

**HIDALGO COUNTY-
“HUMANE SERVICES FOR FACILITY TO QUARANTINE AND IMPOUND DOGS,
CATS, OR OTHER SMALL ANIMALS IN UNINCORPORATED/RURAL AREAS”**

SPECIFICATIONS

1. Provide a proper containment facility in which dogs, cats or other small animals (including certain native/wild species such as opossums, racoons, etc.) that are picked-up in unincorporated/rural areas of Hidalgo County and may be impounded, quarantined, observed, tested, or destroyed in accordance with the requirements of the Texas Board of health pursuant to Article 4477-6(a).
2. Provide adequate food, water, shelter, confinement and when indicated and directed by the Director of the Hidalgo County Health Department (Director), administer humane euthanasia to impounded or quarantined animals.
3. Provide facilities that are licensed by the Texas Department of Health to operate as a place where legal and healthful impounding or quarantining of animals may occur.
4. Provide proper space and facilities and impound or place in quarantine all animals required to be impounded or quarantined by the authority of the Director or person working under the authority of the Director. At no time shall Contractor refuse to house any such impounded or quarantines animals.
5. Maintain hours for receiving animals from County for impoundment or quarantine during every day of the week between the hours of 8:00 a.m. and 5:00 p.m. unless notified by County Sheriff or the Health Department that the animal needs impoundment due to unusual or emergency circumstances.
6. Provide facilities to incinerate or otherwise to dispose of dog, cat and other small animal carcasses without utilization of the sanitary landfill.
7. Attempt to reunite owners with impounded animals.
8. Provide a licensed veterinarian who will conduct small animal immunization clinics at reduced cost for residents of Hidalgo County, Texas.
9. Assist County when requested in the investigation of animal cruelty.
10. Conduct humane animal euthanasia when directed by Director.
11. Prepare and ship animal specimens/ heads to the Texas Department of Health Laboratory for examination (out-of-pocket cost for preparation and shipment to be borne by the owner of the animals or the contractor).

12. Collect proper charges assessed to the owner of an impounded or quarantined animal.
 13. **Contractual Period:** To be for a Two (2) Year period with an additional sixty (60) day grace period at the end of the contract term for unforeseen delay in award of new bid for next contract term or extension of current contract commencing upon award by the Hidalgo County Commissioners' Court.
 14. **Option to Renew:** Hidalgo County reserves the right to extend the contract for an additional year based on prior year's performance evaluation and contingent upon cost remaining unchanged.
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ADDITIONAL INFORMATION:

Further information required for this project can be addressed to, _____ Buyer, Hidalgo County Purchasing Department (956) 318-2630. Hidalgo County is requesting that any and all questions, inquiries, and clarifications regarding quotes, bids, proposals, or statement of qualifications be addressed to Martha L. Salazar Purchasing Agent, 100 E. Cano, 4th Floor, Edinburg, Texas 78539. **TELEPHONE INQUIRIES WILL NOT BE ACCEPTED.**

DRAFT

ALL WRITTEN INQUIRIES WILL BE ACCEPTED VIA FACSIMILE NO LATER THAN, Wednesday, _____, 5:00 P.M. Responses will be sent to all applicants via facsimile by no later than, 5:00 P.M., Friday, _____.



PURCHASING DEPARTMENT
County Of Hidalgo

MEMORANDUM

TO: Eduardo Olivarez, Director
Hidalgo County Health Department
Via Facsimile: 956-383-3229

FROM: Vangie Y. Garcia, Buyer II *mg*
Hidalgo County Purchasing Department

DATE: November 30, 2006

RE: Approval of Disapproval of Specifications for:
"Humane Services"

Please review the following **SPECIFICATIONS** and indicate if they meet all your requirements by marking approve or disapprove and signing below. If your answer is **DISAPPROVE**, please make any modifications necessary to the specifications and return to designated Buyer at the Purchasing Department by no later than Monday, December 4, 2006.

APPROVE

DISAPPROVE

Hidalgo County Health Department
Authorized Signature
Eduardo Olivarez

12/4/06
Date

Account Number: _____