

CONTRACT CHECKLIST

I. PROJECT INFORMATION			
Date:	8/18/2022	REQUESTING DEPARTMENT	PW
Project Name:	Janitorial Services FY2023-FY2027		
Project Manager:	Max Jensen	Contract Amount:	\$464,307.93
Contractor/Consultant/Design Engineer:	KBS, LLC		
Is this a change order?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
		Change Order No.	N/A
II. BUDGET INFORMATION (Project Manager to Complete)		III. Contract Type	
Fund:	Multi	Budget Available (Purchasing attach report):	
Department	Multi	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
GL Account		FY Budget:	2023
Project Number:	10150.A	Enhancement:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Will the project cross fiscal years?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
		Construction	<input type="checkbox"/>
		Task Order	<input type="checkbox"/>
		Professional Service	<input checked="" type="checkbox"/>
		Equipment	<input type="checkbox"/>
		Grant	<input type="checkbox"/>
IV. PROCUREMENT USE ONLY - GRANT INFORMATION (to be completed only on Grant funded projects)			
Grant #:	N/A	Wage Determination Received	N/A
		Wage Verification 10 Days prior to bid due date	N/A
		Debarment Status (Federal Funded)	N/A
		Print and Attach the determination	Print, attach and amend bid by addendum (if changed)
			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 <input type="checkbox"/> No <input type="checkbox"/>	(Ratings Attached)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Typical Award	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Master Agreement Category	
If no please state circumstances and conclusion:		Date MSA Roster Approved:	
Date Award Posted:	8/12/2022	7 day protest period ends:	August 19, 2022
VI. PROCUREMENT USE ONLY - CONTRACTOR / CONSULTANT REQUIRED INFORMATION			
PW License	N/A	Expiration Date:	N/A
		Corporation Status	Active - Existing
Insurance Certificates Received (Date):		Expiration Date:	
		Rating:	
Payment and Performance Bonds Received (Date):		Rating:	
Builders Risk Ins. Req'd:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, has policy been purchased?	N/A
<small>(Only applicabile for projects above \$1,000,000)</small>			
VII. TASK ORDER SELECTION (Project Manager to Complete)			
Reason Consultant Selected	<input type="checkbox"/> 1 Performance on past projects	<input type="checkbox"/> On Budget	
<i>Check all that apply</i>	<input type="checkbox"/> Quality of work	<input type="checkbox"/> Accuracy of Construction Est	
	<input type="checkbox"/> On Time		
	<input type="checkbox"/> 2 Qualified Personnel		
	<input type="checkbox"/> 3 Availability of personnel		
	<input type="checkbox"/> 4 Local of personnel		
Description of negotiation process and fee evaluation:			
		Enter Supervisor Name	Date Approved
VIII. PROCUREMENT USE ONLY - AWARD INFORMATION			
Date Submitted to Clerk for Agenda:	August 18, 2022	Approval Date	By:
Purchase Order No.:		Date Issued:	WH5 submitted
			<small>(Only for PW Construction Projects)</small>
NTP Date:			