

CITY OF NORTH PORT PROCUREMENT FORM COMPETITIVE EXEMPTIONS



Sin	ngle Purchase (For current FY)	Change Order	Amen	ndment			
Bla	anket Purchase (Ongoing purchases	for current FY)					
DEPAR	RTMENT/DIVISION_Fleet Manageme	ent- Utilities NAN	1E OF REQUESTOR	<u> Monica Bramble</u>			
Section	ns 2-403 of the City of North Port P	rocurement Code state	s that certain prod	curements shall not be subject	to		
competitive requirements in the judgment of the Procurement Official.							
A.	Please describe all products and/or services to be procured under this exemption: Purchase of a 2018 Vac-						
	Con body for the Utilities vac truck.						
В.	B. Vendor Information						
	Vendor Name: Southern Sewer E	quipment Sales					
	Address: 10575 General Dri	ve, Orlando, FL 32824					
	Contact: Jenny Mitchem	Phone: <u>800-782-</u> 4	1 134 Email: <u>Jenny</u>	@southernsewer.com			
	Will the Vendor accept Visa Card/E-Payables for this transaction: yes no						
	Is there an additional fee charged for credit card payments?						
	 If yes, complete and attach 	n the Visa Purchase Requ	uest Form, if applic	cable.			
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) 						
	Vendor quoted from the Florida Sheriffs Association & Florida Association of Counties Contract that was						
	competitively bid.						
Ple	Please provide the amount of the purchase for this product or service: \$ 342,345.94						
	Account #420-6063-536-64	00 P	roject #U18	BRVH			
	Account #	Pı	roject #				
	Please provide the estimated fiscal year expenditure for this product or service: \$\$342,345.94						
		в					
D.	Please select one of the following:						



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requesting depar	tment must provide the following	ng documentation: co	er governmental agency contract). The py of the solicitation and addendum, the solicitation or letter from vendor)
• •			may request additional information if
Name of Entity:_		_ Contract Number:	
Start Date:	End Date:		
Is a fee required	o utilize this contract?Yes	No If yes, how mu	uch?
			Vendor-PaidCity-Paid
	, agenda approval and contract [*]	•	llowing documentation: copy of the tab ons may be conducted with state-awarded
Number :		_Name/Category:	
Start Date:		_End Date:	
	e sheet, agenda approval and con 17-VEH15.0 Spec #50 Name/		sis Trucks and Other Fleet Equipment
Start Date: O	tober 13, 2017	End Date:	September 30, 2018
and addendum, to	b sheet/price sheet, vendor subm	nittal, agenda approval	
Lead Entity:	Contra	ict Number:	
Start Date:	End Date:		_
Code Exemption*	(Specify):		
*For list of exe	mptions, see page 3		

Sec. 2-403. - Exemptions.



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- (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 sp	pecified by code):					
						
1	ed, please attach separate memo)					
Requesting Department Director's Signature: Date: 10/3/1/						
Procurement Manager's Ap						
Finance Director's Approva	Date:					
City Manager's Approval (If	Date:					
Commission Meeting Date (if applicable):						
	Vendor Tracking:					
	YTD Dept Exp. (Inclusive): \$					
	To be completed by Purchasing:					
	YTD City Wide Exp. (Inclusive): \$					