



**Date of Issuance:** 08/11/2022

**Solicitation No.** 0900000547

**Requisition No.** 0900016482

**Amendment No.** 1

Hour and date specified for receipt of offers is changed:  No  Yes, to: \_\_\_\_\_ CST

Pursuant to OAC 260:115-7-30(d), this document shall serve as official notice of amendment to the solicitation identified above. Such notice is being provided to all suppliers to which the original solicitation was sent.

Suppliers submitting bids or quotations shall acknowledge receipt of this solicitation amendment prior to the hour and date specified in the solicitation as follows:

Sign and return a copy of this amendment with the solicitation response being submitted; or,

If the supplier has already submitted a response, this acknowledgement must be signed and returned prior to the solicitation deadline. All amendment acknowledgements submitted separately shall have the solicitation number and bid opening date in the subject line of the email.

**ISSUED FROM:**

Marc Brown  
Contracting Officer

405-521-6669  
Phone Number

Marc.brown@omes.ok.gov  
E-Mail Address

**RETURN TO:** [OMESCPeBID@omes.ok.gov](mailto:OMESCPeBID@omes.ok.gov)

**Description of Amendment:**

a. This is to incorporate the following:

I wanted to inquire about Solicitation# 0900000547. Is IPTV a suitable substitution for cable and/or satellite TV?  
**Yes**  
 Can you provide a list of the State and Interlocal Agencies that would be covered by this Solicitation?  
 Is the state looking for standardized pricing to implement Satellite TV at any requesting Agency's site(s)?  
 Is this more like a Qualified Vendor List request that is asking for information and not holding us to any cost but wants to make sure we're capable of reviewing a site and following through with each SOW?  
 What DOC facilities (or in this case, Agencies) does this solicitation cover?  
 What lineup is being requested for each facility?  
 Is a statewide standardized lineup desired?  
 What method of delivery is being requested: C-band / Ku-band?  
 Which facilities are currently C-band?  
 Do they receive their local channels through an over-the-air (OTA) antenna system or do they receive their locals via DirecTV or DISH/UWTV?  
 Which facilities are currently Ku-band?  
 Which are on DISH and which are on DirecTV?

Which of these receive their locals through an OTA antenna system?

Which of these receive their locals through their DISH or DirecTV account?

Which facilities receive programming through a local Cable TV provider (Spectrum, Suddenlink/Altice, etc.)?

Which facilities receive no satellite or cable TV programming?

Which facilities only receive local affiliate programming?

Are they receiving locals by an OTA antenna system?

Are they receiving locals by a locals-only DirecTV account? And who is the dealer of record?

Are they receiving locals by a locals-only DISH account? And who is the dealer of record?

Are all facilities currently wired with distribution to deliver signal to dayroom / admin / inmate televisions?

How many drops are at each facility?

Is there a site visit planned for any of the facilities?

Is the current existing distribution at each facility working properly – is there good picture and audio quality all the way down to each end user?

Does this solicitation desire to have the Vendor be responsible for internal distribution at any or all facilities?

Does this solicitation request an HD signal?

If so, do all facilities have the capability of receiving an HD signal?

What are the makes and models of all receiving TVs? (Include all admin / dayroom / breakroom / inmate / etc. television sets.)

If C-band delivery: Is there room on the ground or roof to mount 3-4 twelve foot (12') satellite dishes within 100-150' of the headend equipment? This entails concrete mounts (4 x 4 x 4) with masts.

If Ku-band delivery: Is there room to set 2-3 42" Ku-band satellite dishes on the ground, on the side of the building or on the roof within 100-150' of the headend equipment?

**The State does not have this information, as every agency has different business needs and employs varying services currently.**

**This solicitation is intended to cover all state agencies and affiliates and is not intended to standardize the selections for every geographical area of the state.**

b. All other terms and conditions remain unchanged.

\_\_\_\_\_  
Supplier Company Name (**PRINT**) \_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Representative Name (**PRINT**) Title \_\_\_\_\_  
Authorized Representative Signature