

# Annex A: Response Templates

## Bermuda Department of Transportation

### ORGANIZATION DETAILS

Type of business:

*(i.e. Corporation, LLC, sole proprietorship, partnership)*

Date of formation/incorporation:

State and country of incorporation:

Parent company date of formation/incorporation:

Parent company state and country of incorporation:

Countries in which prior transit bus business has been conducted:

Has your company been involved in any acquisitions, mergers, or changed names in the past five (5) years? If so, please explain:

***Please attach your Company's Statement of Qualifications as Exhibit 1.***

**Procurement/Support/Warranty**

Lead time from order to delivery:
Warranty terms and conditions:
Driver training provided:
Maintenance training provided:
Describe your recommended financing approach and terms:
Please provide cost estimates for each bus model(s) proposed based on an order that could range from 10 vehicles in one year up to 60 vehicles over 3 years. Please elaborate on any minimum bus order requirements:

<b>Product Offerings</b>		
<i>Below, please include information for each vehicle model that meets the mandatory requirements outlined in Table 1 above. (Please add columns as needed for additional models)</i>		
	<b>Vehicle 1</b>	<b>Vehicle 2</b>
<b>Model Name:</b>		
<b>Drivetrain</b>		
Type (clean diesel, hybrid, electric):		
Range with a full complement of passengers and with the air conditioning running (km for all drivetrain types):		

Battery capacity, in kWh (for electric drivetrains):		
<b>AC and DC Charging</b> (electric drivetrain only)		
Onboard AC charger rating (kW):		
DC power rating (kW):		
Onboard plug type:		
Capability and power rating for on-route charging (if applicable):		
Capability to meet OppCharge protocol (if applicable):		
Time to complete charge (level 2 and DCFC charging):		
<b>Vehicle Envelope</b>		
Length:		
Width:		
Width with doors open:		
Height:		
Wheelbase:		
Front overhang:		
Rear overhang:		
Curb weight:		
<b>Climate Control</b>		
Available air conditioning units with performance specifications:		

<b>Driving Characteristics</b>		
Approach angle:		
Departure angle:		
Turning radius:		
Maximum gradeability:		
<b>Interior</b>		
Driver orientation (right):		
Passenger capacity:		
Number of seats:		
Wheelchair accessibility:		
Interior lighting:		
Door location (i.e., front only, front and middle)		
Low floor?:		
Security features:		
<b>Any other information the respondent wishes the Government of Bermuda to consider:</b>		

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**BUS DEPLOYMENT REFERENCES**

*Below list the most relevant, verifiable bus deployments undertaken by your company.*

**Deployment 1**

Deployment location:

Completion date or projected completion date:

No. of years operating:

Deployment and vehicle description:

**Contracting entity (buyer, owner) information**

Contacting entity name:

Contact person name:

Phone:

Email:

**Deployment 2**

Deployment location:

Completion date or projected completion date:

No. of years operating:

Deployment and vehicle description:

Contracting entity (buyer, owner) information

Contacting entity name:

Contact person name:

Phone:

Email:

**Deployment 3**

Deployment location:

Completion date or projected completion date:

No. of years operating:

Deployment and vehicle description:

Contracting entity (buyer, owner) information

Contacting entity name:

Contact person name:

Phone:

Email: