

# **EMERGENCY SPILL RESPONSE PROVIDER**

## **RFP# 09-ESRP-2045**

The Pennsylvania Turnpike Commission is now accepting applications for vendors to provide Emergency Hazardous Material Spill Response on the Turnpike System for the following section:

**East of Ft. Littleton Interchange MP 179.5 to Reading Interchange MP 286 (includes Reading Interchange)**

### **Requirements**

The Commission requires that interested parties meet specific requirements:

- Insurance requirements (available upon request)
- Meet Pennsylvania Turnpike Commission standards as well as compliance with local, state, and federal laws regarding transportation, hazardous waste, and worker protection. Emergency Spill Response Provider will be responsible for assessment, control, containment, removal, and disposal of all material regarding hazmat incidents on the Pennsylvania Turnpike System.
- Emergency Spill Response Provider agrees to make its equipment and services available for these purposes and the Commission agrees to pay the Emergency Spill Response Provider a predetermined amount for each incident that the Emergency Spill Response Provider responds to on the Pennsylvania Turnpike System.
- Emergency Spill Response Provider shall be responsible for all incident recovery fees directly with the insurance carriers. For any un-reimbursed costs the Emergency Spill Response Provider should follow Section 210 Recovery of Response Costs, under the Hazardous Material Emergency Planning and Response Act 165.
- The Commission requires that interested parties be Pennsylvania Emergency Management Agency "PEMA" certified. If interest parties are not "PEMA" certified they will be required to submit an application for "PEMA" certification within 30 days from issuance of a contract. The contract will be terminated, if the application is not submitted to "PEMA" within 30 days of the issuance of the contract.

### **Application Evaluation and Submission**

An on-site, video-taped inspection will be scheduled to verify that the information contained in the application is correct. The selection process involves review and recommendation to the Commission.

Please refer to the application attached to this advertisement posting. The application and all supporting documents submitted will become the property of the Pennsylvania Turnpike Commission. The Commission reserves the right to reject any and all applications.

All completed applications must be sent to the Commission using the appropriate address listed below and must be received no later than **12:00 Noon Wednesday, June 10, 2009.**

**Courier or Hand-carried (physical) address:**

Wanda Metzger, Contracts Administrator  
Pennsylvania Turnpike Commission  
Department of Contracts Administration  
700 South Eisenhower Boulevard  
Middletown, PA 17057

**Mailing address:**

Wanda Metzger, Contracts Administrator  
Pennsylvania Turnpike Commission  
Department of Contracts Administration  
P.O. Box 67676  
Harrisburg, PA 17106-7676

**Please note that use of U.S. Mail delivery does not guarantee delivery by the listed time for submission. Applicants mailing applications should allow sufficient delivery time to ensure timely receipt of their applications.**



**PENNSYLVANIA TURNPIKE COMMISSION  
EMERGENCY SPILL RESPONDER APPLICATION  
RFP # 09-ESRP-2045**

**Coverage Location:** East of Ft. Littleton Interchange MP 179.5 to Reading Interchange MP 286 (includes Reading Interchange).

1. Name, address, business phone number, fax phone number, 24 hr number and e-mail address of your company.

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2. Where is your business located? Give actual mileage and accurate directions to the nearest Turnpike Interchange.

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3. Name of owner(s)/proprietor(s), partners, principal officers (for corporations, LLC's etc.).

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4. Form of ownership: Individual proprietorship \_\_\_\_\_  
 Partnership \_\_\_\_\_  
 Registered business corporation \_\_\_\_\_  
 Other \_\_\_\_\_

5. Do you own/lease the facility? \_\_\_\_\_

6. If leased, give owner's name, address, and expiration date of lease. Provide a copy of the lease.

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7. If leased, do you have the option to renew? Yes \_\_\_\_\_ No \_\_\_\_\_

8. If answer is yes, give number of years until renewal. \_\_\_\_\_
9. How long have you been operating at this location? \_\_\_\_\_
10. Is your organization PEMA certified under Act 1990-165? Yes \_\_\_\_\_ No \_\_\_\_\_
- A. If so, when did you receive certification? \_\_\_\_\_
- B. When does your PEMA certification expire? \_\_\_\_\_
- C. If your organization is not PEMA certified can you become PEMA certified within 30 days? Yes \_\_\_\_\_ No \_\_\_\_\_
11. Years experience in HAZMAT response. \_\_\_\_\_
12. Has your company ever been charged with any local, state or federal violations?  
Yes \_\_\_\_\_ No \_\_\_\_\_, If so please provide explanation.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
13. Does your company have the personnel and equipment capable of cleaning up a potentially large HAZMAT Incident? (e.g. an overturned tanker truck is leaking a flammable liquid on the Turnpike System, will your company have the resources to contain, control, and off-load the flammable liquid, so the vehicle can be removed from the roadway)?  
Yes \_\_\_\_\_ No \_\_\_\_\_
14. Please list hazardous waste response capabilities including types of waste handled. (chemical, biological & radiological, etc.)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
15. Does your operation provide 24/7 emergency spill response? Yes \_\_\_\_\_ No \_\_\_\_\_
16. Identify where wastes will be transported, specifying approved treatment, storage and disposal facilities. (TSDF's)
17. Total Number of HAZMAT Technicians that are full time employees?  
\_\_\_\_\_

18. The administrative officer responsible to sign the application. Please list additional personnel on a separate page.

- A. Name \_\_\_\_\_
- B. Address \_\_\_\_\_
- C. City/Zip \_\_\_\_\_
- D. Phone # \_\_\_\_\_
- E. E-Mail \_\_\_\_\_

19. The person responsible for overseeing the HAZMAT team. Please list additional personnel on a separate page.

- A. Name \_\_\_\_\_
- B. Address \_\_\_\_\_
- C. City/Zip \_\_\_\_\_
- D. Phone # \_\_\_\_\_
- E. E-Mail \_\_\_\_\_

20. Please provide the following insurance information for your facility or any sub-contractor you may utilize also provide a certificate of insurance.

- A. Policy Number \_\_\_\_\_
- B. Company \_\_\_\_\_
- C. Address \_\_\_\_\_
- D. Agent/Phone # \_\_\_\_\_
- E. Subcontractor Insurance Certificate: \_\_\_\_\_

21. Do you certify, either directly or by agreement with a third party, worker's compensation and ordinary public liability insurance for all members of its HAZMAT team? Yes \_\_\_  
No \_\_\_

22. Provide a copy of all city and state licenses you and/or your operation possess.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

23. Please provide the following permit and/or license numbers:

- A. PEMA Certification Number \_\_\_\_\_
- B. EPA Identification Number \_\_\_\_\_
- C. EPA/State Facility Permit \_\_\_\_\_
- D. State of PA Hazardous Waste Hauler certificate/Permit \_\_\_\_\_
- E. Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

24. Please provide your rate schedule for personnel, equipment, tools supplies etc.

25. Have you, any principal officer(s), or key employee(s) ever been convicted of a crime(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

26. Please provide a team roster (attachment 4) and criminal history report of any individual who will respond to incidents on Commission property (all principles, officers, owners, directors or employees). <http://www.psp.state.pa.us/psp/lib/psp/sp4-164.pdf>

27. Have you or any principal officer(s) or key employee(s) been adjudged bankrupt or reorganized due to insolvency in the last 10 years, or was or is otherwise subject to any such prior or pending bankruptcy or reorganization proceeding? Yes \_\_\_\_\_ No \_\_\_\_\_

28. Please provide a letter of reference from each of the following:  
commercial account, city, county and state agency.

29. Please provide current photographs of your facility (ies) that show at least the following:

- Exterior of facility (ies), showing all sides of the building(s).
- Storage lot(s), on or off site, including a secured fenced storage lot, if available.

30. Describe your business/service facility (ies), noting the square footage size of the entire building(s), office size.

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31. List each county for which your HAZMAT team is responsible for providing HAZMAT response per the PEMA, Emergency Management Directive No. D2004-1.

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32. Do you have the required apparatus, equipment inventory and supplies listed in Attachment 5? Yes \_\_\_\_\_ No \_\_\_\_\_

33. Do you have an emergency response plan and procedures in accordance with 29 CFR 1910.120(q) (2) and (3)? Yes \_\_\_\_\_ No \_\_\_\_\_
34. Do you have a personal protective equipment for HAZMAT teams as required by 29CFR 1910.120(g) (5) and (q) (2)? Yes \_\_\_\_\_ No \_\_\_\_\_
35. Has your operation instituted a medical surveillance program for members of its HAZMAT team in accordance with 29 CFR1910.12 (q) (9)? The applicant agrees to keep each individual's medical record on file for thirty (30) years after the date the individual leaves the HAZMAT team. Yes \_\_\_\_\_ No\_\_\_\_\_
36. The Emergency Spill Response Vendor is responsible for providing specific information to the Pennsylvania Turnpike Commission within 7 working days.
- A. Vendors should commit to a regular review of other performance measures including compliance records, reported violations and fines.
  - B. Regulatory compliance as evidenced by current licenses, permits and or/registrations.

By my signature, I swear, or affirm, that the foregoing information is a true and accurate description of the business of \_\_\_\_\_  
Name of Company  
and accurately states its business practices and fee schedules.

I understand that failure to truthfully and accurately describe the business practices and fee schedule(s) may eliminate \_\_\_\_\_  
Name of Company  
from consideration as an Emergency Spill Responder with the Pennsylvania Turnpike Commission.

*The Commission will schedule an on site visit to evaluate your facility. You may send additional information and documentation at any time during the application process.*

Signed \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

\_\_\_\_\_, being duly sworn, deposes and says he  
is \_\_\_\_\_ of the above named garage.

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_

in the year \_\_\_\_\_



## **Addendum No. 1**

**RFP # 09-ESRP-2045**

### **Emergency Spill Response Provider**

**Prospective Respondents: You are hereby notified of the following information in regard to the referenced RFP:**

#### **ADDITIONS**

1. The attachments were inadvertently not included with the original document posting. Attachments No. 1 and 2 have now been attached to this Addendum and are to be made part of this RFP.

#### **REVISIONS**

1. Page 4, Item No. 26. Attachment 4 should be changed to read Attachment 1.
2. Page 4, Item No. 32. Attachment 5 should be changed to read Attachment 2.

**All other terms, conditions and requirements of the original RFP posted May 21, 2009 remain unchanged unless modified by this Addendum.**

HAZMAT TEAM ROSTER: LIST OF TRAINING CERTIFICATIONS,  
CRIMINAL HISTORY CHECKS AND MEDICAL SURVEILLANCE

Name of Hazmat Team:	Date:
Hazmat Team Chief:	Hazmat Team Administrative Officer:
Address:	Address:
Business Phone:	Business Phone:
Email address:	Email address:

List the OSHA training level or competency each member is certified in. Use the highest level of training attained, based upon the following categories: (1) Awareness; (2) Operations; (3) Technician; (4) HM Safety Officer; (5) HM Branch Officer; (6) Hazmat Incident Commander; or (7) Support Role.

Name of Employee	Highest level of Certification attained (numbers listed above)	*Date of Certification	Employee Status (F) Full Time (P) Part Time (V) Volunteer	Criminal History Check Date Completed	Medical		Surveillance Annual or as required Pass Date
					Baseline Physical	Pass Date	

(Continue on Reverse)  
\* Attach a photocopy of each member's certificate.

**HAZMAT TEAM ROSTER – Continued**

Name of Employee	Highest level of Certification attained (numbers listed above)	*Date of Certification	Employee Status (F) Full Time (P) Part Time (V) Volunteer	Criminal History Check Date Completed	Medical		Surveillance Annual or as required Pass Date
					Baseline Physical Pass Date		

**SPECIALIST EMPLOYEES**  
 (Explosives specialist, metallurgical specialist, toxicological specialist, engineering specialist, chemical specialist, radiological specialist, biological specialist, WMD training)

Name of Employee	Area of Specialty	Date Certified	Area of Specialty	Date Certified	Area of Specialty	Date Certified	Area of Specialty	Date Certified

### HAZMAT TEAM EQUIPMENT LIST

The following equipment list is required to maintain certification as a Hazmat Team in Pennsylvania. ONLY those items identified as (Recommended) are optional. All other items are required.

**References** - Current edition required - No more than one edition or two years out of date. The electronic version, CD or hard drive, is authorized if on-site printer capability is available.

Item #	Description	Yes	No	Remarks
1.	Jane's Chem-Bio Handbook Second Edition ISBN# 0-7106-2568-5			
2.	Tempest CB-FRG (Chem-Bio) First Responder Guidebook			
3.	NIOSH Pocket Guide to Chemical Hazards (CD)			
4.	North American Emergency Response Guidebook (ERG-2000) ISBN: 0-16-050173-3 (Free)			
5.	CHRIS Hazardous Chemical Data Manual (CD) (2000) Serial Number 79-19080			
6.	Irving Sax Manuals (Set) (CD) 10th Edition (2000) ISBN 0-471-35407-4			
7.	ACGIH Threshold Limit Values Guidebook (CD)			
8.	Brethericks Handbook of Reactive Chemical Hazards (CD)			
9.	Merck Index (CD) 13th Edition (2001) ISBN # 0911910131			
10.	Chemical Dictionary (CD) Hawley's 14th Editions (2001) ISBN # 0-471-055336			
	Matheson Gas Book & First Aid			
11.	Crop Protections Handbook (CD) (2003) ISBN # 9992695463			
12.	Emergency Care For Haz Mat Exposure, or, HazMat Injuries			
13.	AAR/BOE Field Guide to Tank Car Identification			
14.	Bureau of Explosives: American Railroad Emergency Action Guide (2003) BE220			
15.	GATX Tank Car Manual			
16.	D.O.T. Radiation Emergency Handbook, June 1999			
17.	B.O.E. Emergency Handling of Hazardous Materials in Surface Transportation (CD) (2003) BE305 79- 19160			
18.	Large regional map, topographical (USGS) and Highway Maps, County and City Maps			
19.	List of SARA facilities' addresses with specific location directions in the hazmat team's service area inclusive index of MSDS information			
20.	ESF #10 Hazardous Materials Response			

	Plan/Resource list			
21.	NFPA Fire Protection Guide of Hazardous Materials 13th Edition: ISBN# 087765400X			
22.	Firefighters Guide to Hazardous Materials			
23.	NFPA Emergency Management of Hazardous Materials Incidents			
24.	EPA List of Lists, Consolidated List of Chemicals			

**Personal Protective Equipment**

Item #	Description	Yes	No	Remarks
1.	Chemical Protective Clothing (CPC) Level "A" as defined in NFPA 471, Responding to Hazardous Materials Incidents, Chapter 7 Regardless of type of suits, a minimum of 5 each must be immediately available on response unit (2 for entry, 2 for back-up and 1 spare)			
2.	Leak test kits for level "A" suits. If suits are not tested by a third party			
3.	CPC Level "B" as defined in NFPA 471, Responding to Hazardous Materials Incidents, Chapter 7 Minimum of 24 suits			
4.	CPC Level "C" as defined in NFPA 471, Responding to Hazardous Materials Incidents, Chapter 7			
5.	Flash Cover Protective Suits Amount should be based on entry team members			
6.	Positive pressure, 60-minute duration SCBA's, (minimum of 5)			
7.	NIOSH approved air purifying respirators, full-face with select cartridges			
8.	NIOSH approved air-purifying respirators, full-face with select cartridges Chemical resistant gloves (Neoprene, Nitrile, Butyl, Viton, disposable, leather, surgical, cryogenic)			
9.	Disposable foot covers			
10.	Chemical resistant boots			
11.	Hard hats (Safety or construction type - not fire helmet)			
12.	Safety glasses and goggles with side shields			
13.	Coveralls			
14.	Hearing Protection for high level noise areas (plugs, muffs, etc.)			

**Physical Methods of Mitigation**

Item #	Description	Yes	No	Remarks
1	Basic Patch Kits (Edwards-Cromwell or equivalent)			
2.	Plug and dike material Assorted plugs and wedges (wood)			
3.	Chlorine "A" Kit			
4.	Chlorine "B" Kit			
5.	Chlorine "C" Kit (Optional if no rail service in response or mutual aid area)			
6.	Over-packs and Recovery drums, Lab pac's (Assorted sizes and quantities)			
7.	Rolled Visqueen/PVC/plastic sheeting			
8.	Transfer equipment			(Recommended)
9.	Vacuum			(Recommended)
10.	Mercury spill containment			(Recommended)

**Chemical Methods of Mitigation**

1.	Quantities of neutralizer Acid - minimum 50 pounds (or equivalent) Caustic - minimum 50 pounds (or equivalent)			
2.	Assortment of selective and non-selective booms, socks, bag sheets, pillows, pads, etc. for use as absorbent and adsorbent materials			
3.	Foam solution, foam concentrates or water additives required to neutralize, minimize vapor release: quantity based on available resources, risk and transportation commodities within the region			(Recommended)

**Suppression Equipment (chemical and metals)**

1.	ABC dry chemical extinguisher 20#			
2.	Purple K - 30# extinguisher			
3.	Class D agent - 2/30# minimum 1 ea MTL-X or 1ea LITHIX for lithium fires and an identified resource of large amounts of Class D agents, sand or dirt for large/industrial-type fires			

**Tools** - It is required that non-sparking tools be used where applicable.

Item #	Description	Yes	No	Remarks
1.	Assortment of basic sockets, wrenches, hammers, pliers, screwdrivers, brushes, drill bits, saws, etc.			
2.	Grounding equipment/bonding equipment			
3.	Hand Truck/Drum Dolly			
4.	Hydraulic power rescue tool with assorted attachments (available to teams through mutual aid)			
5.	Drum opener			
6.	Shovels - Round-point or square-point, non-sparking			
7.	Saws, Axes and Pry bars			
8.	Web strapping			
9.	Axes: pick-head			
10.	Easy out stud extractor (for broken or sheared bolts)			
11.	Rake			
12.	Bolt cutters			(Recommended)
13.	Crowbars			(Recommended)
14.	Come-a-long (pulley)			(Recommended)
15.	Assorted cribbing			(Recommended)
16.	Scissors			(Recommended)
17.	Funnels, miscellaneous sizes, types			(Recommended)
18.	Measuring tape, 100 foot			(Recommended)

**Monitoring and Detection Equipment**  
 \*Not required if a higher-level capability is available to detect the presence of nerve and blister agents, and this substitution is authorized by the inspection team.

Item #	Description	Yes	No	Remarks
1.	Multi-gas detector			
2.	Radiological monitors (low range, alpha, beta, gamma) (CDV's are not a substitute)			
3.	pH paper/meter			
4.	Heat scanner/Thermal Imagers (available through immediate dispatch or mutual aid)			
5.	Thermometers - air, surface and liquid			
6.	Assortment of sampling containers (plastic and glass)(Recommended)			
7.	Photoionization Detector (PID)			
8.	M-8 Detection Paper or equivalent for chemical agent (weapons grade) detection			*
9.	M-9 Detection Paper (Roll) or equivalent for			*

	chemical agent (weapons grade) detection			
10.	M-256A1 Detector Kit or equivalent for chemical agent detection (weapons grade; blister: CX/HD/L, blood: AC/CK, and nerve: GB/VX)			*
11.	M-18A2 Chemical Agent Detector Kit for surface and vapor chemical agent analysis (GB, CG, HE, L, and AC) or equivalent colorimetric detector tubes			*
12.	Access to gas chromatographic system for analysis: (DEP, Civil Support Team or RCTTF)			
13.	Drum sampler			
14.	PCB Kit			
15.	Haz Cat Kit or equivalent			(Recommended)
<b>Decontamination Equipment</b> - Capability to perform Physical and Chemical decontamination. If a higher level of capability is available, it must be available at time of certification inspection.				
1.	Solution ingredients, miscellaneous			
2.	Brushes, synthetic			
3.	Hand Pump/spray devices			
4.	Stools, no-back chairs or benches			
5.	Containment pools, tarps or equivalent			
6.	Hoses/nozzles (Assorted sizes)			
7.	Tent or comparable item			
8.	Water temperature control device (water heater)			(Recommended)



<u>Communications Equipment</u>				
Item #	Description	Yes	No	Remarks
1.	Capability for Hazmat Team Chief to communicate with the: Incident Commander <u>and</u> County Emergency Management <u>and</u> Coordinator (EMC) or 9-1-1 Emergency Operations Center. If capability does not exist, a Command Post with this capability must be simultaneously dispatched with the team.			
2.	Capability for Hazmat Team Chief to communicate with all Entry Team Members and Branch Chiefs			
3.	Capability for each Entry Team member to communicate with at least the Back-up entry team. Communication systems must be <u>intrinsically safe</u> . The radio must meet the requirements of Underwriters Laboratories Inc®.			
4.	Capability for all Entry Team members to communicate with each other. Communication systems must be <u>intrinsically safe</u> . The radio must meet the requirements of Underwriters Laboratories Inc®			
5.	Alert pagers or other personal alerting system dispatch capabilities/units			
6.	Mobile telephone			(Recommended)
7.	Fax machine with transmit and receive capability under current subscription for access to recognized system			(Recommended)
<u>Special Equipment</u>				
1.	On-Scene Weather Station to Measure Temperature, Wind Direction and Speed, Relative Humidity			
2.	Binoculars			
3.	Digital or Polaroid-style instant camera			
4.	Flashlights (explosion proof) with extra batteries			
5.	First aid kit			
6.	Barricade tape, 2-color			(Recommended)
7.	Traffic cones			(Recommended)
8.	Various office supplies (pens, markers, paper, tags)			(Recommended)
9.	Plastic bags (various sizes)			(Recommended)
10.	1/2" and 3/4" synthetic rope			(Recommended)
11.	Drinking water container/ice chest			(Recommended)

<u>Vehicles</u>				
1.	Response van(s) or trailer(s) capable of carrying all equipment On-board self-sustaining power system or availability of dedicated power generation system to immediately provide power at the scene of incident			
2.	Sufficient quantities of vehicle(s) to carry equipment and personnel to incident, and to provide on-board service for hazmat team members			

## **Addendum No. 2**

**RFP # 09-ESRP-2045**

### **Emergency Spill Response Provider**

**Prospective Respondents: You are hereby notified of the following information in regard to the referenced RFP:**

#### **ADDITIONS**

**1. Questions and Answers.**

Written questions may be submitted to clarify any points in the RFP which may not have been clearly understood. Written questions should be submitted to the Contracts Administration Department, c/o Wanda Metzger at the Pennsylvania Turnpike Commission, 700 South Eisenhower Blvd, Middletown, PA 17057 (Street Address) or the mailing address is P.O. Box 67676, Harrisburg, Pa 17106 or email to [Wmetzger@paturnpike.com](mailto:Wmetzger@paturnpike.com) Questions must be received no later than **July 1, 2009, by 12:00 Noon**. All questions and written answers will be issued as an addendum to and become part of this RFP.

#### **REVISIONS**

- 1. The application submission deadline has been changed to 12:00 Noon, Wednesday, July 29, 2009.**

**All other terms, conditions and requirements of the original RFP posted May 21, 2009 remain unchanged unless modified by this Addendum.**

## **Addendum No. 3**

RFP # 09-ESRP-2045

### **EMERGENCY SPILL RESPONSE PROVIDER**

**Prospective Respondents: You are hereby notified of the following information in regard to the referenced RFP:**

Following are the answers to questions submitted in response to the above referenced RFP as of **July 1, 2009**. All of the questions have been listed verbatim, as received by the Pennsylvania Turnpike Commission.

**1. Is the RFP available in an electronic format such as Microsoft Word?**

Yes, the RFP application is attached in Microsoft Word format.  
Attachment 1 and 2 are only available in PDF format.

**2. Please clarify the structure of payment for the pre-determined amount for each incident the provider responds to on the system (bullet #3 on the first page of the RFP description). Is this a fixed, per-incident fee in addition to the time and material charges for the resources required to respond to the spill or is this intended to be based on a percentage of the actual resources deployed per event?**

This is a fixed per-incident response fee, predetermined by the Commission. The response fee is \$800.00 per incident. All other charges will be billed to the responsible party's insurance carrier.

**3. Will there be more than one provider selected per region?**

No. There will be only one provider selected for each region/area.

**4. (A). How will the provider's contracted rate schedule be enforced by the PTC when the provider is being requested to recover all costs direct from the responsible parties insurance company?**

The Commission will request the provider's current rate schedule to enforce the costs that are directed to the responsible party's insurance carrier.

**(B). What is the purpose of submitting rates if the provider will contract individually with each responsible party, per incident?**

For customer inquires, insurance company inquires and for prevailing rates.

- 5. (A). If the provider is dispatched by the PA Turnpike, does the responsible party have the right to select their own provider?**

The responsible party must use the Commissions contracted provider at an incident occurring on Commission property.

- (B). What is the provider to do if no representative of the Responsible Party is available to execute contracts off-hours to ensure payment to the provider?**

If a representative of the responsible party is unavailable, the spill must be contained and cleaned up, then the provider must pursue a lawsuit based on the concept of getting reimbursed for the value of the services they performed.

- 6. If the provider is dispatched by the PA Turnpike, and arrives on-site after the responsible party's vehicle has left the site, what methods would be employed to ensure cost recovery and communication on behalf of the provider?**

The Commission will provide as much information as possible related to the incident, so that the provider can ensure cost recovery.

- 7. (A). Will the PA Turnpike assume the role of generator of wastes generated during response and remediation activities?**

The responsible party will assume the role as generator of waste.

- (B). Will the PA Turnpike allow for temporary storage of generated wastes at pre-determined locations prior to the waste being transported to disposal facility?**

The provider may store generated waste at pre-determined locations only with authorization of Turnpike officials

- (C). What is the provider to do if the responsible party refuses to execute the required waste disposal paperwork with waste potentially stored on PA Turnpike property?**

Legal action must be taken to resolve waste disposal paperwork disputes.

**8. If the provider is denied payment by all proposed cost recovery methods, will the PA Turnpike guarantee payment for the provider's service?**

The Commission will not guarantee payment. If costs cannot be recovered by the responsible party's insurance carrier, the provider must pursue legal action to be reimbursed for the value of the services they have performed.

**9. Do we as a company have to submit a separate application for each EP&S office locations even if we are requesting consideration for more than one RFP locations?**

Your company must submit an application for each section of the Turnpike you would like to cover as an emergency spill response provider.

**10. Is there a response fee set in place and if so what is the dollar amount?**

Refer to question 2 of this addendum.

**11. If we are going to be billing a customer direct and you call us and we find there will be more than one responsible party how will the billing be accomplished?**

This is a business decision your company will have to make. Your company will have to bill each responsible party in this case.

All other terms, conditions and requirements of the original RFP dated **May 21, 2009** remain unchanged unless modified by this Addendum.

## **Addendum No. 4**

**RFP # 09-ESRP-2045**

### **Emergency Spill Response Provider**

**Prospective Respondents: You are hereby notified of the following information in regard to the referenced RFP:**

#### **ADDITIONS**

##### **1. Requirements**

**D/M/WBE Participation.** The Turnpike Commission is committed to the inclusion of disadvantaged, minority, and woman firms in contracting opportunities. Responding firms shall clearly identify DBE/MBE/WBE firms, expected to participate in this contract, in their Proposal. Proposed DBE/MBE/WBE firms must be certified by the Pennsylvania Department of General Services ([www.dgs.state.pa.us](http://www.dgs.state.pa.us)) or the Pennsylvania Unified Certification Program ([www.paucp.com](http://www.paucp.com)) at the time of the submission of the proposal. Inclusion of D/M/WBEs will be a factor in the evaluation determination for this RFP. **If further information is desired concerning DBE/MBE/WBE participation**, direct inquiries to the Pennsylvania Turnpike Commission's Contract Administration Department by calling (717) 939-9551 Ext. 4241.

#### **REVISIONS**

- 1.** The application submission deadline has been changed to **12:00 Noon, Thursday, August 6, 2009**. A proposal may be modified by the submission of a new sealed proposal or submission of a sealed modification which complies with the submission deadline requirements of this RFP.

**All other terms, conditions and requirements of the original RFP posted May 21, 2009 remain unchanged unless modified by this Addendum.**