



# CITY OF HOLLYWOOD, FLORIDA

## PROCUREMENT SERVICES DIVISION

### Piggybacking Request Form

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

Date 11/7/16

Department/Office Public Works

Division/Area Env Serv

Contact Person Karen Arndt

Title Assistant Director PW

Phone 954-967-4626

Email karndt@hollywoodfl.org

2016 NOV -7 PM12:15  
CITY OF HOLLYWOOD  
PROCUREMENT SERVICES  
DIVISION

1. Requested Vendor Tetra Tech, Inc.

Vendor Number \_\_\_\_\_

Address 2310 Lucien Way Suite 120 Maitland, FL 32751

Contact Person Betty Kamara

Title Contracts Administrator

Phone 321-441-8518

Email Betty.Kamara@tetrattech.com

2. Contract title requesting to piggyback? Contract No T2111235B1 - Disaster Debris Monitoring Services

Awarding Agency Broward County

Contract Expiration Date March 30, 2018

Copy of Contract and Awarding Agency documentation is attached.

Yes  No

3. Product/Service being requested (be specific). Disaster debris monitoring services prior to, and following a disaster debris event. Services include planning, field oversight, field documentation and technical assistance.

4. Detailed description of the products/services function and purpose. Disaster debris monitoring services including a documentation system to control, track and document all work in full compliance with federal and state cost reimbursement requirements.

*Procurement Service Division use only*

Requisition # R  
(As Applicable)

Purchase Order # P  
(As Applicable)

Blanket Purchase Order # BPO  
(As Applicable)

5. Please explain what process the Department/Office took to verify and/or identify this contract. This contract was awarded by Broward County on October 10, 2016.

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. TBD per storm event

8. Total estimated annual (fiscal year) cost of requested product/service. TBD

Account Number(s) TBD by Finance \_\_\_\_\_

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](http://www.sam.gov).

Date of Advanced Search \_\_\_\_\_

*Procurement Service Division use only*

Requisition # R \_\_\_\_\_  
(As Applicable)

Purchase Order # P \_\_\_\_\_  
(As Applicable)

Blanket Purchase Order # BPO \_\_\_\_\_  
(As Applicable)

Company Name(s) Searched

Search Results

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 you knowledge the contract does not violate any applicable policy, statute, governing rule or regulation.**

  
Contact Person's Signature

11/7/16  
Date

\_\_\_\_\_  
Supervisor's Signature

11/7/16  
Date

  
Director's Signature

\_\_\_\_\_  
Date

**APPROVAL (Procurement Service Division Use Only)**

Verified By:		Date	<u>11/15/16</u>
Approved By:		Date	<u>11/15/2016</u>

*Procurement Service Division use only*

Requisition # R \_\_\_\_\_  
(As Applicable)

Purchase Order # P \_\_\_\_\_  
(As Applicable)

Blanket Purchase Oder # BPO \_\_\_\_\_  
(As Applicable)



November 14, 2016

*Sent electronically to: [lsilvey@hollywoodfl.org](mailto:lsilvey@hollywoodfl.org)*

Linda Silvey  
Procurement Contracts Officer  
City of Hollywood Procurement Services  
2600 Hollywood Boulevard, Room 303  
Hollywood, FL 33020

**Re: Disaster Debris Monitoring and Management Services**

Dear Ms. Silvey,

We appreciate the City of Hollywood, Florida's ("the City") interest in Tetra Tech, Inc. ("Tetra Tech") for disaster debris monitoring and management services. As discussed, Tetra Tech was recently awarded a competitively bid contract to perform disaster debris monitoring and management services for Broward County, Florida (the "County") which was procured under Solicitation No. T2111235B1. Tetra Tech agrees to provide such services to the City based on the same contractual arrangements, terms, and conditions that exist between Tetra Tech and the County.

We look forward to the opportunity to assist the City with this important effort, if needed. Should you have any questions or require additional information, please contact Betty Kamara at 407-803-2551 or [betty.kamara@tetrattech.com](mailto:betty.kamara@tetrattech.com).

Sincerely,

TETRA TECH, INC.

A handwritten signature in black ink, appearing to read 'Ralph Natale', with a stylized flourish at the end.

Ralph Natale  
Director, Post Disaster Programs