



February 4, 2025,

**ADDENDUM NO.: Three
TO ALL OFFERORS:**

REFERENCE: Request for Proposal No: **RFP# JBM-1222**
Dated: **February 4, 2025**
Commodity: **Medical Waste Removal Services**
RFP Closing On: **February 05, 2025, at 2:00 p.m. (Eastern)**

Please note the clarifications and/or changes made on this proposal program:

1. **Question:** What are the specific types of medical waste included in this bid?

Answer: The following, but not limited to are the types of waste: Body fluids, blood or blood soaked items (bandages, tissues, etc), lab tests, needles (in a sharps container), etc.

2. **Question:** Is the hazardous waste also part of the service requirements?

Answer: At this time, the solicitation is limited to the waste as defined by the Statement of Needs and per the Virginia Department of Environmental Quality (DEQ) is considered: Regulated Medical Waste.

3. **Question:** What is the current frequency of waste pickups?

Answer: Currently, there are weekly pickups.

4. **Question:** What is the approximate volume of waste generated?

Answer: The volume of waste fluctuates. Refer to RFP, page one (numeral II): James Madison University spends on average around \$20,000 annually on medical and pathological waste removal services.

5. **Question:** Does this bid cover multiple facilities?

- **Answer:** Refer to RFP, Page One (Numeral IV): USB Annex, Student Health Center, CISAT complexes A1, A2, A3.

MSC 5720
752 Ott Street, Room 1042
Wine Price Building
Harrisonburg, VA 22807
Office of 540.568.3145 Phone
PROCUREMENT SERVICES 540.568.7935 Fax

6. **Refer to Addendum (two) Question #7:** "One Gallon" Sharps Container has been removed from the revised Pricing Schedule

Answer: These items are not needed. This size has not been ordered yet. This has been removed from the scope of services needed. The Revised Pricing Schedule below.

PRICING SCHEDULE

The offeror shall provide pricing for all products and services included in proposal indicating one-time and on-going costs. The offeror must include any potential fees if applicable, to include, regulatory, credit card or service fee. The resulting contract will be cooperative and pricing shall be inclusive for the attached Zone Map, of which JMU falls within Zone 2.

SUPPLIES: (Please be sure to list any other supplies that would be needed to perform services requested.)

Sharps Containers (price per container) \$ _____
One Quart Size (per unit) \$ _____
Two Quart Size (per unit) \$ _____
Bio-Hazardous Waste Removal Container \$ _____
F110 Liners (per case) \$ _____
Absorbent Pads (per case) \$ _____
5 Quart Containers (per case) \$ _____

Other Products Offered:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

SERVICES:

Medical Waste Removal Services
(per site/per removal) \$ _____
Pathological Waste Removal Services
(per site/per removal) \$ _____
Other Services Offered:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Specify any associated charge card processing fees, if applicable, to be billed to the university.

The University is not responsible for any additional fees or charges that are not specified in pricing schedule.

Signify receipt of this addendum by initialing "*Addendum # Three*" on the signature page of your proposal.

Sincerely,



Juan Becerra Martinez,
Buyer Senior
Phone: (540-568-3130)