

CITY OF STRONGSVILLE, OHIO

ORDINANCE NO. 2025 – 142

By: Mayor Perciak and All Members of Council

AN ORDINANCE AUTHORIZING AND DIRECTING THE MAYOR TO ENTER INTO A THREE-YEAR PREVENTATIVE MAINTENANCE AND SERVICE AGREEMENT WITH STRYKER CORPORATION FOR THE SUPPORT AND SERVICING OF CERTAIN FIRE DEPARTMENT LIFE-SAVING EMERGENCY TRANSPORT EQUIPMENT, WITHOUT PUBLIC BIDDING, AND DECLARING AN EMERGENCY.

WHEREAS, the mission of the City of Strongsville Fire and Emergency Services is to protect the lives, property and environment of the people who live, work and travel in Strongsville, with the utmost dedication and commitment to the safety of its residents and businesses; and

WHEREAS, the City of Strongsville Fire and Emergency Services has previously purchased various life-saving equipment through the Stryker Corporation ("Stryker"), such as Stryker Power Load Systems, Stryker Power Pro Cots and Stair Chairs which are utilized for emergency patient transport; and

WHEREAS, Stryker has consistently provided the City with on-site maintenance services and overall excellent customer service in response to service calls; and

WHEREAS, since the critical Stryker equipment is unique and proprietary, it has been determined by the City's Fire Department that it is advantageous and immediately necessary to enter into a preventative maintenance and service agreement with Stryker for a three-year period; and

WHEREAS, the City is desirous of entering into such preventative maintenance and service program with Stryker Corporation.

NOW, THEREFORE, BE IT ORDAINED BY THE COUNCIL OF THE CITY OF STRONGSVILLE, COUNTY OF CUYAHOGA AND STATE OF OHIO, BY UNANIMOUS AFFIRMATIVE VOTE:

Section 1. That this Council finds and determines, as set out in Article V, §5 of the Charter, that there is an immediate and present emergency in the operation of the City of Strongsville Fire and Emergency Services Department, in that it is immediately necessary to enter into a preventative maintenance and service agreement, without public bidding, with **STRYKER CORPORATION**, in order for the City's Fire and Emergency Services Department to take advantage of the specialized inspection, support and servicing of Stryker's proprietary life-saving equipment that is utilized by the City, in order to protect the health, safety, welfare and property of individuals traversing through and living within the City.

Section 2. That for the reasons aforesaid, Council hereby authorizes and directs the Mayor to enter into a preventative maintenance and service agreement for services related to the inspection, support and servicing of certain Fire Department emergency life-saving transport equipment, without public bidding, with **STRYKER CORPORATION**, in an amount not to

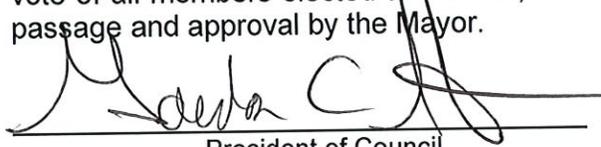
CITY OF STRONGSVILLE, OHIO
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exceed \$72,186.25 for a period of three (3) years, commencing retroactive to September 1, 2025 through August 31, 2028, consistent with the quote attached hereto as Exhibit A.

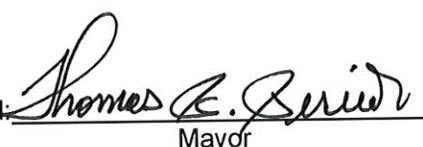
Section 3. That the funds for the purpose of such Agreement have been appropriated and shall be paid from the Emergency Vehicle Fund.

Section 4. That it is found and determined that all formal actions of this Council concerning and relating to the adoption of this Ordinance were adopted in an open meeting of this Council; and that all deliberations of this Council, and any of its committees, that resulted in such formal action were in meetings open to the public in compliance with all legal requirements.

Section 5. That this Ordinance is hereby declared to be an emergency measure necessary for the immediate preservation of the public peace, property, health, safety and welfare, and for the further reason that it is immediately necessary to enter into a preventative maintenance agreement in order for the Strongsville Fire and Emergency Services Department to continue to utilize this unique company for service and support of its life-saving equipment to protect the health, safety, welfare and property of residents and businesses in the City, and to conserve public funds. Therefore, provided this Ordinance receives the unanimous affirmative vote of all members elected to Council, it shall take effect and be in force immediately upon its passage and approval by the Mayor.



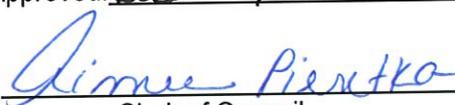
 President of Council

Approved: 

 Mayor

Date Passed: December 15, 2025

Date Approved: Dec. 15, 2025

Attest: 

 Clerk of Council

	<u>Yea</u>	<u>Nay</u>
Carbone	<input checked="" type="checkbox"/>	_____
Clark	<input checked="" type="checkbox"/>	_____
Kaminski	<input checked="" type="checkbox"/>	_____
Kosek	<input checked="" type="checkbox"/>	_____
Roff	<input checked="" type="checkbox"/>	_____
Short	<input checked="" type="checkbox"/>	_____
Spring	<input checked="" type="checkbox"/>	_____

Ord. No. 2025-142 Amended: _____
 1st Rdg. 12-15-25 Ref: _____
 2nd Rdg. Suspended Ref: _____
 3rd Rdg. Suspended Ref: _____

 Public Hrg. _____ Ref: _____
 Adopted: 12-15-25 Defeated: _____



3 YEAR PREVENT/PM

Quote Number: 11205949

Version: 1

Prepared For: STRONGSVILLE FIRE DEPT
Attn:

Rep: Brandon Bucher

Email:

Phone Number:

GPO: EMS

Quote Date: 10/30/2025

Expiration Date: 11/29/2025

DUAL Service Rep Name: Brent Rieman

DUAL Service Rep Email: brent.rieman@stryker.com

Contract Start: 09/01/2025

Contract End: 08/31/2028

Delivery Address		Sold To - Shipping		Bill To Account	
Name:	STRONGSVILLE FIRE DEPT	Name:	STRONGSVILLE FIRE DEPT	Name:	STRONGSVILLE FIRE DEPT
Account #:	20020894	Account #:	20020894	Account #:	20020894
Address:	17000 PROSPECT RD STRONGSVILLE Ohio 44149-5556	Address:	17000 PROSPECT RD STRONGSVILLE Ohio 44149-5556	Address:	17000 PROSPECT RD STRONGSVILLE Ohio 44149-5556

ProCare Products:

#	Product	Description	Months	Qty	Discount %	Sell Price	Total
1.0	STR-CHAIR-PROCARE	PROCARE-SVC-STAIR-CHAIR √ Preventative Maintenance	36	1	15.0%	\$359.55	\$359.55
2.0	STR-CHAIR-PROCARE	PROCARE-SVC-STAIR-CHAIR √ Preventative Maintenance	36	2	15.0%	\$359.55	\$719.10
3.0	STR-CHAIR-PROCARE	PROCARE-SVC-STAIR-CHAIR √ Preventative Maintenance	36	1	15.0%	\$359.55	\$359.55
4.0	POWERLOAD-PROCARE	PROCARE-SVC-POWER-LOAD √ Parts, Labor, Travel √ Preventative Maintenance √ Batteries Service	36	2	15.0%	\$6,242.40	\$12,484.80
5.0	POWERLOAD-PROCARE	PROCARE-SVC-POWER-LOAD √ Parts, Labor, Travel √ Preventative Maintenance √ Batteries Service	36	2	15.0%	\$6,242.40	\$12,484.80
6.0	POWERPRO-PROCARE	PROCARE-SVC-POWERPRO √ Parts, Labor, Travel √ Preventative Maintenance √ Batteries Service	36	3	15.0%	\$4,271.25	\$12,813.75
7.0	POWERPRO-PROCARE	PROCARE-SVC-POWERPRO √ Parts, Labor, Travel √ Preventative Maintenance √ Batteries Service	36	2	15.0%	\$4,271.25	\$8,542.50
8.0	POWERLOAD-PROCARE	PROCARE-SVC-POWER-LOAD √ Parts, Labor, Travel √ Preventative Maintenance √ Batteries Service	36	3	15.0%	\$6,242.40	\$18,727.20
9.0	POWERPRO-PROCARE	PROCARE-SVC-POWERPRO	24	2	15.0%	\$2,847.50	\$5,695.00

EX.A



3 YEAR PREVENT/PM

Quote Number: 11205949
 Version: 1
 Prepared For: STRONGSVILLE FIRE DEPT
 Attn:

Rep: Brandon Bucher
 Email:
 Phone Number:

GPO: EMS
 Quote Date: 10/30/2025
 Expiration Date: 11/29/2025
 Contract Start: 09/01/2025
 Contract End: 08/31/2028

DUAL Service Rep Name: Brent Rieman
 DUAL Service Rep Email: brent.rieman@stryker.com

#	Product	Description	Months	Qty	Discount %	Sell Price	Total
		09/01/2026 - 08/31/2028 √ Parts, Labor, Travel √ Preventative Maintenance √ Batteries Service					

ProCare Annual Payment: \$24,062.08

Price Totals:

Grand Total: \$72,186.25

Thomas P. Perciak, Mayor
 City of Strongsville, Ohio

 Authorized Customer Signer (Printed) Date

 Stryker Authorized Signature (Printed) Date

Thomas P. Perciak 12-15-25

 Authorized Customer Signature Date

 Stryker Authorized Signature Date

 Purchase Order Number



3 YEAR PREVENT/PM

Quote Number: 11205949

Version: 1

Prepared For: STRONGSVILLE FIRE DEPT

Attn:

Rep:

Brandon Bucher

Email:

Phone Number:

GPO: EMS

Quote Date: 10/30/2025

Expiration Date: 11/29/2025

DUAL Service Rep Name:

Brent Rieman

DUAL Service Rep Email:

brent.rieman@stryker.com

Contract Start: 09/01/2025

Contract End: 08/31/2028

Service Terms and Conditions:

The Terms and Conditions of this quote and any subsequent purchase order of the Customer are governed by the Terms and Conditions located at www.stryker.com/stnc. The terms and conditions referenced in the immediately preceding sentence do not apply where Customer and Stryker are parties to a Master Service Agreement. The terms and conditions referenced in the immediately preceding sentence do not apply where Customer and Stryker are parties to a written agreement governing the purchase/sale of goods and/or services.

Payment Schedule

Starting Balance:

\$72,186.25

Date	Payment	Balance
09/01/2025	\$24,062.08	\$48,124.17
09/01/2026	\$24,062.08	\$24,062.08
09/01/2027	\$24,062.08	\$0.00

Equipment Service Plan

Line Item #	Model	ProCare Materials	Serial #
1.0	6251000000	PROCARE-SVC-STAIR-CHAIR	090240495
2.0	6252000000	PROCARE-SVC-STAIR-CHAIR	090240491
2.0	6252000000	PROCARE-SVC-STAIR-CHAIR	090240493
3.0	6253000000	PROCARE-SVC-STAIR-CHAIR	090240494
4.0	639005550001	PROCARE-SVC-POWER-LOAD	2302012400263
4.0	639005550001	PROCARE-SVC-POWER-LOAD	2302012400215
5.0	639005550003	PROCARE-SVC-POWER-LOAD	2409012700201
5.0	639005550003	PROCARE-SVC-POWER-LOAD	2410012700026
6.0	6506000000	PROCARE-SVC-POWERPRO	160639784
6.0	6506000000	PROCARE-SVC-POWERPRO	140440514
6.0	6506000000	PROCARE-SVC-POWERPRO	180141080
7.0	650705550001	PROCARE-SVC-POWERPRO	2306003289
7.0	650705550001	PROCARE-SVC-POWERPRO	2307002135
8.0	6390000000	PROCARE-SVC-POWER-LOAD	151241765
8.0	6390000000	PROCARE-SVC-POWER-LOAD	140439279
8.0	6390000000	PROCARE-SVC-POWER-LOAD	180141049
9.0	650705550001	PROCARE-SVC-POWERPRO	2403003318
9.0	650705550001	PROCARE-SVC-POWERPRO	2405000284

Purchase Order Form



Account Manager _____
 Cell Phone _____

Purchase Order Date _____
 Expected Delivery Date _____
 Stryker Quote Number _____

Check box if Billing same as Shipping

BILL TO		CUSTOMER #	SHIP TO		CUSTOMER #
Billing Account Num			Shipping Account Num		
Company Name			Company Name		
Contact or Department			Contact or Department		
Street Address			Street Address		
Add'l Address Line			Add'l Address Line		
City, ST ZIP			City, ST ZIP		
Phone			Phone		

Authorized Customer Initials _____

Authorized Customer Initials _____

DESCRIPTION	QTY	TOTAL
REFERENCE QUOTE <input type="text"/>	<input type="text"/>	<input type="text"/>

Accounts Payable Contact Information

Name _____
 Email _____
 Phone _____

Stryker Terms and Conditions
www.stryker.com/stnc

Authorized Customer Signature

Printed Name _____
 Title _____
 Signature _____
 Date _____

Attachment Stryker Quote Number

*Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services on the Stryker Quote.