



CITY OF HOLLYWOOD, FLORIDA

PROCUREMENT SERVICES DIVISION

Piggybacking Request Form

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

Date 11/23/2016

Department/Office Information Technology

Division/Area 1345

Contact Person Raheem Seecharan

Title Director

Phone 954-921-3479

Email rseecharan@hollywoodfl.org

1. Requested Vendor Verizon Wireless

Vendor Number 21065

Address One Verizon Way, Basking Ridge, NJ 07920-1097

Contact Person Rafael Maldonado

Title Account Manager

Phone 904-437-9596

Email

Rafael.Maldonado@verizonwireless.com

2. Contract title requesting to piggyback? Mobile Communications Services Contract - DMS-10/11-008C

Awarding Agency State of Florida Department of Management Services

Contract Expiration Date 1/19/2022

Copy of Contract and Awarding Agency documentation is attached.

Yes No

3. Product/Service being requested (be specific). Wireless

4. Detailed description of the products/services function and purpose. Air Cards for Police laptops, Wireless Cards for Parking Meters and Data Communications Units for Water Meters.

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. Contacted Verizon representative who advised that there is a State of Florida agreement in place.

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 NASPO contract was evaluated and found to be \$4 more expensive per device

7. Total cost of the requested product/service. \$1,250,000.00

8. Total estimated annual (fiscal year) cost of requested product/service. \$250,000.00

Account Number(s) 57.1345.00056.590.004102 _____

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 11/23/2016

Company Name(s) Searched

Search Results

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Verizon

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

Date

Supervisor's Signature

Date

Director's Signature

Date

APPROVAL (Procurement Service Division Use Only)

Verified By:		Date	
Approved By:		Date	

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Requisition # R _____
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(As Applicable)