

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30				1. REQUISITION NO. 640-14-2-532-0038		PAGE 1 OF 3	
2. CONTRACT NO.		3. AWARD/EFFECTIVE DATE		4. ORDER NO.		5. SOLICITATION NUMBER VA261-14-Q-0741 AMENDMENT 0003	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME STEPHANIE HICKS		b. TELEPHONE NO. (No Collect Calls) 650-493-5000 X62259		6. SOLICITATION ISSUE DATE 06-30-2014 07-08-2014	
9. ISSUED BY Department of Veterans Affairs VA Sierra Pacific Network (VISN 21) VA Palo Alto Health Care System (90/NCA) 3801 Miranda Ave Palo Alto CA 94304-1207		CODE		10. THIS ACQUISITION IS <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS <input type="checkbox"/> 8(A)		<input type="checkbox"/> UNRESTRICTED OR <input checked="" type="checkbox"/> SET ASIDE: 100 % FOR: <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM NAICS: 333318 <input type="checkbox"/> EDWOSB SIZE STANDARD: 1,000 EMPLOYEES	
11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS N/A		13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/>		13b. RATING N/A	
15. DELIVER TO Department of Veterans Affairs VA Sierra Pacific Network (VISN 21) VA Palo Alto Health Care System 3801 Miranda Ave Palo Alto CA 94304		CODE		16. ADMINISTERED BY Department of Veterans Affairs VA Sierra Pacific Network (VISN 21) VA Palo Alto Health Care System (90/NCA) 3801 Miranda Ave Palo Alto CA 94304-1207		CODE	
17a. CONTRACTOR/OFFEROR CODE		FACILITY CODE		18a. PAYMENT WILL BE MADE BY Department of Veterans Affairs FMS-VA-2(101) Financial Services Center PO Box 149971 Austin TX 78714-9971		CODE	
TELEPHONE NO.		DUNS:		DUNS+4:		PHONE:	
17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <input type="checkbox"/>				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM			
19. ITEM NO.	20. See CONTINUATION Page SCHEDULE OF SUPPLIES/SERVICES			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
	Brand Name or "Equal" Request for Quote (RFQ) ACTIVATION PROJECT: Obtain installation of 1) DriveSafety CDS-250W, 2) DriveSafety CDS-250, and 3) HyperDrive Authoring Workstation or "equal to" Driving simulation systems optimized for use in clinical settings and designed as a clinical tool for occupational and physical therapy; including driver rehabilitation with driving and related skill performance measurement tools. This simulator will be utilized at the new VA Palo Alto Polytrauma Blind and Rehabilitation Center. See specifications and salient characteristics. <div style="background-color: yellow; padding: 5px; border: 1px solid black;"> AMENDMENT 0003 Extends the RFQ response date from 07/14/2014 to 07/21/2014. All other terms and conditions remain unchanged. </div>						
25. ACCOUNTING AND APPROPRIATION DATA See CONTINUATION Page				26. TOTAL AWARD AMOUNT (For Govt. Use Only)			
<input checked="" type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED				<input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED. <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED <input type="checkbox"/> 29. AWARD OF CONTRACT: REF. YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN IS ACCEPTED AS TO ITEMS:			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT)		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) STEPHANIE D. HICKS #V2114L2-65745		31c. DATE SIGNED	

Table of Contents

SECTION A	1
A.1 SDF 1449 SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS	1
SECTION B - CONTINUATION OF SF 1449 BLOCKS	3
B.1 CONTRACT ADMINISTRATION DATA	3

SECTION B - CONTINUATION OF SF 1449 BLOCKS

B.1 CONTRACT ADMINISTRATION DATA

(continuation from Standard Form 1449, block 18A.)

1. **CONTRACT ADMINISTRATION:** All contract administration matters will be handled by the following individuals:
 - a. **CONTRACTOR:** TBD
 - b. **GOVERNMENT:** Stephanie Hicks, Activation Contracting Officer, (650) 493-5000 x62259
TBD, Contracting Officer's Representative (COR)
2. **CONTRACT TYPE:** This is a firm-fixed price delivery order for the Office of Major Projects (Activation) Program.
3. **INSTALLATION:** Final installation schedule is dependent upon the construction schedule and may be adjusted. Currently all equipment shall be installed no sooner than (NST) May 4th, 2015 and no later than (NLT) May 29th, 2015.
4. **ON-SITE TRAINING:** Activation schedule is dependent upon the construction schedule and may be adjusted. Initial on-site training is expected in the summer/fall of 2015; on or about August 3rd, 2015 to October 30th, 2015.
5. **PERIOD OF PERFORMANCE (POP):** Services rendered under this contract is required through final inspection and acceptance of products and training. This contract shall expires October 30th, 2015.
6. **CONTRACTOR REMITTANCE ADDRESS:** All payments by the Government to the contractor will be made in accordance with:

[X]	52.232-34, Payment by Electronic Funds Transfer—Other Than System For Award Management, or
[]	52.232-36, Payment by Third Party
7. **INVOICES:** All Invoices from the contractor shall be submitted electronically in accordance with VAAR Clause 852.232-72 Electronic Submission of Payment Requests. Invoices shall be submitted once all equipment and services have been completed. Items must be listed separately on invoices.
8. **PAYMENT SCHEDULE**

0001 Equipment and Installation	Paid after acceptance on or about 05/29/2015
0002 On-site training	Paid after completion and acceptance on or about 10/30/2015
9. **ACKNOWLEDGMENT OF AMENDMENTS:** The offeror acknowledges receipt of amendments to the Solicitation numbered and dated as follows:

AMENDMENT NO	DATE
0001	07/01/2014
0002	07/03/2014
0003	07/08/2014