Needs BOC approval - 4370 Spartan Fire (replacement ambulance)

Description:
This is a request for an open po or a one time po. If you submit an open po request after your initial approval you will be able to edit the PO by returning to the relevant case and completing the step to request a change. Once the PO is officially closed/liquidated you should no longer make this request.

Created by: Sonya Ayers
Created on: March 11, 2026
Assigned to: Sonya Ayers
Status: Open
Case ID: c6ctg180

Request Details

Completed by Sonya Ayers on March 11, 2026 at 12:25 PM EDT

Requestor Name	Penny Cochran penny-cochran@mail.polimorphic.com; pcochran@polknc.gov
Department	10-4370 EMS
Is this a new vendor?	No
Specify fiscal year	FY 26
Specify PO Type	Open PO
Do you know the vendor number?	No
Vendor Name	Spartan Fire

Finance - Internal

Account GL Line to Charge (00-0000-0000-0)	10-4730-5000-0
Amount allocated *($00.00) If monthly, list the total for the year.*	207773
Description	replacement of totaled ambulance from 9/25/2025
Funding Source	Other
Specify Funding Source	Insurance Proceeds
Attach any relevant documents if necessary	Ambulance_3_quote__EMS.pdf

Quote Procurement Documentation Form

Purpose: This form documents compliance with Polk County procurement policy requiring three quotes for purchases/projects exceeding the applicable cost threshold.

General Information

Department / Division: EMS

Project / Purchase Title: Replacing Wrecked ambulance using Insurance Proceeds

Project Type (check one):

☒ Purchase of Goods or Supplies

☐ Services

☐ Construction / Repairs

☐ Professional Services

☐ Other: _____

Brief Description of Project / Scope of Work: _____

_____

Estimated Cost: $ $225,000

Procurement Threshold Triggered:

☒ Yes (three quotes required)

☐ No (explain if applicable): _____

Quote Summary (Quote is less than State Contracted pricing and unit is onhand, can be delivered as soon as the graphics are added (included in price))

Quote 1: Spartan Fire and Emergency Apparatus *(Vendor/Source Name)*

Point of Contact: Cornelius Huff **Email/Phone:** _____

Date Requested: 3/2/2026 **Quote Amount:** $207,773.00

Selected ☒ Yes / ☐ No

Quote 2: Atlantic Emergency Solutions *(Vendor/Source Name)*

Point of Contact: James Kelly **Email/Phone:** _____

Date Requested: 3/9/2026 **Quote Amount:** $211,032

Selected ☐ Yes / ☒ No Unit would have to be ordered from manufacturer, could take up to a year for delivery

Quote 3: NWEV, LLC *(Vendor/Source Name)*

Point of Contact: NC Sheriffs Association Procurement Website **Email/Phone:** _____

Date Requested: 3/2/2026 **Quote Amount:** $224,234

Selected ☐ Yes / ☒ No State Contract pricing for ambulance only - NC Sheriff Association Procurement Program

*If Three Quotes Were **Not Obtained**:*

☐ **Good-faith effort made to obtain a third quote, but not successful**

Reason third quote could not be obtained (check all that apply):

☐ Limited number of vendors available

☐ Vendor(s) did not respond

☐ Time-sensitive/emergency need

☐ Sole or highly specialized provider

☐ Other: _____

Describe efforts made to obtain the third quote (include vendors contacted, dates, and methods):

_____

_____

_____

_____

Certifications & Approvals

I certify that the information above is accurate and that procurement was conducted in accordance with County policy.

Prepared by (Name & Title): _____

Signature: _____ **Date:** _____

Reviewed and approved:

Supervisor / Department Head: Michael Crater

Signature: _____ **Date:** 03/11/2026

(Attach copies of all quotes, emails, or written documentation.)

Quote # 1

SPARTAN FIRE and Emergency Apparatus Since 1973

CRESTLINE

PROPOSAL FOR FURNISHING CUSTOM AMBULANCE

3-2-26

Polk County EMS
P.O. Box 308
340 Hospital Rd.
Columbus, N.C. 28722

The undersigned is prepared for Polk County EMS, upon an order being placed by you, for final acceptance by Crestline, Inc., at its U.S. home office in Van Wert, OH the apparatus and equipment herein named and for the following prices:

Description of what the purchase is: **Each $207,773.00**

One (1) Crestline CCL-150 Ford E-350 Type III Ambulance Module with 72" headroom. Chassis to be a current year or newer Ford E-350 XLT Chassis Cab 4x2 Gasoline. Immediate Delivery of Stock Demo CPQ #9382 Bid Specs, Training, Graphics, taxes. Savvik Contract.

Total : $207,773.00

Said apparatus and equipment are to be built and shipped in accordance with the specifications hereto attached, delays due to strikes, war or intentional conflict, failures to obtain chassis, materials, or other causes beyond our control not preventing, within about **#15 of days** after receipt of the chassis and clean order specification.

The specifications herein contained shall form a part of the final contract, and are subject to changes desired by the purchaser, provided such alterations are interlined prior to the acceptance by the company of the order to purchase, and provided such alterations do not materially affect the cost of the construction of the apparatus.

The proposal for apparatus conforms to all Federal Department of Transportation (DOT) rules and regulations in effect at this time of bid. Any increased costs incurred by first party because of future changes in or additions to said DOT standards will be passed along to the customers as an addition to the price set forth above.

Unless accepted within **15** days of the date, or the Stock Unit is sold the right is reserved to withdraw this proposition.

Spartan Fire and Emergency Apparatus, Inc.

By: Cornelius D. Huff

ATLANTIC EMERGENCY SOLUTIONS

Quote # 2

James Kelly
Regional Account Manager
Ambulance Division
Tel. (828) 708-0715
jkelly@atlanticemergency.com

Polk County EMS
340 Hospital Dr
Columbus, NC 28722

03/09/2026

Atlantic Emergency Solutions, the North Carolina dealer for Wheeled Coach, is pleased to present you with a price regarding your request for

The price to customize and manufacture the truck matching your specifications is as follows:

Total cost for (1) unit(s): $211,032.00
Graphics to match Current fleet

This proposal is valid until 06/09/2026

The price includes the following:

Factory Pickup and Transportation
Wheeled Coach will drive new unit from Wheeled Coach to Candler, NC Service facility after final inspection.

Dealer Pre-Delivery Inspection
Candler, NC service center will perform a pre-delivery inspection after delivery from the Wheeled Coach factory.

Delivery
Polk County EMS will take delivery of unit from Candler, NC Service Center after pre-delivery inspection is completed.

Fuel and Tags
Atlantic will ensure the unit has a full tank of fuel and a temporary tag.

Pre-Construction Meeting
N/A

Inspection Trip(s) Included
N/A

Bid Award

Quote # 3

Contract: 25-05-0521R, Fire/EMS/Law Enforcement Specialty Vehicles

Group: Ambulances

Item: 27, American Emergency Vehicles (AEV), Type III - 145"+ Module, Traumahawk

Description: Manufacturer standard base unit specifications and current model year for model/model number listed. The required minimum 6% discount off MSRP is to be included in the listed base price field.

Model Upgrade/Downgrade: Some models may be listed within the option sheet as they may be considered to be an upgrade/downgrade to the base model listed. Please contact awarded vendor for additional information regarding these models.

Zone	Vendor	Price	Percent (Taken off MSRP for base price)	Percent (Taken off MSRP for options)	Build File	Options File
Nationwide	NWEV, LLC dba Northwestern Emergency Vehicles	$224,234.00	6.00%	6.00%	Build	Options