



# CITY OF HOLLYWOOD, FLORIDA

## PROCUREMENT SERVICES DIVISION

### Piggyback Request Form

(Use for purchase(s) over \$5,000, when piggybacking off other contracts)

Date 06/23/2021

Department/Office Police

Division/Area Parking

Requestor Hal King

Title Parking Administrator

Phone 3495

Email hking@hollywoodfl.org

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1. Requested Vendor TKH Security LLC/Park Assist

Vendor Number 102550

Address 125 Commerce Court, Suite 11, Cheshire CT 06410

Contact Person Thomas Alexander

Title Nat'l. Channel Mgr.

Phone (954) 816-9888

Email [t.alexander@tkhsecurity.com](mailto:t.alexander@tkhsecurity.com)

2. Contract title and number requesting to piggyback? 2018-033 Agreement for Parking Count and Guidance System

Awarding Agency City of Delray Beach, FL

Contract Expiration Date Valid through "...all maintenance, warranty and/or support periods..." (includes six years of preventive maintenance)

Copy of Contract and Awarding Agency documentation is attached (provide if available).

☒ Yes ☐ No

3. Product/Service being requested (be specific). Vehicle parking count and guidance system

4. Detailed description of the product/service's function and purpose. The system is to assist customers in locating parking on the beach and in the building itself. the cameras that count vehicles also can be used for security purposes.

5. Please explain what process the Department/Office took to verify and/or identify this contract. The Hollywood Parking Administrator sat on the Delray Beach evaluation committee.

6. Were alternative contracts evaluated to determine that the City is obtaining the most advantageous contract pricing for the required product/service?

☒ Yes ☐ No

Please explain A total of eight vendors replied to the Delray Beach RFP. All were reviewed by the committee and Park Assist was selected as the proposer with the best score.

7. Total cost of the requested product/service. \$181,507.04

8. Total estimated annual (fiscal year) cost of requested product/service. \$3,577.00

Account Number(s) 446.159901.54500.563010.001420.000.000

9. Is this product/service covered by a warranty? ☒ Yes ☐ No

If yes, please attach a copy of the warranty details.

#### REQUESTING DEPARTMENT RECOMMENDATION

***Note: By signing and returning this form, you are verifying and acknowledging that you have reviewed all portions (scope, terms, conditions, pricing, etc.) of the requested contract(s) and recommend its/their approval based on compliance with the City's procurement requirements and all applicable laws and regulations to the best of your knowledge.***



Requestor's Signature

06/23/2021

Date



Director's Signature

6/29/21

Date