



CITY OF HOLLYWOOD, FLORIDA

PROCUREMENT SERVICES DIVISION

Piggybacking Request Form

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

Date 3/31/14

Department/Office Information Technology

Division/Area _____

Contact Person John Barletta

Title Director

Phone 3479

Email jbarletta@hollywoodfl.org

1. Requested Vendor Tyler Technologies, Inc.

Vendor Number 34083

Address 5519 53rd Street, Lubbock, Texas

Contact Person Garth Magness

Title Senior Account Executive

Phone 888- 355-1093

Email garth.magness@tylertech.com

2. Contract title requesting to piggyback? Community Development and Services System

Awarding Agency Town of Jupiter, Fl

Contract Expiration Date N/A

Copy of Contract and Awarding Agency documentation is attached.

☒ Yes ☐ No

3. Product/Service being requested (be specific). Electronic Plan Review and Submittals, Building Inspections, Code Violations, Business Licenses, Fire Inspections, Certificate of Use.

4. Detailed description of the products/services function and purpose. This system will enable the City to offer on-line submittals of plans, provide for electronic and concurrent plan reviews by multiple disciplines, enable Building Inspectors to approve inspections in the field and enable Code Enforcement Officers to cite property

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. Tyler provided staff with several in depth demonstrations of their product. Staff contacted several cities already utilizing the system to obtain feedback and comments and staff visited the City of Marco Island to see how the system ran in a production environment.

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 This is a natural expansion of an integrated solution. The City acquired Tyler's Utility Billing System and this system will utilize the same Cashiering module for payments as well as the same interface to the City's General Ledger System.

7. Total cost of the requested product/service. Approximately \$600,000- ^{\$650,000}

8. Total estimated annual (fiscal year) cost of requested product/service. \$60,000

Account Number(s) 57.1345.00056.590.004631

57.1345.00056.590.007113

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.) Could be the potential for adding additional licenses- \$10-15,000 one time costs.

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.) Maintenance costs will be approximately \$60,000/year after the first year.

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? _____

Procurement Service Division use only

Requisition # R _____
(As Applicable)

Purchase Order # P _____
(As Applicable)

Blanket Purchase Order # BPO _____
(As Applicable)

(Revised 9/2013)

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 _____

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

Date

Supervisor's Signature



Date


Director's Signature

3/31/14

Date

APPROVAL (Procurement Service Division Use Only)

Verified By:		Date	<u>5/20/14</u>
Approved By:		Date	<u>5/20/14</u>

Procurement Service Division use only

Requisition # R _____
(As Applicable)

Purchase Order # P _____
(As Applicable)

Blanket Purchase Order # BPO _____
(As Applicable)

(Revised 9/2013)