



# CITY OF HOLLYWOOD, FLORIDA

## PROCUREMENT SERVICES DIVISION

### Piggyback Request Form

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

Date 07.27.2023

Department/Office Parks, Recreation & Cultural Arts

Division/Area 309091

Requestor D.Vazquez

Title Assistant Director

Phone 954.921.3404

Email dvazquez@hollywoodfl.org

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1. Requested Vendor Top Line Recreation.

Vendor Number 36316

Address 2922 Howland Blvd, Suite 3, Deltona FL 32725

Contact Person Vivian Figueroa

Title Sales Representative

Phone 954.240.7767

Email vivianf@toplinerec.com

2. Contract title and number requesting to piggyback? RFP NO 18/19-2 Various Equipment and Amenities for Parks and Playgrounds

Awarding Agency Clay County Florida

Contract Expiration Date 09.30.2024

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

Yes  No

3. Product/Service being requested (be specific). Purchase and installation of playground equipment and safety surfacing.

4. Detailed description of the product/service's function and purpose. This project is part of the City's ongoing capital improvement program. The Stan Goldman Memorial Park playground area has reached its usage expectancy and needs replacement. The new playground equipment, safety surfacing and shade will provide the youth programs and community leisure activities for the next ten to twelve years.

5. Please explain what process the Department/Office took to verify and/or identify this contract. Top Line Recreation's representative was contacted for a proposal.

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 PRCA is working with multiple playground vendors on multiple playground capital improvement projects.

7. Total cost of the requested product/service. \$226,243.21

8. Total estimated annual (fiscal year) cost of requested product/service. \$ 0.00

Account Number(s) 117.309901.57200.563010.001556.000.000 - \$200,000.00  
334.309901.57200.563010.000142.000.000 - \$26,243.21

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

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

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

If yes, please explain N/A

### 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

07/26/2023  
Date

  
Director's Signature

7/27/23  
Date