



A Tradition of Stewardship  
A Commitment to Service

Health & Human Services Agency  
Napa County Emergency Medical Services Agency

Shaun Vincent  
Emergency Medical Services Administrator

2751 Napa Valley Corporate Drive  
Napa, CA 94558

Main: (707) 253-4341  
Fax: (707) 299-4126

[www.countyofnapa.org/ems](http://www.countyofnapa.org/ems)

## Request for Proposals – HHSA 22101

### ADDENDUM No. 2

To: All Prospective Bidders and all others concerned

From: County of Napa, EMS Administrator, Shaun Vincent

04/09/21

Notice is hereby given to all potential Proposers that this is an addendum to RFP# HHSA 22101, Emergency and Non-Emergency Advanced Life Support Ambulance Transport County of Napa

### Question and Response:

Q. (Pg. 27, Table. Last Row) Would the County clarify what the \$1M insurance minimum is referencing?

R. Thank you for catching this it should be 5 million per occurrence. This will be corrected through an RFP addendum.

**Please note the following changes to the proposal before submitting your offer. A signed and dated copy of this addendum must accompany your proposal.**

The following changes have been made to RFP# HHSA 22101 require amending as follows:

Section IV, Page 27

<input type="checkbox"/>	Cyber Liability	\$5,000,000 per occurrence for Privacy and Network Security, <del>\$1,000,000</del>
--------------------------	-----------------	---





A Tradition of Stewardship  
A Commitment to Service

Health & Human Services Agency  
Napa County Emergency Medical Services Agency

**Shaun Vincent**  
Emergency Medical Services Administrator

2751 Napa Valley Corporate Drive  
Napa, CA 94558

Main: (707) 253-4341  
Fax: (707) 299-4126

[www.countyofnapa.org/ems](http://www.countyofnapa.org/ems)

## Acknowledgment of Receipt

### ADDENDUM No. 2

RFP# HHS 22101, Emergency and Non-Emergency Advanced Life Support Ambulance Transport  
County of Napa.

This Addendum Signature Page of the Acknowledgement of Receipt must be signed and submitted  
with proposal.

Acknowledged by:

\_\_\_\_\_  
Print name

Acknowledged by:

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

