

CONTRACT CHECKLIST

I. PROJECT INFORMATION			
Date: <u>10/5/2021</u>		REQUESTING DEPARTMENT <u>WW</u>	
Project Name: _____		Polymer Chemicals FY22	
Project Manager: <u>Travis Kissire</u>		Contract Amount: \$250,000 p/FY	
Contractor/Consultant/Design Engineer: _____		Univar Solutions	
Is this a change order? Yes ☐ No ☒ Change Order No. <u>N/A</u>			
II. BUDGET INFORMATION (Project Manager to Complete)		III. Contract Type	
Fund: <u>60</u> Department: <u>3510</u> GL Account: <u>52015</u> Project Number: <u>10373</u> Will the project cross fiscal years? Yes ☐ No ☒		Budget Available (Purchasing attach report): Yes ☒ No ☐ FY Budget: <u>2022</u> Enhancement: Yes ☐ No ☒ Construction ☐ Task Order ☐ Professional Service ☒ Equipment ☐ Grant ☐	
IV. GRANT INFORMATION - to be completed only on Grant funded projects			
Grant #: <u>N/A</u>	Wage Determination Received <u>N/A</u> Print and Attach the determination	Wage Verification 10 Days prior to bid due date <u>N/A</u> Print, attach and amend bid by addendum (if changed)	Debarment Status (Federal Funded) <u>N/A</u> www.sam.gov Print and attach
V. BASIS OF AWARD			
BID		RFP / RFQ	
Award based on Low Bid		Highest Ranked Vendor Selected	
(Bid Results Attached) Yes ☒ No ☐		(Ratings Attached) Yes ☐ No ☐	
Typical Award Yes ☐ No ☒		Master Agreement Category _____	
If no please state circumstances and conclusion: _____		Date MSA Roster Approved: _____	
Univar was not the lowest price, only vendor to pass and meet all requirements			
Date Award Posted: <u>9/10/2021</u> 7 day protest period ends: <u>September 17, 2021</u>			
VI. CONTRACTOR / CONSULTANT REQUIRED INFORMATION			
PW License <u>N/A</u>		Expiration Date: <u>N/A</u>	
Insurance Certificates Received (Date): _____		Corporation Status <u>Active -Existing</u>	
Payment and Performance Bonds Received (Date): _____		Expiration Date: <u>N/A</u> Rating: _____	
Builders Risk Ins. Req'd: Yes ☐ No ☒		Rating: _____	
(Only applicable for projects above \$1,000,000)		If yes, has policy been purchased? <u>N/A</u>	
VII. TASK ORDER SELECTION (Project Manager to Complete)			
Reason Consultant Selected ☐ 1 Performance on past projects			
<i>Check all that apply</i>			
☐ Quality of work ☐ On Budget ☐ On Time ☐ Accuracy of Construction Est			
☐ 2 Qualified Personnel ☐ 3 Availability of personnel ☐ 4 Local of personnel			
Description of negotiation process and fee evaluation:			
Enter Supervisor Name		Date Approved	
VIII. AWARD INFORMATION			
Date Submitted to Clerk for Agenda: <u>October 8, 2021</u>		Approval Date _____ By: _____ Council	
Purchase Order No.: _____		Date Issued: _____	
NTP Date: _____		WH5 submitted (Only for PW Construction Projects)	