

SUBJECT: Award of Bid No. 26-167C to Braun Northwest Inc. for the anticipated cost not to exceed \$506,000.00 to remount and refurbish two Ambulances.

AGENDA OF: May 19, 2026

ASSEMBLY ACTION: Approved under the consent agenda 05/19/26 - BJH

AGENDA ACTION REQUESTED: Present to the Assembly for consideration.

Route To:	Signature
Purchasing Director	5/6/2026 X R Kraftt Signed by: Russ Kraftt
Emergency Services Director	5/6/2026 X Ken Barkley Signed by: Kenneth Barkley
Finance Director	5/6/2026 X Cheyenne Heindel Signed by: Cheyenne Heindel
Borough Attorney	5/7/2026 X Nicholas Spiropoulos Signed by: Nicholas Spiropoulos
Borough Manager	5/7/2026 X Michael Brown Signed by: Mike Brown
Borough Clerk	5/11/2026 X Lonnie McKee Signed by: Lonnie McKee

ATTACHMENT (S) : Fiscal Note (1p)

SUMMARY STATEMENT: The Department of Emergency Services has identified a need to remount and refurbish two ambulances. This purchase will refurbish two vehicles a 2017 Ram 4500 4x4 and a 2019 Ford F450 4x4. These refurbished Ambulances will be housed at Station 51.

Braun Northwest has consistently proven to be the most reliable and cost-effective partner for our ambulance remount needs. Their pricing structure provides significant cost savings compared to purchasing new units, and they have repeatedly demonstrated flexibility in requested changes without disrupting timelines or quality. If approved, these remounts will be our sixth project with Braun, and their familiarity with our specifications, preferences, and operational requirements has created a smooth, dependable workflow.

As the original manufacturer, Braun is the only company willing to remove our existing modules and mount on a new cab and chassis. Their willingness to take on this level of work—combined with their proven track record of quality, safety, and customer support—makes them the most practical and responsible choice for DES moving forward.

Pricing is based on estimates from previous remounts updated to reflect current chassis costs. Final pricing for each unit will be established following a comprehensive inspection at the refurbishment facility.

Delivery is expected in the Fall of 2026.

RECOMMENDATION OF ADMINISTRATION: Approve the subject action memorandum.

MATANUSKA-SUSITNA BOROUGH

FISCAL NOTE

Agenda Date: May 19, 2026

SUBJECT: Award of bid number 26-167C to Braun Northwest Inc. for the anticipated cost not to exceed \$506,000.00 to remount and refurbish two Ambulances.

FISCAL ACTION (TO BE COMPLETED BY FINANCE)	FISCAL IMPACT YES NO
AMOUNT REQUESTED NTE \$506,000	FUNDING SOURCE Ambulance and EMS Capital Projects
FROM ACCOUNT # 425.000.000 4xx.xxx	PROJECT# 45225-1800-1845
TO ACCOUNT :	PROJECT #
VERIFIED BY: X <u>L i e s e l Z a n t o</u> S i g n e d b y : L i e s e l Z a n t o	CERTIFIED BY:
DATE:	DATE:

EXPENDITURES/REVENUES:

(Thousands of Dollars)

OPERATING	FY2026	FY2027	FY2028	FY2029	FY2030	FY2031
Personnel Services						
Travel						
Contractual						
Supplies						
Equipment						
Land/Structures						
Grants, Claims						
Miscellaneous						
TOTAL OPERATING						

CAPITAL	NTE 506.0					
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REVENUE						
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FUNDING:

(Thousands of Dollars)

General Fund						
State/Federal Funds						
Other	NTE 506.0					
TOTAL	NTE 506.0					

POSITIONS:

Full-Time						
Part-Time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

PREPARED BY: _____ PHONE: _____

DEPARTMENT: _____ DATE: _____



Recoverable Signature

X

C h e y e n n e H e i n d e l

APPROVED BY: _____ DATE: _____

Signed by: Cheyenne Heindel



SOLICITATION REQUISITION FORM

Purchasing Division
350 East Dahlia Avenue,
Palmer, Alaska 99645-6488
PHONE (907) 861-8601
Purchasing@MatSuGov.us

PROJECT TITLE:

EMS Ambulance Remount 00159 and 00160

REQUESTING PERSON/DIVISION/DEPARTMENT:

Brent Page , Fleet , D.E.S.

REVISED FORM/VERSION:**STAKEHOLDER DEPT.:**

Emergency Services

ASSEMBLY DISTRICT #:**DATE NEEDED BY:**

11/26/2026

PURCHASE TYPE: ☐ CONSTRUCTION | ☐ PROFESSIONAL SERVICE | ☐ SERVICE | ☒ SUPPLIES

Scope of Work/Scope of Services, specifications, supplemental general conditions, drawings, plans and/or all other documents are required to issue the solicitation and must be provided with this request and funding verification document.

Item No.	Description	Qty. Requested	Unit	Est. Unit Price	Est. Line Total / Est. Contract Amount
	Ambulance Remounts, reusing the existing patient box and installing it on a new Chassis.	2		\$253,000.00	
				ESTIMATED TOTAL ALL	506,000.00
				DO NOT EXCEED	506,000.00

ACCOUNTING

FUNDING TYPE(S): ☒ MSB | ☐ STATE | ☐ FEDERAL | ☐ DHS&EM/FEMA | ☐ NOT CURRENTLY FUNDED/PENDING

* If the project is subject to state or federal grant funding that requires special procurement provisions or terms, provide a copy of the grant.

Account Number	Project	Source	Sub-Project	Amount	Project Exp. Date
425.000.000 464.451	45225	1800	1845	506,000.00	06/30/2028

APPROVAL / CERTIFYING

REQUESTER NAME & TITLE (PRINT NAME & TITLE)	REQUESTER'S SIGNATURE	DATE
	Brent Page	Digitally signed by Brent Page Date: 2026.04.13 15:32:50 -08'00'
DEPARTMENT DIRECTOR NAME & TITLE (PRINT NAME & TITLE)	DEPARTMENT DIRECTOR'S SIGNATURE	DATE
	Ken Barkley	Digitally signed by Ken Barkley Date: 2026.04.15 08:50:55 -08'00'
CERTIFICATION: I certify that the facts herein and on supporting documents are correct, that this voucher constitutes a legal charge against funds and appropriations cited, that sufficient funds are encumbered to pay this obligation, or that there is a sufficient unencumbered balance in the appropriation cited to cover this obligation.		
CERTIFYING OFFICER NAME & TITLE (PRINT NAME & TITLE)	CERTIFYING OFFICER'S SIGNATURE	DATE
	Merissa Carrell	Digitally signed by Merissa Carrell Date: 2026.04.28 08:31:03 -08'00'