



City of Hollywood, Florida

2600 HOLLYWOOD BLVD. • P.O. Box 229045 • ZIP 33022-9045

DATE: May 7, 2015

RE: **BLANKET ORDER # B002690**

PRODUCT/SERVICE: Laboratory Testing &
Analysis - Water and Wastewater

Pace Analytical
Attn: Paul R. Jackson
3610 Park Central Blvd.
Pompano Beach, FL 33064

Telephone Contact: 813-731-1595
Fax: 386-673-4001

Dear Vendor:

This is to inform you that the City of Hollywood, Florida is entering into a Blanket Order with your Company based on one of the following:

- | | | |
|-------------------------------------|---|--------|
| <input type="checkbox"/> | FORMAL BID # | |
| <input type="checkbox"/> | INFORMAL BID # | DATED: |
| <input type="checkbox"/> | RENEWAL OF FORMAL BID # | DATED: |
| <input type="checkbox"/> | EXTENSION OF FORMAL BID/RFP# | DATED: |
| <input type="checkbox"/> | WRITTEN QUOTATION # | DATED: |
| <input type="checkbox"/> | VERBAL QUOTATION PER | DATED: |
| <input type="checkbox"/> | STATE OF FLORIDA CONTRACT # | DATED: |
| <input type="checkbox"/> | BROWARD COUNTY BID # | |
| <input checked="" type="checkbox"/> | OTHER: PIGGYBACK VOLUSIA COUNTY 14-B-148AK | |

The term of this order is **5/7/2015** through **5/6/2018**

The estimated annual dollar value is **\$130,000.00**

The obligations of the City of Hollywood under this order are subject to the availability of funds lawfully appropriated for its purpose by the City Commission and are subject to the terms and conditions contained on the Purchase Order form.

The City of Hollywood Departments will issue hard copy orders against this Blanket Order as your authorization to deliver. All invoices must reference each unique document number.

If you have any questions, please contact **Rob Lowery** at (954) 921-3552

c: Public Utilities
Finance



CITY OF HOLLYWOOD, FLORIDA

PROCUREMENT SERVICES DIVISION

CITY OF HOLLYWOOD
PROCUREMENT SERVICES
DIVISION
2015 MAR 30 AM 8:22

Piggybacking Request Form

(Use for purchase(s) over \$15,000, when piggybacking off other contracts)

Date 03/25/15

Department/Office Public Utilities

Division/Area 4001

Contact Person Kassandra Myers

Title Manager

Phone 954-921-3414

Email kmyers@hollywoodfl.org

1. Requested Vendor Pace Analytical Services, Inc

Vendor Number 32908

Address 3231 N.W. 77th Avenue
Boca Raton, FL 33431

Contact Person Paul R. Jackson

Title Program Manager

Phone 386-672-5668

Email paul.jackson@pacelabs.com

2. Contract title requesting to piggyback? Laboratory Analysis and Sampling.

Awarding Agency Volusia County Government

Contract Expiration Date 10/17/17

Copy of Contract and Awarding Agency documentation is attached.

☒ Yes ☐ No

3. Product/Service being requested (be specific). Laboratory Testing, Analysis, and Field Sampling Services.

4. Detailed description of the products/services function and purpose. The City of Hollywood is requesting bids for National Environmental Laboratory Accreditation Program (NELAC) accredited laboratories to provide Environmental, Water, and Wastewater Testing, Analysis, and Sampling Services.

Procurement Service Division use only

Requisition # R _____
(As Applicable)

Purchase Order # P _____
(As Applicable)

Blanket Purchase Order # BPO _____
(As Applicable)

(Revised 9/2013)

5. Please explain what process the Department/Office took to verify and/or identify this contract. Provided by Procurement.

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 _____

7. Total cost of the requested product/service. \$390,000.00.

8. Total estimated annual (fiscal year) cost of requested product/service. \$130,000.00/yr

Account Number(s) 42.4001.00732.536.003117

42.4001.00783.536.003117

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

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

10. Would this purchase(s) result in the potential of future purchases for related products/services being restricted to a particular vendor or create a specific vendor as sole source provider for related items?

☐ Yes ☒ No

If yes, please describe the related products/services and estimated cost(s.) _____

11. Would this purchase(s) result in any future maintenance costs which are not included in the initial purchase?

☐ Yes ☒ No

If yes, please attach a draft maintenance plan which includes cost estimates and funding source(s.) _____

12. Is this a grant related purchase? ☐ Yes ☒ No

If yes, please provide details (timeline, expiration dates, milestones, special procurement requirements, etc.) _____

Will this require matching funds? ☐ Yes ☐ No

What is the grant source? _____

What is the grant (dollar) amount? _____

13. Please complete an advanced search of the vendor recommended for award on the Federal Government's Systems for Award Management at www.sam.gov.

Date of Advanced Search _____

Company Name(s) Searched

Search Results

Procurement Service Division use only

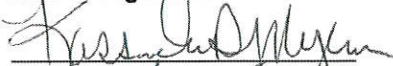
Requisition # R _____
(As Applicable)

Purchase Order # P _____
(As Applicable)

Blanket Purchase Order # BPO _____
(As Applicable)

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 and recommend its approval based on the contract complying with the City of Hollywood's scope and pricing requirements and to the best of your knowledge the contract does not violate any applicable policy, statute, governing rule or regulation.



 Contact Person's Signature

3-25-15

 Date



 Supervisor's Signature

3/26/15



 Date



 Director's Signature

3/27/15

 Date

APPROVAL (Procurement Service Division Use Only)			
Verified By:		Date	<u>4/16/15</u>
Approved By:		Date	<u>4-28-15</u>

Procurement Service Division use only

Requisition # R _____
 (As Applicable)

Purchase Order # P _____
 (As Applicable)

Blanket Purchase Order # BPO _____
 (As Applicable)