

CONTRACT ROUTING CONTROL SHEET

Routing Order: (1) Department Director, (2) Purchasing and Contract Manager (3) Legal,
(4) Risk Manager, (5) Vendor for Signature (6) Finance Director, (7) Town Clerk, (8) Town Council/Town Manager

EVERY SECTION MUST BE COMPLETED

DEPARTMENT: Public Works and Transportation	
Department Contact Person for Contract: <u>Patrick Lechner</u> Extension: <u>3534</u>	
Contractor/Vendor Name and address: <u>Gregory Poole Equipment Company, 4807 Beryl Rd., Raleigh NC. 27606</u>	
Contractor/Vendor Phone: <u>919.775.7047</u> Contractor/Vendor Contact Person: <u>Christy Hamilton</u>	
Purpose of Contract: <u>3 year term for Generator inspections, repairs, replacement and testing.</u>	
Amount: <u>\$31,171.73 est per year</u> Budget Code: <u>10-5000-44500</u>	
Type of Contract: <input type="checkbox"/> New <input checked="" type="checkbox"/> Renew <input type="checkbox"/> Amendment Exhibits/Attachments included: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	
Department Director's Signature: <u>Jose F. Martinez III</u> Date: <u>8-25-20</u>	
All Contracts should be sent to the Purchasing and Contract Manager (Steve Maynard). Steve will determine whether the contract will need to go to the Legal Department for review or not.	
LEGAL	
Reviewed by: <u>Steve Maynard</u> Date: <u>8/25/2020</u>	
Comments: <u>3 year term. Patrick Lechner will submit agenda.</u>	
<input checked="" type="checkbox"/> Town Council approval required <input type="checkbox"/> Town Manager authorized to approve	
<input type="checkbox"/> N/A – Purchasing and Contract Manager to forward	
<input type="checkbox"/> Other Approvals required/permitted:	
RISK MANAGER	
Reviewed by and approved: <u>Steve Maynard</u> Date: _____	
<input type="checkbox"/> N/A – Purchasing and Contract Manager to forward	
<input checked="" type="checkbox"/> Insurance specifications meet requirements.	
<input type="checkbox"/> Insurance specifications have been revised.	
<input type="checkbox"/> A pre-project safety review between the contractor and contracting department is required.	
Return to Department Contact Person to have contract signed by Contractor prior to forwarding to Finance Director	
Obtain a copy of Certificate of Insurance that includes the proper coverage and shows the Town as an additional insured	
FINANCE DIRECTOR	
<input type="checkbox"/> Sufficient funds are available in the proper category to pay for this expenditure.	
<input type="checkbox"/> This contract is conditioned upon appropriation by the Town Council of sufficient funds.	
<input type="checkbox"/> A budget amendment is necessary before this agreement is approved.	
<input type="checkbox"/> A budget amendment is attached as required for approval of this agreement.	
Finance Director: _____ Date: ____/____/20__	
TOWN CLERK	
Date Received: ____/____/20__ Signed by Contractor: <input type="checkbox"/> YES <input type="checkbox"/> NO--Return to Department	
Council Action Required: – forward to Town Manager Agenda Date: ____/____/20__	
Approved by Council: <input type="checkbox"/> YES <input type="checkbox"/> NO	
TOWN MANAGER	
This document has been reviewed and approval is recommended by the Town Manager: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Town Manager: _____ Date: ____/____/20__	
After approval and signatures, contract will be sent to the Purchasing and Contracts Manager who will return it to the Department Contact Person for Department to administer.	
Scan signed contract to Department contracts folder (include Routing Sheet and copy of Certificate of Insurance)	