire? Yes No

B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local government officer named in this section AND the taxable income is not from the local governmental entity? Yes No

C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government officer serves as an officer or director, or holds an ownership of 10 percent or more? Yes No

D. Describe each affiliation or business relationship.
n/a

6

Donna Russell **07/25/2011**
Signature of person doing business with the governmental entity Date

Adopted 11/02/2005

Supplier: **NorthStar EMS**

In order to better serve our bidders, the Collin County Purchasing Department is conducting the following survey. We appreciate your time and effort expended to submit your bid. Please take a moment to complete the below. Should you have any questions or require more information please call (972) 548-4165.

HOW DID YOU RECEIVE NOTICE OF THIS REQUEST FOR BID OR PROPOSALS?

McKinney Courier-Gazette? Yes No

Plan Room? Yes No

Collin County Web-Site? Yes No

Facsimile or email from BidSync? Yes No

Other

HOW DID YOU RECEIVE THE BID DOCUMENTS?

Downloaded from Home Computer? Yes No

Downloaded from Company Computer? Yes No

Requested a Copy from Collin County? Yes No

Other

Thank You,

Collin County Purchasing Department

Weatherall Family Funeral Service LLC

Bid Contact **Gerald Weatherall**
GERALD_WEATHERALL@YAHOO.COM
 Ph 972-804-5995

Address **PO Box 150423**
Dallas, TX 75315

Qualifications **MBE WBE**

Item #	Line Item	Notes	Unit Price	Qty/Unit	Total Price	Attch.	Docs
06221-11--01-01	Transport from location within Collin County to Collin County Medical Examiner	Supplier Product Code:	First Offer - \$125.00	1 / each	\$125.00		Y
06221-11--01-02	Transport from location outside Collin County to Collin County ME	Supplier Product Code:	First Offer - \$175.00	1 / each	\$175.00		Y
Supplier Total						\$300.00	

Supplier: **Weatherall Family Funeral Service LLC**

**SIGNATURE FORM
COLLIN COUNTY, TEXAS**

DELIVERY WILL BE F.O.B. INSIDE DELIVERY AT COLLIN COUNTY DESIGNATED LOCATIONS AND ALL TRANSPORTATION CHARGES PAID BY THE SUPPLIER TO DESTINATION.

DELIVERY TO BE SPECIFIED IN CALENDAR DAYS FROM DATE OF ORDER. **1 15**

WE **DO NOT** TAKE EXCEPTION TO THE BID SPECIFICATIONS.

WE **TAKE** EXCEPTION TO THE BID SPECIFICATIONS (EXPLAIN):

N/a

COMPANY INFORMATION/PROFILE/REFERENCES

Preferential Requirement: The County of Collin, as a governmental agency of the State of Texas, may not award a contract to a nonresident bidder unless the nonresident's bid is lower than the lowest bid submitted by a responsible Texas resident bidder by the same amount that a Texas resident bidder would be required to underbid a nonresident bidder to obtain a comparable contract in the state in which the nonresident's principal place of business is located (Government Code, Title 10, V.T.C.A., Chapter 2252, Subchapter A). Bidder shall make answer to the following questions by selecting the appropriate radio button or inserting information in the box provided:

Is your principal place of business in the State of Texas? Yes No

If the answer to question is "yes", no further information is necessary; if "no", please indicate:

in which state is your principal place of business is located: **Dallas**

if that state favors resident bidders (bidders in your state) by some dollar increment or percentage: Yes No

if "yes", what is that dollar increment or percentage?

Company Profile: IS YOUR FIRM?

Sole Proprietorship Yes No

General Partnership Yes No

Limited Partnership Yes No

Corporation Yes No

Other Yes No

List Legal Names in Company: **Weatherall Family Funeral Service LLC**

List at least three (3) companies or governmental agencies where these same/like products/services, as stated herein, have been provided. Include company name, address, contact name and telephone number.

Collin County Medical Examiner

William Rohr, MD

700 B Wilmeth Road

McKinney, Texas 75069

972/548-3775

Federal Bureau of Prisoners

3150 Horton Road

Fort Worth, Texas

Veronica Kaether

817/413-3040

Federal Bureau of Prisoners

PO Box 27066 -"J" Street Bldy 3000

Fort Worth, Texas 76127

Paul Brown

817/782-4126

AS PERMITTED UNDER TITLE 8, CHAPTER 271, SUBCHAPTER F, SECTION 271.101 AND 271.102 V.T.C.A. AND TITLE 7, CHAPTER 791, SUBCHAPTER C, SECTION 791.025, V.T.C.A., OTHER LOCAL GOVERNMENTAL ENTITIES MAY WISH TO ALSO PARTICIPATE UNDER THE SAME TERMS AND CONDITIONS CONTAINED IN THIS CONTRACT. EACH ENTITY WISHING TO PARTICIPATE MUST ENTER INTO AN INTERLOCAL AGREEMENT WITH COLLIN COUNTY AND HAVE PRIOR AUTHORIZATION FROM VENDOR. IF SUCH PARTICIPATION IS AUTHORIZED, ALL PURCHASE ORDERS WILL BE ISSUED DIRECTLY FROM AND SHIPPED DIRECTLY TO THE LOCAL GOVERNMENTAL ENTITY REQUIRING SUPPLIES/SERVICES. COLLIN COUNTY SHALL NOT BE HELD RESPONSIBLE FOR ANY ORDERS PLACED, DELIVERIES MADE OR PAYMENT FOR SUPPLIES/SERVICES ORDERED BY THESE ENTITIES. EACH ENTITY RESERVES THE RIGHT TO DETERMINE THEIR PARTICIPATION IN THIS CONTRACT. WOULD BIDDER BE WILLING TO ALLOW OTHER LOCAL GOVERNMENTAL ENTITIES TO PARTICIPATE IN THIS CONTRACT, IF AWARDED, UNDER THE SAME TERMS AND CONDITIONS? Yes No

By signing and submitting this Bid/Proposal, Bidder/Offeror acknowledges, understands the specifications, any and all addenda, and agrees to the bid/proposal terms and conditions and can provide the minimum requirements stated herein. Bidder/Offeror acknowledges they have read the document in its entirety, visited the site, performed investigations and verifications as deemed necessary, is familiar with local conditions under which work is to be performed and will be responsible for any and all errors in Bid/Proposal submittal resulting from Bidder/Offeror's failure to do so. Bidder/Offeror acknowledges the prices submitted in this Bid/Proposal have been carefully reviewed and are submitted as correct and final. If Bid/Proposal is accepted, vendor further certifies and agrees to furnish any and all products/services upon which prices are extended at the price submitted, and upon conditions in the specifications of the Invitation for Bid/Request for Proposal.

THE UNDERSIGNED HEREBY CERTIFIES THE FOREGOING BID/PROPOSAL SUBMITTED BY

THE COMPANY LISTED BELOW HEREINAFTER CALLED "BIDDER/OFFEROR" IS THE DULY AUTHORIZED AGENT OF SAID COMPANY AND THE PERSON SIGNING SAID BID/PROPOSAL HAS BEEN DULY AUTHORIZED TO EXECUTE SAME. BIDDER/OFFEROR AFFIRMS THAT THEY ARE DULY AUTHORIZED TO EXECUTE THIS CONTRACT; THIS COMPANY; CORPORATION, FIRM, PARTNERSHIP OR INDIVIDUAL HAS NOT PREPARED THIS BID/PROPOSAL IN COLLUSION WITH ANY OTHER BIDDER/OFFEROR OR OTHER PERSON OR PERSONS ENGAGED IN THE SAME LINE OF BUSINESS; AND THAT THE CONTENTS OF THIS BID/PROPOSAL AS TO PRICES, TERMS AND CONDITIONS OF SAID BID/PROPOSAL HAVE NOT BEEN COMMUNICATED BY THE UNDERSIGNED NOR BY ANY EMPLOYEE OR AGENT TO ANY OTHER PERSON ENGAGED IN THIS TYPE OF BUSINESS PRIOR TO THE OFFICIAL OPENING OF THIS BID/PROPOSAL.

Company Name	Weatherall Family Funeral Service LLC
Street Address of Principal Place of Business	2830 S. Ervay St
City, State, Zip	Dallas, Texas, 75215
Phone of Principal Place of Business	214/421-9906
Fax of Principal Place of Business	214/565-5054
E-mail Address of Representative	gerald_weatherall@yahoo.com
Federal Identification Number	32-0094113
Date	07/15/2011
Acknowledgement of Addenda	#1 € #2 € #3 € #4 € #5 € #6 €
Authorized Representative Name	Gerald D. Weatherall
Authorized Representative Title	President
Signature (Required for paper bid submission)	Gerald D. Weatherall

Supplier: Weatherall Family Funeral Service LLC

AFFIDAVIT OF COMPLIANCE

I, the undersigned, declare and affirm that my company is in compliance with the Immigration and Reform Act of 1986 and all employees are legally eligible to work in the United States of America.

I further understand and acknowledge that any non-compliance with the Immigration and Reform Act of 1986 at any time during the term of this contract will render the contract voidable.

Name of Company **Weatherall Family Funeral Service LLC**

Title of Officer **President**

Name of Officer **Gerald D Weatherall**

Date: **0715/2011**

Supplier: **Weatherall Family Funeral Service LLC**

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4	<p>Name each local government officer who appoints or employs local government officers of the governmental entity for which this questionnaire is filed AND describe the affiliation or business relationship.</p> <p>None</p>

Adopted 11/02/2005

Supplier: **Weatherall Family Funeral Service LLC**

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Plan Room?	<input type="radio"/>	Yes	<input type="radio"/>	No
Collin County Web-Site?	<input type="radio"/>	Yes	<input type="radio"/>	No
Facsimile or email from BidSync?	<input type="radio"/>	Yes	<input type="radio"/>	No

Other **By Collin County**

HOW DID YOU RECEIVE THE BID DOCUMENTS?

Downloaded from Home Computer?	<input type="radio"/>	Yes	<input type="radio"/>	No
Downloaded from Company Computer?	<input type="radio"/>	Yes	<input type="radio"/>	No
Requested a Copy from Collin County?	<input type="radio"/>	Yes	<input type="radio"/>	No

Other

Thank You,

Collin County Purchasing Department