

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

BPA NO.

1. CONTRACT ID CODE

PAGE
1OF PAGES
52. AMENDMENT/MODIFICATION NUMBER
A000053. EFFECTIVE DATE
05-25-2017

4. REQUISITION/PURCHASE REQ. NUMBER

5. PROJECT NUMBER (if applicable)
NONE

6. ISSUED BY CODE

04-S

7. ADMINISTERED BY (If other than Item 6)

CODE 04-S

DEPARTMENT OF VETERANS AFFAIRS
NETWORK 23 CONTRACTING OFFICE
2101 North Elm Street
Building 30 (04-S)
FARGO ND 58102DEPARTMENT OF VETERANS AFFAIRS
NETWORK 23 CONTRACTING OFFICE
2101 North Elm Street
Building 30 (04-S)
FARGO ND 58102

8. NAME AND ADDRESS OF CONTRACTOR (Number, street, county, State and ZIP Code)

To all Offerors/Bidders

(X)

9A. AMENDMENT OF SOLICITATION NUMBER

VA263-17-Q-0528

X

9B. DATED (SEE ITEM 11)
04-20-2017

10A. MODIFICATION OF CONTRACT/ORDER NUMBER

10B. DATED (SEE ITEM 13)

CODE

FACILITY CODE

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers is extended, is not extended.

Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:

(a) By completing Items 8 and 15, and returning 1 copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or electronic communication which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by letter or electronic communication, provided each letter or electronic communication makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified. 1500 CDT on 6/2/2017

12. ACCOUNTING AND APPROPRIATION DATA (If required) 568-3670152-6412-844100-568XXXXX-2580-010041084

13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE

A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.

B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).

C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:

D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor is not, is required to sign this document and return 0 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

THE PURPOSES OF THIS AMENDMENT ARE TO RESPOND TO VENDOR QUESTIONS, MODIFY PRICE - COST SCHEDULE (INITIAL PERIOD OF PERFORMANCE), AND EXTEND QUOTE CLOSING DATE/TIME.

***REVISED (& ATTACHED) PRICE-COST SCHEDULE REPLACES ANY AND ALL OTHERS, AND SHOULD BE USED AS PART OF QUOTE SUBMISSION

***NEW QUOTE CLOSING DATE/TIME IS 1500 CDT on 6/2/2017

NO ADDITIONAL VENDOR QUESTIONS WILL BE CONSIDERED

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)

DARRYL W. MOON

NCO2315L3-6069

CONTRACTING OFFICER

15B. CONTRACTOR/OFFEROR

15C. DATE SIGNED

16B. UNITED STATES OF AMERICA

16C. DATE SIGNED

(Signature of person authorized to sign)

BY

(Signature of Contracting Officer)

See attached document: Vendor Questions and Answers A00005.

See attached document: AMENDMENT 5 REVISED PRICE - COST SCHEDULE.

Solicitation Questions and Answers

#	Question	Answer
11	<p>The use of a Common Access Card typically integrates with another Single Sign On (SSO) platform like Drive, Equitrac or PaperCut.</p> <p>a. Is there a SSO software currently being utilized?</p> <p>b. Each platform has different cost structures, so we need this information to provide an accurate quote.</p>	No current software is being used. However, we will probably use NSI Output Manager and NSI AutoStore Scanning in the future.
12	<p>Under “Scan Features” OOXML is a file format only used by Konica Minolta which allows the device to print documents from Microsoft in their native formats.</p> <p>a. This requirement limits the response to one manufacturer.</p> <p>b. Will this requirement be removed or is this request limited to Konica Minolta?</p>	The VA does run OOXML. Yes, we will need native formatting
13	<p>“ActivClient software embedded in the MFP which allows all historical versions of CAC/PIV smart cards to be supported along with future profiles under development.”</p> <p>a. Will the VA accept Java software which is embedded at the MFP. Which can be upgraded as needed and has pass security polices created by the VA CRISP team?</p>	Java Software will not suffice, ActivClient is a requirement
14	<p>Referencing Segment 2 (Konica Minolta 287) with 11 X 17 (A3 MFD) media capability:</p> <p>Therefore, will the VA consider a device capable of supporting media only up to 8.5 X 14 (A4 MFD) as long as it meets all other specifications for Segment 2?</p>	No
15	Referencing A3 Segment 4 (Konica Minolta 454e) with CAC/PIV integration. It is not clear if the higher segment devices (qty.3 454e) must also be CAC/PIV compliant.	All should have CAC/PIV integration and compliance
16	<p>Referencing PKI Encrypted Printing;</p> <p>- Should print jobs be retrievable at every networked MFD and not just tied to one MFD?</p> <p>- Should print jobs from the VistA VMS and/or Linux Environment be supported?</p>	<p>Yes</p> <p>Yes</p>
17	Must the PKI Encrypted Printing solution be VA TRM approved?	Yes

?## PRICE – COST SCHEDULE

ITEM INFORMATION

BASE PERIOD – 7/1/2017 – 9/30/2017

ITEM NUMBER	DESCRIPTION OF SUPPLIES/SERVICES	NUMBER OF COPIERS	NUMBER OF MONTHS	UNIT PRICE PER MONTH	EXTENDED PRICE
0001	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 454e OR Better	3	3		
0002	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 287 OR Better	60	3		
				PERIOD TOTAL	

*MULTIPLY NUMBER OF COPIERS X NUMBER OF MONTHS X UNIT PRICE PER MONTH = EXTENDED PRICE

EXAMPLE 3 X 3 X \$ _____ = \$ _____
 EXAMPLE 60 X 3 X \$ _____ = \$ _____

OPTION PERIOD 1 – 10/1/2017 – 9/30/2018

ITEM NUMBER	DESCRIPTION OF SUPPLIES/SERVICES	NUMBER OF COPIERS	NUMBER OF MONTHS	UNIT PRICE PER MONTH	EXTENDED PRICE
1001	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 454e OR Better	3	12		
1002	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 287 OR Better	60	12		
				PERIOD TOTAL	

*MULTIPLY NUMBER OF COPIERS X NUMBER OF MONTHS X UNIT PRICE PER MONTH = EXTENDED PRICE

EXAMPLE 3 X 12 X \$ _____ = \$ _____
 EXAMPLE 60 X 12 X \$ _____ = \$ _____

OPTION PERIOD 2 – 10/1/2018 – 9/30/2019

ITEM NUMBER	DESCRIPTION OF SUPPLIES/SERVICES	NUMBER OF COPIERS	NUMBER OF MONTHS	UNIT PRICE PER MONTH	EXTENDED PRICE
2001	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 454e OR Better	3	12		
2002	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 287 OR Better	60	12		
				PERIOD TOTAL	

*MULTIPLY NUMBER OF COPIERS X NUMBER OF MONTHS X UNIT PRICE PER MONTH = EXTENDED PRICE

EXAMPLE 3 X 12 X \$ _____ = \$ _____
 EXAMPLE 60 X 12 X \$ _____ = \$ _____

OPTION PERIOD 3 – 10/1/2019 – 9/30/2020

ITEM NUMBER	DESCRIPTION OF SUPPLIES/SERVICES	NUMBER OF COPIERS	NUMBER OF MONTHS	UNIT PRICE PER MONTH	EXTENDED PRICE
3001	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 454e OR Better	3	12		
3002	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 287 OR Better	60	12		
				PERIOD TOTAL	

*MULTIPLY NUMBER OF COPIERS X NUMBER OF MONTHS X UNIT PRICE PER MONTH = EXTENDED PRICE

EXAMPLE 3 X 12 X \$ _____ = \$ _____
 EXAMPLE 60 X 12 X \$ _____ = \$ _____

OPTION PERIOD 4 – 10/1/2020 – 9/30/2021

ITEM NUMBER	DESCRIPTION OF SUPPLIES/SERVICES	NUMBER OF COPIERS	NUMBER OF MONTHS	UNIT PRICE PER MONTH	EXTENDED PRICE
4001	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 454e OR Better	3	12		
4002	All-in-One Copiers Lease, in accordance with functional performance specification. Konica Minolta 287 OR Better	60	12		
				PERIOD TOTAL	
				GRAND TOTAL (including ALL PERIODS & CLINS)	

*MULTIPLY NUMBER OF COPIERS X NUMBER OF MONTHS X UNIT PRICE PER MONTH = EXTENDED PRICE

EXAMPLE 3 X 12 X \$ _____ = \$ _____
 EXAMPLE 60 X 12 X \$ _____ = \$ _____