

## CITY OF NORTH PORT PROCUREMENT FORM COMPETITIVE EXEMPTIONS



	Please indicate: Visa Purchase   Purchase Order
(Fo	Single Purchase Blanket Purchase Change Order Amendment or current FY) (Ongoing purchases for current FY)
Section:	TMENT/DIVISION Public Works  NAME OF REQUESTOR Monica Bramble  s 2-403 of the City of North Port Procurement Code states that certain procurements shall not be subject to competition the judgment of the Procurement Official.
A.	Please describe all products and/or services to be procured under this exemption:  Rejuvenation of asphaltic concrete surface coarse roadways.
В.	Vendor Information         Vendor Name:       Pavement Technology Inc.       Vendor Number: 6044
	Address: 24144 Detroit Road, Westlake, OH 44145  Contact: Colin Durante Phone: 800-333-6309 Email: cdurante@pavetechinc.com
C.	(If additional space is needed, please attached separate memo)  The City of Punta Gorda competitively solicited bids for asphalt rejuvenation application in 2015
	and the successful bidder has kept their prices consistent, making this piggyback pricing advantageous.
D.	Please select one of the following:



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$\boxtimes$	Piggyback (Departments may utilize another municipality, county, or other governmental agency contract). The requesting department must provide the following documentation: copy of the solicitation and addendum, tabsheet/price-sheet, vendor submittal, entity approval (either stated in the solicitation or letter from vendor) agenda approval and contract as back-up documentation. Purchasing may request additional information if needed.					
	Name of Entity:	City of Punta Gorda	Contr	act Number: <u>F20141</u>	11/SVC-ASPHREJ/	<b>/1415</b>
	Start Date: <u>5-21-</u>	L5 End Da	te: <u>5-20-2</u>	1		
	Is a fee required t	o utilize this contract?	Yes <u>X</u> No	If yes, how much?_		
					Vendor-Paid	City-Paid
		ontract: The requesting do, agenda approval and co				
	Number:		Name/Catego	γ:		
	Start Date:	End Da	te:			
		ssociation Bid: The reque e sheet, agenda approval		nt must provide the f	ollowing docume	ntation: copy of
	Number:		Name/Catego	γ:		
	Start Date:	End Da	te:			
		The requesting departments of the sheet/price sheet, vend				f the solicitation
	Lead Entity:		Contract Num	ber:		
	Start Date:	End Da	te:			
	Code Exemption*	(Specify):				
	*For list of exe	nptions, see page 3				

Sec. 2-403. - Exemptions.



## CITY OF NORTH PORT PROCUREMENT FORM COMPETITIVE EXEMPTIONS



(a)	(2)	Procurement contracts between the city and nonprofit organizations, other governments or other				
(~)						
		public entities.				
	(3)	Procurement of:				
	a. l	Dues and memberships in trade and professional organizations.				
	<ul> <li>b. Subscriptions for periodicals, books, maps or training videos.</li> </ul>					

- 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 (If additional space is nee	specified by code):eded, please attach separate memo)	
	Vendor Tracking:	
	Check if Vendor Documents Current	
	YTD Dept Exp. (Inclusive): \$	
	To be completed by Purchasing:	
•	YTD City Wide Exp. (Inclusive): \$	

**PURCHASE DETAILS** 



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Please provide the amount of the purchase for this product or service:							
Please provide the estimated fiscal year expendit	ure for this prod	uct or servic	e: \$				
Account # 306-5000-541.46-10	Project # R19	RRH	Subtotal \$	300,000.00			
Account # Pro	oject #	Subtotal \$					
Account # Pro	oject#						
Account # Pro							
Description	Unit	Qty	Unit Price	Total			
Rejuvenant application	Square yards		\$0.81	\$ 278,938.08			
Contingency				\$ 21,061.92			
				\$ -			
				\$ -			
				\$ -			
				\$ -			
				\$ -			
				\$ -			
				\$ -			
				\$ -			
·	7.			\$ -			
				\$ -			
				\$ -			
				\$ -			
				\$ -			
Shipping (FOB Destination)				\$ -			
		To	otal	\$ 300,000.00			
Requesting Department Director: B. Bellin Date: 430/19							
Budget Administrator: Dua Heur	no		te: 5/4/	19			
	y signed by Ginny I 019.05.09 13:30:36		te:	(X)			
Finance Director (If applicable):Date:							
Assistant City Manager (If applicable):Date:							
City Manager (If applicable):Date:							
Commission Meeting Date (if applicable):							