

CITY OF HOLLYWOOD, FLORIDA

OFFICE OF PROCUREMENT AND CONTRACT COMPLIANCE

Sole Source Justification Form (Use for Purchases(s) over \$5,000)

Per City of Hollywood Ordinance § 38.41 (C) (2), sole source purchases are exempt from competitive bid and competitive proposal requirements. Sole-source goods, supplies, materials, equipment and services, such as unique, patented, or franchised goods, supplies, materials, equipment or services, are exempt if the CPO determines, after conducting a good faith review of available sources, that the particular supply or service is available from only one source.

Date February 20, 2025

Department/Office Fire Rescue

Division/Area 215101

Requestor Alexander N. Poli

Title Division Chief of Administration

Phone (954) 967-4248

Email Apoli@hollywoodfl.org

1. Requested Vendor Stryker Medical

Vendor Number 10175

Address PO Box 93308 Chicago, IL, 60673

Contact Person Gisel Lepior

Title Sales

Phone (954) 952-0010

Email Gisel.Lepior@Stryker.com

- 2. Product/Service being requested (be specific). One (1) LIFEPAK 15. The purchase also includes the LIFEPAK 15 preventive service (ProCare). It's an annual onsite preventive maintenance inspection and unlimited repairs including parts, labor, and travel with battery coverage.
- 3. Detailed description of the product/service's function and purpose. The LIFEPAK 15 performs an electrocardiogram and monitors the electrical activity of the heart and is also a defibrillator for acute cardiac care. It's designed for basic life support and advanced life support.
- 4. Please explain in detail why this vendor is the sole source supplier for the required product/service. Be sure to explain the necessary features this vendor provides which are not available from any other vendor. <u>Stryker Medical is the manufacturer of the LIFE-PAK 15</u>. <u>Please see the attached Sole Source Letter.</u>
- 5. Please explain in detail what process the Department/Office took to verify that there are no other vendors or products/services available to perform the required function. <u>Stryker Medical is the manufacturer of the LIFE-PAK 15. Please see the attached Sole Source Letter.</u>

(Revised 04/2023)

6. Please submit supporting documentation from the vendor or other sources certifying that this vendor is a sole source for the required product/service being requested. For example, the vendor holds the distribution rights, productions rights, copyrights, trademark and/or patent:
○ Vendor is the sole provider of the product/service that has unique characteristics essential to the required function which no other product/service is capable of satisfying.
☐ Product is replacing existing product and necessary to maintain warranty or service contract.
☐ Product is replacing existing product and is not interchangeable with any other product.
Other (Please explain)
7. Total cost of the requested product/service? \$61,817.13
8. Total estimated annual (fiscal year) cost of requested product/service? <u>\$61,817.13</u>
Account Number(s) <u>118.219802.52200.552320.001946.000.000</u> & 111.219801.52200.564530.000000.000.000.
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 <u>N/A</u>
REQUESTING DEPARTMENT RECOMMENDATION
<u>WARNING</u> : Per Florida Statutes 838.22(2) – "It is unlawful for a public servant or a public contractor who has contracted with a governmental entity to assist in a competitive procurement to knowingly and intentionally obtain a benefit for any person or to cause unlawful harm to another by circumventing a competitive solicitation process required by law or rule through the use of a sole-source contract for commodities or services."
I recommend that the competitive quoting/bidding process be waived and that the goods/services be purchased as a sole source. 2/20/2 Requestor's Signature Date
Director's Signature Date