

(Revised 08/2015)

CITY OF HOLLYWOOD, FLORIDA

PROCUREMENT SERVICES DIVISION

Piggybacking Request Form (Use for purchase(s) over \$25,000, when piggybacking off other contracts)

	· ·					
Date <u>08-26-2020</u>						
Department/Office Fire	Rescue	Division/Area <u>215101</u>				
Contract Administrator	Alexander N. Poli	Title <u>Division Chief</u>				
Phone (954) 967-4248		Email Apoll@hollywoodfl.org				
Requested Vendor !	Municipal Equipment Company	Vendor Number <u>32188</u>				
Address <u>2049 West</u> Orlando, Fl						
Contact Person <u>Joe Fox</u>		Title Sales Coordinator				
Phone (800) 228-8448		Email joefox@mecofire.com				
2. Contract title requesti	ng to piggyback? <u>17-0606H</u>					
Awarding Agency <u>Lake County, Florida</u>						
Contract Expiration Date <u>June 30, 2021</u>						
Copy of Contrac	t and Awarding Agency document	ation is attached. ☑ Yes ☐ No				
3. Product/Service being	requested (be specific). <u>A 2nd set</u>	of bunker gear for all firefighters.				
Bunker Gear) is utilized carcinogens and toxins to gear will be issued to all	by firefighters during firefighting ac o our firefighters after being expos firefighters. This will allow firefighte	d purpose. <u>Our Personal Protective Equipment</u> ctivities. In order to minimize our exposures to ed to products of combustion, a 2 nd set of bunker ers to don clean bunker gear after the incident has nd dried. The washing and drying of bunker gear				
Procurement Service Division use only						
Requisition # R As Applicable)	Purchase Order # P (As Applicable)	Blanket Purchase Oder # BPO(As Applicable)				

takes a few hours to complete. Cancer in the Fire Service has been increasing in an alarming rate due to the exposures of the products of combustion. 5. Please explain what process the Department/Office took to verify and/or identify this contract. This Division contacted other Fire Rescue Departments and they identified this contract by Lake County, FI as a point of purchase. 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 Yes, This contract provided the best price for the purchase. 7. Total cost of the requested product/service. \$504,000.00. 8. Total estimated annual (fiscal year) cost of requested product/service.\$504.000.00. Account Number(s) 334.219901.52200.563010. 001264.000.000. 4333.219901.52200. 564530.001191.000.000 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 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.) N/A 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.) N/A 12. Is this a grant related purchase? ☐ Yes ☒ No If yes, please provide details (timeline, expiration dates, milestones, special procurement requirements, etc.) N/A Will this require matching funds? ☐ Yes ☒ No What is the grant source? N/A What is the grant (dollar) amount? N/A 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. Procurement Service Division use only

Purchase Order # P

(As Applicable)

Blanket Purchase Oder # BPO

(As Applicable)

(Revised 08/2015)

Requisition # R

(As Applicable)

Date	of Advanced Search <u>08-26-2020</u>					
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REQUESTING DEPARTMENT RECOMMENDATION						
portions (sc based on the	ning and returning this form, you are volume, terms, conditions, pricing, etc.) on the contract complying with the City of How knowledge the contract does not vision.	of the requested cont Hollywood's scope an	ract and record d pricing requ	mmend its approval irements and to the		
Contact Pers	on's Signature	8-26-2	0			
Supervisor's	Signature	Date 3 - 26 - 20				
B	172 8	-26-20				
Director's Sig	nature	Date				
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Verified By:			Date			
Approved By:			Date			
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Login.gov FAQs

Print

ALERT: SAM.gov will be down for scheduled maintenance Saturday, 09/12/2020 from 8:00 AM to 1:00 PM.

ALERT: CAGE is experiencing intermittent service interruptions. SAM registrants may encounter an error validating a CAGE Code. If this happens, please try again later.

Search Results

Current Search Terms: MUNICIPAL EQUIPMENT COMPANY, LLC*

Total records:1 Save PDF Export Results Print Result Page: Sort by Relevance · Order by Descending · Your search for MUNICIPAL EQUIPMENT COMPANY, LLC* returned the following results... MUNICIPAL EQUIPMENT COMPANY, LLC Entity Status: Active DUNS: 020992533 CAGE Code: oJ7C6 View Details Has Active Exclusion?: No DoDAAC: Expiration Date: 01/05/2021 Debt Subject to Offset?: No Purpose of Registration: All Awards Result Page: 1 Save PDF Export Results

IBM-P-20200814-1154 WWW5

Search Records Disclaimers FAPHS.gov Data Access Accessibility GSA.gov/IAE Check Status Privacy Policy GSA.gov About USA.gov

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Help