

CITY OF HOLLYWOOD, FLORIDA

PROCUREMENT SERVICES DIVISION

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

Date: March 3, 2022								
Department/Office: Public Works	Division/Area: Fleet Maintenance							
Contact Person: <u>Joel Wall;</u> <u>Peter Bieniek</u>	Title: Fleet Superintendent; Public Works Director							
Phone: <u>954.967.4555;</u> <u>954.967.4526</u>	Email: jwall@hollywoodfl.org; pbieniek@hollywoodfl.org							
Requested Vendor: Port Consolidated, Inc.	Vendor Number: #21471							
Address: P.O. Box 350430, Ft. Lauderdale, Fl. 33335								
Contact Person: Don Carlton	Title: Sales Manager							
Phone: <u>800-638-5823</u> Fax: <u>954-527-1191</u>	Email: cspev@portconsolidated.com							
2. Contract title requesting to piggyback?								
Awarding Agency: City of Pompano Beach – Lead Agency								
Contract Expiration Date: March 14, 2027								
Copy of Contract and Awarding Agency documentation is attached. ☑ Yes ☐ No								
3. Product/Service being requested (be specific). <u>Supply ar of Hollywood.</u>	nd delivery of Unleaded and Diesel Fuels for the City							
4. Detailed description of the products/services function and Diesel Fuels for the City of Hollywood. These supplies are to Department Generators, Public Utilities Generators, PRCA delivered by transport and tankwagon. This contract is through	for Central Facility (all vehicles and equipment), Fire Marina, HPD Facility and City Hall Generators,							
Procurement Service Divisio	n use only							
Requisition # R Purchase Order # P BPO	Blanket Purchase Oder #							
(As Applicable) (As Applicable)	(As Applicable)							

<u>Purchasing Cooperative Group with the City of Pompano Beach as the Lead Agency, and will also be utilized for any Emergencies the City of Hollywood may encounter.</u>

5. Please explain what process the Department/Office took by the Public Works Department for the best price through the Southeast Florida Governmental Purchasing Cooperative	the City of Pompano Beach as the Lead Agency for
6. Were alternative contracts evaluated to determine that the pricing for the required product/service?	e City is obtaining the most advantageous contract ☐ Yes ☒ No
Please explain.	
7. Total cost of the requested product/service. \$1,950,000.0	<u>io</u>
8. Total estimated annual (fiscal year) cost of requested pro	duct/service. <u>\$1,950,000.00</u>
Account Number(s) (Acct. Central Facility - #557.510101.5: #557.510101.51900.552610.000000.000.000, Fire - #001.2 Utilities - #442.400502.53600.552110.000000.000, PRCA Marina HPD Facility - #001.500304.51900.546350.000000.000 #001.500303.51900.546310.000000.000.000)	15101.52200.552110.000000.000.000, Public 12.400601.53600.552110.000000.000.000, a - #001.300301.57500.552110.000000.000.000,
9. Is this product/service covered by a warranty? ☐ Yes ⊠] No
If yes, please attach a copy of the warranty details.	
10. Would this purchase(s) result in the potential of future per restricted to a particular vendor or create a specific vendor a	
☐ Yes No	
If yes, please describe the related products/services	s 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	h includes cost estimates and funding source(s.)
12. Is this a grant related purchase? ☐ Yes ⊠ No	
If yes, please provide details (timeline, expiration da etc.)	ates, milestones, special procurement requirements,
Will this require matching funds? ☐ Yes ☐ No	
What is the grant source? N/A	
What is the grant (dollar) amount? N/A	
Procurement Service Division	n use only
Requisition # R Purchase Order # P	Blanket Purchase Oder #
BPO(As Applicable) (As Applicable)	(As Applicable)

	se complete an advand d Parties List System a	ed search of the vendor r t <u>www.epls.gov</u> .	ecommended for	r award on the Fe	ederal Government's
Į	Date of Advanced Sear	ch			
(Company Name(s) Sea	rched S	earch Results		
		-			
		-			
	REQU	ESTING DEPARTMENT	RECOMMENDA	ATION	
approva and to t rule or r Contact Supervis	al based on the contra	conditions, pricing, etcact complying with the dedge the contract does	City of Hollywoo	od's scope and particular policies and policies	pricing requirements
	A	PPROVAL (Procuremen	t Service Division	on Use Only)	
Verified E	Ву:			Date	
Approved By:	i			Date	
		Procurement Service Divi	sion use only		
Requisition	on # R	Purchase Order # P	<i>E</i>	Blanket Purchase C	Oder#
BPO (As Appli	cable)	(As Applicable)	('As Applicable)	



Piggyback Checklist

Contract Number/Name: Port Consolidated, Inc., Award – RFP E-03-22

Services/Supplies to be provided: Supply and Delivery of Unleaded and Diesel Fuels

Using Department(s): Public Works, Fire, Public Utilities, PRCA Marina

ITEMS VERIFIED	YES	NO	COMMENT
Does the piggyback contract allow the utilization of the contract by other entities, including use in the state of FL if it's an out of state contract?	Yes		Southeast Florida Governmental Purchasing Cooperative Group Award RFP E-03-22, City of Pompano Beach as the lead agency.
Was the contract awarded through a solicitation or other acceptable competitive process that was publicly advertised?	Yes		
Piggyback Contract is Valid? Contract Expiration Date:	Yes		Expires: 03/14/2027
Goods / Services requested by the Using Department(s) match those allowed under the piggyback contract and do not extend beyond the expiration date of the piggyback contract?	Yes		
Does the piggyback contract have acceptable terms and conditions?	Yes		
Did the vendor confirm that the piggyback contract is authorized to be used with the established terms, conditions, and pricing?	Yes		City of Pompano Beach approves of using the contract.
Is pricing "Fair and Reasonable" in the piggyback contract?	Yes		·
Piggyback Contract Certificate(s) of Insurance (COI) is acceptable to the COH's Risk Management?	Yes		
Piggyback Contract has Warranty Conditions?		No	This contract is for the purchasing of unleaded and diesel fuels.
Piggyback Contract has liquidated damages (if Yes, provide the daily liquidated amount)		No	

Verified By:

Date: <u>3</u> 3

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DATE (MM/Db/YYYY)

CERTIFICATE OF LIABILITY INSURANCE

1/26/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed

t	f SUBROGATION IS WAIVED, subk his certificate does not confer rights	oct to	o the e cer	e terms and conditions of tificate holder in lieu of si	uch endorsement(s).	require an endorsement.	A stateme	ent on
PRO	DUCER License # 0E67768				CONTACT James J				
Insurance Office of America				PHONE (A/C, No, Ext): (954) 334-2395 23915 FAX: No): (954) 318-1383					
Sul	W. Cypress Creek Road te 320				Appress: James.		usa.com		
	t Lauderdale, FL 33309						RDING COVERAGE	N.	AIC#
							rance Company	2414	
INSI	NSURED				f .	-			
					NSURER B : AXIS Surplus Insurance Company 26620				<u>u</u>
Port Consolidated, Inc. P O Box 350430					INSURER C:				
Fort Lauderdale, FL 33335					INSURER D:				
·					INSURER E : INSURER F :			- 	
	VERAGES CEF	TIEI	CAT	E NUMBER:	INSUKER F:		DEMONDER AUTHORIO	I	
T	HIS IS TO CERTIFY THAT THE POLICI NDICATED. NOTWITHSTANDING ANY I ERTIFICATE MAY BE ISSUED OR MAY	ES C	F IN	SURANCE LISTED BELOW MENT. TERM OR CONDITIO	N OF ANY CONTRA	CT OR OTHER	R DOCUMENT WITH RESPECT	T TO WHICH	2IHT
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LTR		INSC	SUBI	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS		
A	X COMMERCIAL GENERAL LIABILITY		1				EACH OCCURRENCE \$	·	000,000
	CLAIMS-MADE X OCCUR			MWZY31183022	2/1/2022	2/1/2023	DAMAGE TO RENTED PREMISES (Ea occurrence) \$		500,000
							MED EXP (Any one person) \$		5,000
			1		- 1		PERSONAL & ADV INJURY \$	·	000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:		1				GENERAL AGGREGATE \$		000,000
	POLICY POLICY X LOC		1				PRODUCTS - COMP/OP AGG \$	2,	000,000
	OTHER:		ļ		}		s		
Α	AUTOMOBILE LIABILITY				·		COMBINED SINGLE LIMIT (Ea accident) \$	1,	000,000
	X ANY AUTO			MWTB31183122	2/1/2022	2/1/2023	BODILY INJURY (Per person) \$		
	OWNED SCHEDULED AUTOS ONLY				ļ		BODILY INJURY (Per accident) \$		
	HIRED AUTOS ONLY AUTOS ONLY CA9948 W.CS-90]				PROPERTY DAMAGE (Per accident) \$		
	X CA9948 X MCS-90						\$		
В	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE \$	2,	000,000
	X EXCESS LIAB CLAIMS-MADE	}		P00100080337101	2/1/2022	2/1/2023	AGGREGATE \$	2,	000,000
	DED RETENTION\$						s		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE N		MWC31182922	2/1/2022	2/1/2023	E.L. EACH ACCIDENT \$	1,	000,000	
	(Mandatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE \$	1,	000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$	1,	000,000
OFSI	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	FS (ACORI	D 101. Additional Romarks Schools	la may be attached & may	m enere le moule	rodi		
hiri	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC by days notice of cancellation, except to	n da	ys no	otice in the event of non-pa	yment of premium.	peros io iosfuli	····		
:itv	of Hollywood is additional insured as r	or no	cts to	n general lightlify and sutor	nohila liahilitu se ro	nuisad by wel	tton contract \$30 Dave(40 D	ave notice	o.f
anc	ellation for non-payment of premium in	acc	ordai	nce with policy provisions	Hobite hability as re-	danag by Mil	tten contract. 30 Days/10 D	ays nouce	OI .
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					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
			AUTHORIZED REPRESENTATIVE						
	City of Hollywood Procurem	ent S	Servi	ces	1	_			
	2600 Hollywood Blvd.				MIL				

ACORD 25 (2016/03)

Hollywood, FL 33020

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