

CITY OF CHICAGO  
DEPARTMENT OF PURCHASES.  
CONTRACTS AND SUPPLIES  
ROOM 403, CITY HALL, 121 N. LA SALLE ST.

CONTRACT ADMINISTRATION RECEIVED: \_\_\_\_\_ DATE: \_\_\_\_\_  
CACN RECOMMENDS: \_\_\_\_\_ DATE: \_\_\_\_\_  
UNIT MANAGER CONCURS: \_\_\_\_\_ DATE: \_\_\_\_\_  
BOARD SECRETARY RECEIVED: \_\_\_\_\_ DATE: \_\_\_\_\_

**JUSTIFICATION FOR NON-COMPETITIVE PROCUREMENT**

**COMPLETE THIS SECTION IF NEW CONTRACT, TERM AGREEMENT OR PURCHASE ORDER**

For contract(s) or purchase order, answer applicable questions in each of the 4 major subject areas below in accordance with the Instructions for Preparation of Non-Competitive Procurement Form on the reverse side.

Request that negotiations be conducted only with Med-Eng Systems Inc. for the product and/or services described herein.  
Name of Person or Firm  
This is a request for: 1 (One-Time Contract or P.O. per Requisition # 13042, copy attached) or Term Agreement or Delegate Agency (Check one). If Delegate Agency, this request is for "blanket approval" of all contracts within the \_\_\_\_\_ program. (Attach List)

**COMPLETE THIS SECTION IF AMENDMENT OR MODIFICATION TO CONTRACT**

Describe in detail the change in terms of dollars, time period, scope of services, etc., its relationship to the original contract and the specific reasons for the change. Indicate both the original and the adjusted contract amount and/or expiration date with this change, as applicable. Attach copy of all supporting documents. Request approval for a contract amendment or modification to the following:

Contract #: \_\_\_\_\_ Company or Agency Name: \_\_\_\_\_  
Specification #: \_\_\_\_\_ Contract or Program Description: \_\_\_\_\_  
Mod #: \_\_\_\_\_ (Attach List, if multiple)

Sergeant Mike Gerhardstein 312 746 7619 Mike Gerhardstein Police 3-2-04  
Originator Name Telephone Signature Department Date

Indicate SEE ATTACHED in each box below if additional space needed:

(XX) **PROCUREMENT HISTORY** The Chicago Police Department Bomb Squad has purchased all previous bomb suits MED ENG SYSTEMS INC. There are currently 18 Explosives Technicians assigned to the bomb squad and it is imperative that one additional bomb suit is procured.

(XX) **ESTIMATED COST** The cost of the body suit, helmet and essential accessories is \$14,909.00.

(XX) **SCHEDULE REQUIREMENTS** A.S.A.P. delivery is critical. It is imperative that this bomb suit be added to the Chicago Police Department Bomb Squad's inventory because it is the number one safety item used by the Explosives Technicians.

(XX) **EXCLUSIVE OR UNIQUE CAPABILITY** In the life threatening environment of explosives disposal situation, MED ENG SYSTEMS INC. is considered the leader in protective clothing. The company has engaged in extensive research and developments regarding blast, heat and overpressure studies. MED ENG SYSTEMS INC. is recognized by domestic and foreign country bomb squad as being the producer of the best available bomb suits.

(XX) **OTHER** The purchase of this bomb suit insure compatibility of components and accessories with the unit's other bomb suits in the event of maintenance and/or repair of other bomb suits. It also satisfy the need to use additional suits at an incident.

APPROVED BY: [Signature] 3/19/04  
DEPARTMENT HEAD OR DESIGNEE DATE BOARD CHAIRPERSON DATE



APRIL 2003

## SOLE SOURCE VENDOR STATEMENT

This letter is to certify that Med-Eng System Inc. is the manufacturer and direct dealer for our EOD Protective Equipment in North America. This equipment would include the EOD-8<sup>(D)</sup> Suit and Helmet, SRS-5<sup>(D)</sup> Suit and Helmet, Basic visor and Chem/Bio Visor.

In 1995, the EOD-7B<sup>(TM)</sup> bomb disposal suit/helmet system was introduced and set a new standard of protection for EOD/IEDD protective systems. In 1999, Med-Eng introduced the highly advanced and user friendly EOD-8<sup>(D)</sup> suit. The EOD-8 Helmet first production run was launched in December 2000, and the EOD-8 helmet went into final production in May 2001.

The flexible and versatile SRS5 Light Weight Explosive Protection System was presented for both mine clearance duties and police operations where Bio-Chemical explosive devices are suspected.

Other ensembles available from Med-Eng are: V-Top<sup>(R)</sup> Crowd Control Protective System, a unique HDE demining Ensemble and a revolutionary Anti-Personnel Mine Foot Protection System. (Patents pending)

### OTHER ACCESSORIES

Like all Med-Eng suits, the above are compatible with Body Cooling Systems. Med-Eng is the world wide distributor of the BCS3-A and BCS3-R Body Cooling Systems to the EOD community. HW-300 is designed specifically to meet the stringent requirements of Explosive Disposal Teams. The HW-300 is fully compatible with the Med-Eng EOD Series Helmets. The Med-Eng search lights, SL-307B and SL-SRS5 for our helmets and protective ballistic gloves are other options available from the EOD product line.

### REMOTE HANDLING TOOLS

Since 1998, Med-Eng Systems has been the Proprietor and Sole Distributor in North America for the Med-Eng Remote Handling Tools.

Remote handling equipment and tools that complement robotic vehicles or that may be used independently in a stand-alone configuration are available from Med-Eng Systems allowing the user to maintain minimum safety distances from a suspected device.

Tools such as the EOD Shields and the Advantage Hook and Line Kit and the Hazardous Devices Technicians Tool Kit, have aided in minimizing human exposure to an explosive device and improves operational flexibility.

We have (1) year warranty on Med-Eng equipment. All service repairs are performed at our facility only in Ottawa, Ontario, Canada by authorized Med-Eng technicians.



### Med-Eng Systems Inc.

2400 St. Laurent Blvd. Ottawa, ON Canada K1G 6C4  
 Tel: 1 (613) 739-9646 Toll Free (US and Canada) 1 (800) 644-9078 Fax: 1 (613) 739-4536  
 www.med-eng.com info@med-eng.com



**Med-Eng Systems Inc.**

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 Ottawa, Ontario, Canada  
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 Tel: 613-739-9646  
 Fax: 613-739-4536  
 E-mail: info@med-eng.com  
 Website: www.med-eng.com



**QUOTATION**

**Customer:**

CHICAGO POLICE DEPARTMENT  
 BOMB & ARSON SECTION  
 MICHAEL.GERHARDSTEIN@CHICAGOPOLICE.ORG  
 CHICAGO, IL  
 USA  
 SGT MIKE GERHARDSTEIN

<b>QUOTE ID</b>
Q04-0644
<b>CUSTOMER ID</b>

DATE	PAYMENT TERMS	DELIVERY	SHIPPING TERMS	CURRENCY	VALIDITY
05/03/2004	Net 30	10 wks a.o.	DESTINATION	US DOLLARS	08/03/2004

ITEM NO.	DESCRIPTION	QTY	UNIT PRICE	TOTAL PRICE
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1	910-001 EOD-8 SUIT MD Includes suit jacket with improved overpressure and fragmentation protection, blast attenuation liners, chest and sliding groin plates, integrated groin protector (IGP), trousers (with built-in high absorbing back protector), pre-curved protective inserts in the thighs and lower legs, toe grounder strap, carrying bag with shoulder straps and handles Fits size 5'8" to 6'2" (173 cm to 188 cm) Weight: 150 lbs to 220 lbs (68 kg to 100kg)	Qty: 1	\$9,964.00	\$9,964.00
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2	910-004 EOD-8 SUIT MS Fits size 5'5" to 5'9" (165 cm to 175 cm) Weight: 130 lbs to 160 lbs (60 kg to 73kg)	Qty: 1	\$9,964.00	\$9,964.00
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Med-Eng Systems Inc. will not be bound by any additional terms and conditions, whether contained in a Purchase Order or other document, unless expressly agreed to by Med-Eng Systems Inc. in writing or within our order acknowledgement.



0- / 0- / 2004

**CITY OF CHICAGO  
PURCHASE REQUISITION**

**Copy (Department)**

<b>DELIVER TO:</b>  801 BOMB & ARSON SECTION 3340 W. FILLMORE Chicago, IL	<b>REQUISITION:</b> 13042  <b>PAGE:</b> <b>DEPARTMENT:</b> 1 <b>PREPARER:</b> 57 - DEPARTMENT OF POLICE Joyce L Maxwell <b>NEEDED:</b> <b>PRE-APPROVE</b>
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**REQUISITION DESCRIPTION**  
 SOLE SOURCE - STANDARD PO - BOMB SUIT & HELMET  
 SPECIFICATION NUMBER: 22597

**COMMODITY INFORMATION**

LINE	ITEM	QUANTITY	UOM	UNIT COST	TOTAL COST						
1	68022 EOD-8 BOMB SUIT SIZE SMALL	1	Each	9,964.00	9,964.00						
<b>SUGGESTED VENDOR:</b> MED-ENG SYSTEMS INC		<b>REQUESTED BY:</b> Mike Gerhardstein									
<b>DIST</b>	<b>BFY</b>	<b>FUND</b>	<b>COST CTR</b>	<b>APPR</b>	<b>ACCNT</b>	<b>ACTV</b>	<b>PROJECT</b>	<b>RPT CAT</b>	<b>GENRL</b>	<b>FUTR</b>	
1	002	0244	0571005	0345	220345	0000	00000000	02Y631	00000	0000	9,964.00
<b>LINE TOTAL:</b>											<b>9,964.00</b>
2	68022 EOD-8 BOMB HELMET	1	Each	4,945.00	4,945.00						
<b>SUGGESTED VENDOR:</b> MED-ENG SYSTEMS INC		<b>REQUESTED BY:</b> Mike Gerhardstein									
<b>DIST</b>	<b>BFY</b>	<b>FUND</b>	<b>COST CTR</b>	<b>APPR</b>	<b>ACCNT</b>	<b>ACTV</b>	<b>PROJECT</b>	<b>RPT CAT</b>	<b>GENRL</b>	<b>FUTR</b>	
1	002	0244	0571005	0345	220345	0000	00000000	02Y631	00000	0000	4,945.00
<b>LINE TOTAL:</b>											<b>4,945.00</b>
<b>REQUISITION TOTAL:</b>											<b>14,909.00</b>

Where a commodity is for a particular or unique use other than standard quality, grades, color, size or other characteristics, give details of how it will be and for what purpose.  
 Requisitions prepared incorrectly will be returned to the using department.



### EOD-8 Explosive Ordnance Disposal Suit and Helmet Ensemble

The patented EOD-8 suit and helmet is the most advanced EOD/IEDD protective ensemble ever designed. The suit represents significant increases in Overpressure protection, particularly against ground-reflected blast waves. Fragmentation and Heat protection have been greatly enhanced and Impact protection has also been improved

Many of these gains have resulted from the EOD-8's front and rear 'full body protection' design and the use of new and innovative materials. The EOD-8 also includes an Integrated Groin Protector.

In addition, a primary advantage of the EOD-8 is the flexibility and mobility it offers. The EOD-8 has been modelled on the SRS-5 platform design and therefore allows for longer on-scene working times with less physical effort

#### Primary Features

- ▶ Improved levels of balanced protection (see above)
- ▶ Greater range of motion over EOD-7B generation
- ▶ Retractable groin plate for easier kneeling
- ▶ Integrates with BCS-3 Body Cooling System, HW-300 and wireless communication systems - please contact Med-Eng Systems for details
- ▶ Removable ballistic inserts for cleaning suit
- ▶ Colour-coded Velcro™ to ensure proper dressing
- ▶ 360° Protection

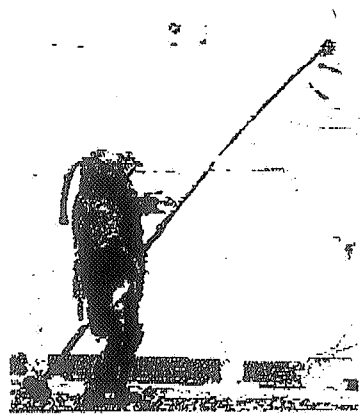


#### Recommended Accessories

Please refer to the EOD Accessories Section for more information

- |                                      |                                  |
|--------------------------------------|----------------------------------|
| BCS-3 Body Cooling System            | Chemical Protective Undergarment |
| HW-300 Hardwire Communication System | EOD-8 Ballistic Visor Cover      |
| Hand Protection System               | SRS-5 Helmet with Chem/Bio visor |
| SL-307 Search Light                  |                                  |
| Auxiliary Battery Pack               |                                  |

# EOD-8®



EOD Technician placing a disruptor beside suspect device using the Holistic Robotic Manipulator

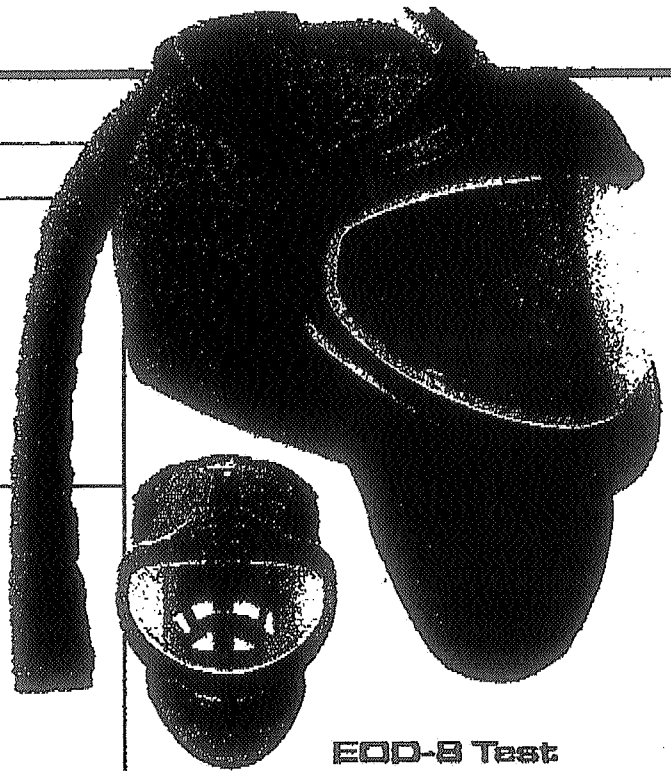


## EOD-8® Helmet

The patented EOD-8 Helmet is a full-face helmet with a floating visor system. This latest generation helmet represents the industry's highest degree of balanced protection against the 4 major blast threats.

### Primary Features

- ▶ Increased protection against blast-induced head acceleration
- ▶ Redesigned retention system for improved balance and fit
- ▶ Improved integration with suit collar for greater field of view
- ▶ Improved Environmental Awareness System
- ▶ Provides integrated speakers and microphone
- ▶ EOD-8 Helmet Electronics meet:
  - MIL-STD-810D 501.2 (High Temp)
  - MIL-STD-810D 502.2 (Low Temp)
  - MIL-STD-810D 514.3 (Vibration)

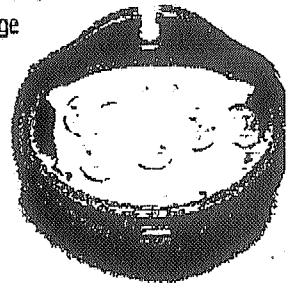


## EOD-8 Test Results

Med-Eng Systems has conducted an extensive test and evaluation program (laboratory and full scale) on the EOD-8 ensemble in conjunction with law enforcement, military, industrial, academic and government partners

Full-scale blast testing with instrumented anthropomorphic mannequins, carried out at Canadian Defence Research Establishments, has quantified the ability of the EOD-8 ensemble to dramatically reduce the potential for thoracic overpressure injury and accelerative impact injuries, as compared to earlier generation bomb suits.

Similarly, the EOD-8 has been thoroughly tested against fragmentation threats, using the NATO STANAG 2920 or MIL-STD-662F test specification and a range of fragment simulators, including the 2, 4, 16, 17 and 64 grain fragment simulators. The EOD-8 suit panels have also been tested against Heat-related threats



EOD-8 Visor following fragmentation testing.

## EOD-8 Chemical/Biological (C/B) EOD/IEDD Protective Compatibility

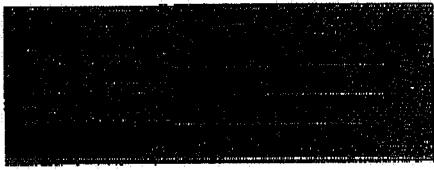
The EOD-8 can be worn for Chem/Bio blast protection but must be worn with a Chemical Protective Undergarment (such as the CPU), the SRS-5 X-Large Helmet with Chem-Bio visor, respirator or SCBA, and appropriate boots and gloves.



For EOD-8 Product Specifications, please visit [www.med-eng.com/eod](http://www.med-eng.com/eod)



# CPAC PROJECT CHECKLIST



**IMPORTANT.** PLEASE READ AND FOLLOW THE INSTRUCTIONS FOR COMPLETING THE PROJECT CHECKLIST AND CONTACT THE APPROPRIATE TEAM LEADER IF YOU HAVE ANY FURTHER QUESTIONS. ALL INFORMATION SHOULD BE COMPLETED INCLUDING THE SUPPLEMENTAL CHECKLIST REQUIRED BY THE SPECIFIC CPAC TEAM. ATTACH ALL REQUIRED MATERIALS AND SUBMIT FOR HANDLING TO THE DEPARTMENT OF PROCUREMENT SERVICES, ROOM 403, CITY HALL, 121 N. LASALLE STREET, CHICAGO, ILLINOIS 60602.

**PROJECT**  
 Date: 30 Jul 2004  
 ID No (Spec RX, Project): 22597  
 Department: Police  
 Bureau: Investigative Services  
 Contract No (if known): \_\_\_\_\_  
 Project Title/Description: EOD - 8 Bomb Suit & helmet

Contact Person: Mike GERHARDSTEIN  
 Tel: 746-719 Fax: 6-7637 E-mail: \_\_\_\_\_  
 Project Manager: Same  
 Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Estimated Value \$: \$14,909<sup>00</sup>

## SCOPE STATEMENT

\_\_\_ attached is a detailed scope of services and/or specification

**IMPORTANT:** THIS IS A CRITICAL PORTION OF YOUR SUBMITTAL. IN ORDER FOR A TEAM TO ACCEPT YOUR SUBMITTAL YOU MUST COMPLETE ALL TEAM SPECIFIC SCOPE REQUIREMENTS AS SET FORTH IN THE SUPPLEMENTAL CHECKLIST FOR THAT TEAM.

The following is a general description of what would be included in a Scope of Services or Specification:  
 A clear description of all anticipated services and products, including: time frame for completion, special qualifications of prospective vendors, special requirements or needs of the project, locations, anticipated participating user departments, citation of any applicable City ordinance or state/federal regulation or statute.

**TYPE OF PROCUREMENT REQUESTED** (check all that apply)

Competitive Bid     RFQ/RFP/RFS/RFI     Sole Source\*\*     Term Agreement     One Shot  
 Mod/Amendment     Time Extension     Additional Funding     Small Order     S/O Emergency

**FORMS**

F-25\* (add line item)     F-10\* (special approvals)     SSRB\*\* (sole source approval)  
 F-26\* (new term agreement)     RX (one-shot requisition)     OBM Authorization  
 F-27\* (time extension)     APRF (all purpose request form)

\*\* Sole source requests must include vendor quotes/proposal and MBE/WBE compliance requirements

**FUNDING**

City:  Corporate     Bond     Enterprise     Grant\*     Other \_\_\_\_\_  
 State:  IDOT/Transit     IDOT/Highway     Grant\*     Other \_\_\_\_\_  
 Federal:  FHWA     FTA     FAA     Grant\*     Other \_\_\_\_\_  
 Funding Strip(s): \_\_\_\_\_

\* Attach copy of any applicable grant agreement terms and conditions

**TIME FRAME**

Date Needed: 1 Aug 2004    Requested Contract Term (y/m/d): \_\_\_\_\_

**PRE BID/SUBMITTAL REQUIREMENTS**

Requesting Pre Bid/Submittal Conference?  Yes  No    Requesting Conference be Mandatory?  Yes  No  
 Requesting Site Visit?  Yes  No    Requesting Site Visit be Mandatory?  Yes  No



# CPAC PROJECT CHECKLIST

### ARCHITECTURAL/ENGINEERING SUPPLEMENTAL CHECKLIST

**Required Attachments:** Scope of Services, including location, description of project, services required, deliverables, and other information as required

**Risk Management**

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

**Pre-Qualification Category No.** \_\_\_\_\_ **Category Description:** \_\_\_\_\_

For Pre-Qualification Program, attach list of suggested firms to be solicited

**Other Agency Concurrence Required:**  None  State  Federal  Other (fill in) \_\_\_\_\_

### AVIATION CONSTRUCTION SUPPLEMENTAL CHECKLIST

DOA sign-off for final design documents:  Yes  No

**Required Attachments:**

Copy of Draft Contract Documents and Detailed Specifications.

**Risk Management:**

Current Insurance Requirements prepared/approved by Risk Management: Yes  No

Will work be performed within 50 feet of CTA or ATS structure or property? Yes  No

Will work be performed airside? Yes  No

### CAPITAL EQUIPMENT (VEHICLES) SUPPLEMENTAL CHECKLIST

**Required Attachments:**

Detailed Specifications including detailed description of the vehicle(s) or equipment, mounted equipment, if any, and options/accessories.

Special Provisions (Delivery, Warranty, Manuals, Training, Additional Unit Purchase Options, Bid Submittal Information, etc.)

Delivery Location(s)

Technical Literature

Drawings, if any

Part Number List (  Manufacturer; or  Dealer;  or Other Source: \_\_\_\_\_ )

Copy of current Price List(s)/Catalog(s)

Form F-10 or other authorization document

Any other exhibits and attachments

### COMMODITIES SUPPLEMENTAL CHECKLIST

**Required attachments:**

Copies of price lists, catalogs, drawings, variations of part numbers

Any other exhibits or attachments

### CONSTRUCTION SUPPLEMENTAL CHECKLIST (LARGE & SMALL)

**Required attachments: Copy of Draft (80% Completion)**

Copy of Draft (80% Completion) Contract Documents and Detailed Specifications

**Risk Management**

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No





# CPA PROJECT CHECKLIST

## DELEGATE AGENCY SUPPLEMENTAL CHECKLIST

### Required attachments:

Attach Scope of Services that includes the following information 1) Program background & objectives; 2) Type of services for which proposals are sought; 3) Location and time line for delivery of services; 4) Qualifications, skills, and/or experience necessary; 5) Special licenses or certifications required; 6) Evaluation process (if known).

### Other Attachments (please submit all that apply)

1. Copy of grant application and/or grant agreement
2. Evidence of award authority (DAAC agenda with agency name highlighted; City Council ordinance with agency name highlighted; or OBM letter)
3. Modification information (Copy of Form F-8A; screen print of EPS AWDS table)

Does program require Executive Order 91-1 clearance?  Yes  No

Is boilerplate from Law available or in production?  Yes  No

Would your department benefit from technical assistance?  Yes  No

## HARDWARE/SOFTWARE SUPPLEMENTAL CHECKLIST

ITSC (approved by BIS)

OBM (approved by Budget form/memo)

Attach any documentation indicating any previous purchase activity to assist in the procurement process

Grant document attached

## PROFESSIONAL SERVICES SUPPLEMENTAL CHECKLIST

Detailed scope of services as described on page 1

The Schedule of Compensation

Deliverables

Request for individual contract services (if applicable)

The appropriate EPS form

\* If this is a Telecommunications/Utilities project, please also address the following:

Has the project been reviewed by DGS?  Yes  No

Attach copy of DGS Recommendation; Reservation(s); or participate under current contract

Does the project include software?  Yes  No

If yes, is signed ITSC form attached?  Yes  No

Does the location involve

A public way?  Yes  No

Any concession in the City's facilities?  Yes  No

Is it anticipated City Council approval of the project or contract will be required?  Yes  No



# PROJECT CHECKLIST

### SMALL ORDERS SUPPLEMENTAL CHECKLIST

Yes No

- 1. Special Approval Form/Justification Letter.  
e.g. (Emergency Contract, Telecommunication Back-up documents, Proposals, EPS Form F-10, etc..)
- 2. Suggested Vendor.
- 3. Commodity Code, Manufacturer, Catalog Information, Model No., Quantity, Unit Cost/Measure, Color etc..
- 4. Detailed Specification or Scope of Work.

### ATTACHMENT REQUIRED FOR EACH SMALL ORDERS PROCUREMENT TYPE

(Check Appropriate Group)

1. ONE SHOT (PN)

- YES ( ) NO ( ) Detailed Specifications
- YES ( ) NO ( ) Suggested Vendor
- YES ( ) NO ( ) Support Documentation

3. EMERGENCY CONTRACT

- YES ( ) NO ( ) Justification Letter
- YES ( ) NO ( ) Vendor Proposal
- YES ( ) NO ( ) Pre-assigned Requisition (RX)

4. TELEPHONE/FAX BIDS

- YES ( ) NO ( ) Justification Letter

2. SOLE SOURCE REQUIREMENTS

- YES ( ) NO ( ) Vendor Proposal
- YES ( ) NO ( ) Disclosure Affidavit
- YES ( ) NO ( ) Letter of Exclusive or Unique Capability
- YES ( ) NO ( ) Support Documentation from Vendor/Manufacturer.
- YES ( ) NO ( ) Signature(s) of Originator or Departmental Head/Designee.

### WORK SERVICES & FACILITY MAINTENANCE SUPPLEMENTAL CHECKLIST

**Required Attachments:** Detailed Specifications (Scope of Services) including detailed description of the work, locations (with supporting detail), user department contacts, work hours/days, laborer/supervisor mix, compensation and price escalation considerations, contract term and extension options, contractor qualifications, citation of any applicable City/State/Federal statutes or regulations, citation of any applicable technical standards and price lists, catalogs, technical drawings and other exhibits and attachments as appropriate.

#### Risk Management

- Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No
- Will services be performed on or near a waterway?  Yes  No
- Will services require the handling of hazardous/biowaste material?  Yes  No
- Will services require the blocking of streets or sidewalks in any way?  
Which may affect public safety?  Yes  No