



	Please indicate: Visa Purchase Purchase Order						
Elizabeth State of the State of	Single Purchase Blanket Purchase Change Order Amendment or current FY) (Ongoing purchases for current FY)						
DEPAR	тмент/division Public Works / Fleet Management NAME of Requestor Ken Rappuhn						
	s 2-403 of the City of North Port Procurement Code states that certain procurements shall not be subject to competitive ments in the judgment of the Procurement Official.						
Δ	Please describe all products and/or services to be procured under this exemption:						
e a Till	Two (2) replacement M315F Caterpillar wheeled excavators.						
В.	Vendor Information						
	Vendor Name: Ring Power Corporation Vendor Number: 4639						
	Address: 500 World Commerce Parkway St. Augustine, FL 32092						
	Contact: Mike Hamer Phone: 941-359-6000 Email: mike.hamer@ringpower.com						
	Willow Figure 1 and the second						
c.	Briefly explain why it is in the best interest of the City to exempt this procurement from competition: (If additional space is needed, please attached separate memo)						
	Competitive pricing has been achieved through the Florida Sheriff's Association Contract # FSA18-VEH16.0 Spec #45. There are no other available state contracts with competitive pricing. The City could formally bid for an excavator, but it is unlikely that a better cost is						

received.





D. Please select one of	the following:	
requesting department tabsheet/price-sheet, ve	must provide the following ndor submittal, entity app	cipality, county, or other governmental agency contract). The age documentation: copy of the solicitation and addendum, roval (either stated in the solicitation or letter from vendor) entation. Purchasing may request additional information if
Name of Entity:		Contract Number:
Start Date:	End Date:	
Is a fee required to utiliz	e this contract? (Yes	No If yes, how much? Vendor-Paid City-Paid
	la approval and contract *	nt must provide the following documentation: copy of the tab *Further price negotiations may be conducted with state-awarded
Number:	Name/C	Category:
Start Date:	End Date:	
	ion Bid: The requesting dep , agenda approval and cont	partment must provide the following documentation: copy of ract
Number: FSA18-VEH	16.0 Spec #45 Name/C	ategory: Excavators
Start Date: October	1, 2018 End Date: Sept	ember 30, 2019
		must provide the following documentation: copy of the ndor submittal, agenda approval and contract
Lead Entity:	Contrac	t Number:
Start Date:	End Date:	
Code Exemption* (Specif	y):	
*For list of exemptions, see	page 3	





Sec.	2.40	12	- Ev	omi	nti.	one
sec.	2-41	J3.	- EX	em	ULI	UIIS.

- (a) (2) Procurement contracts between the city and nonprofit organizations, other governments or other public entities.
 - (3) Procurement of:
 - a. Dues and memberships in trade and professional organizations.
 - b. Subscriptions for periodicals, books, maps or training videos.
 - c. Real property, real estate brokering, or appraising.
 - d. Abstract of titles for real property; title insurance.
 - e. Works of art for public display or artistic services.
 - f. Advertising.
 - g. Medical, dental and other medically related services performed by a health care professional.
 - h. Room or board for social service clients.
 - I. Room and board for employees on city business.
 - j. Funeral related services.
 - k. Water, sewer, electrical, cable television or other utility services.
 - I. Personnel, including but not limited to part-time or temporary services.
 - m. Academic program reviews or lectures by Individuals.
 - n. Auditing services and financial services.
 - o. Legal services.
 - p. Social services.
 - q. Lobbying services.
 - r. Goods, materials and equipment whose cost has been incorporated as part of a competitively bid project.

Other Exemption (not specified by code):
(If additional space is needed, please attach separate memo)

Vendor Tracking:	e manel av . As
Check if Vendor Documen	ts Current
YTD Dept Exp. (Inclusive):	\$
To be completed by Purchasing	4
YTD City Wide Exp. (Inclusive):	\$
YID City wide Exp. (inclusive).	





PURCHASE DETAILS

Please provide the amount of the purchase	for this p	product or	service:	\$ 413	3,180.00	
Please provide the estimated fiscal year expe	enditure i	for this pro	duct or serv	ice: \$		
Account # 322-5000-541.64-00	Account # 322-5000-541.64-00 Project # R19RVH		RVH	Subtotal \$ 413,180.00		
Account #	Project #				Subtotal \$	
Account # Account #		Project # Project #			Subtotal \$ Subtotal \$	
M315F Caterpillar Excavator (with bucket trade-li	n)	EA	1	201,540.00	\$201,540.00	
M315F Caterpillar Excavaor		EA	1	211,640.00	\$211,640.00	
	The Park				\$	
4000	10.00	7 1 1 1 1	He lesses	The state of the s	\$	
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					\$	
Shipping (FOB Destination)					\$	
			To	otal	\$413,180.00	
Requesting Department Director: Budget Administrator: Purchasing: Ginny Duyn Digitation Digitation	tally signe	ed by Ginny ,24 13:15:44	Duyn 1-05'00' D	rate: 1-23-1 ate: 1/25/	9	
Assistant City Manager (If applicable):			Da	ate:		

_Date: _____

City Manager (If applicable):

Commission Meeting Date (if applicable):_____