

CITY OF HOLLYWOOD, FLORIDA

PROCUREMENT SERVICES DIVISION

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

Date 10 <u>/26/2022</u>	
Department/Office <u>Development Services</u>	Division/Area Engineering
Requestor Jose Garcia	Title Senior Project Manager
Phone (954) 921-3900, ext.6637	Email <u>jgarcia@hollywoodfl.org</u>
Requested Vendor <u>Horsepower Electric, Inc.</u>	Vendor Number
Address 8105 W. 20th Avenue, Hialeah, FL 33014	
Contact Person Michael Martinez	Title President
Phone (305) 819-4060	Email Mike@horsepowerelectric.com
2. Contract title and number requesting to piggyback? Miscellaneous Traffic and Roadway Construction, PNC2122875B1	
Awarding Agency Broward County	
Contract Expiration Date <u>03/14/2024</u>	
Copy of Contract and Awarding Agency documentation is attached (provide if available). \square Yes \square No	
3. Product/Service being requested (be specific). Solar Powered Electronic Speed Feedback Signs.	
4. Detailed description of the product/service's function and purpose. Electronic display sign, to furnish and nstall, ground mount solar power, speed feedback.	
5. Please explain what process the Department/Office took to verify and/or identify this contract. We reached out to Broward County, where the executed contract was confirmed by Eddie Martin, Construction Project Manager, 1954)577-4643.	
6. Were alternative contracts evaluated to determine that the City is obtaining the most advantageous contract pricing for the required product/service?	
Showing for the required product/service:	⊠ Yes □ No

Please explain The rates proposed are very competitive. Pricing from other contracts were compared, and was also taken into account that the legal requirements under the contract are accepted by the City of Hollywood

7. Total cost of the requested product/service. Amount not to exceed \$300,000.00

The proposal issued by Horsepower Electric, Inc. reflects an amount of \$153,869.60, which refers to an initial work for the installation of eight speed feedback signs. However, the City has budgeted \$300,000.00 for additional projects throughout the Fiscal Year.

8. Total estimated annual (fiscal year) cost of requested product/service. \$300,000.00

Account Number(s) 333.149901.54100.563010.001185.000.000

9. Is this product/service covered by a warranty? ⊠ Yes □ No

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

13.2 Contractor's Quality of Work Guarantee

13.2.1 All work performed by the Contractor shall be guaranteed against any defects in workmanship for a period of not less than one year from final acceptance of the Work Order. Any defects found within this time period shall be repaired or replaced by the Contractor at no cost to the County. 13.2.2 All products and materials furnished by the Contractor shall carry the manufacturers' standard warranty.

10. Will grant funds be used to pay for the requested product/service? ⊠ Yes ☐ No

If yes, please explain 2019 General Obligation Bond will be used.

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.

DocuSigned by:	
Azita Behmardi	11/1/2022
Requester selignature	Date
DocuSigned by:	
andria Wingett	_11/3/2022
Director's Signature	Date