

## Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

	SECTION 1:	DESCRIPTION			
General Tracking		Contract Terms			
FILE ID#: 24-1256	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$20,000.00		
COMMITTEE: TARGET COMMITTEE DATE: PUBLIC WORKS 05/07/2024		PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: \$20,000.00		
	CURRENT TERM TOTAL COST: \$20,000.00	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD: INITIAL TERM		
Vendor Information		Department Information			
VENDOR: Donnelly & Associates, Inc.	VENDOR #: 11341	DEPT: Facilities Management	DEPT CONTACT NAME: Mark Thomas		
VENDOR CONTACT: Joe Donnelly	VENDOR CONTACT PHONE: 847-902-7917	DEPT CONTACT PHONE #: 630-816-2979	DEPT CONTACT EMAIL: mark.thomas@dupagecounty.gov		
VENDOR CONTACT EMAIL: VENDOR WEBSITE: jpdpe@comcast.net		DEPT REQ #:			

## Overview

DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Recommendation of a contract to Donnelly & Associates, Inc., to provide professional on-call elevator consulting services, for the period May 7, 2024 through May 6, 2026, for an amount not to exceed \$20,000.00. Other Professional Service not subject to competitive bid per 55 ILCS 5/5-1022(c). Vendor selected pursuant to DuPage County Procurement Ordinance 2-353(1)(b). This is a highly technical elevator and escalator consulting service and not suitable for competitive bid. (Facilities Management)

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished

Professional consulting services are necessary to ensure code compliances are met for elevators and escalators, to provide required elevator safety education for building mechanics and security staff, to perform equipment assessments needed to create bid specifications for maintenance, repairs and upgrades and to prepare the Elevator Maintenance Agreement.

SECTION 2: DECISION MEMO REQUIREMENTS				
DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.			
DECISION MEMO REQUIRED OTHER PROFESSIONAL SERVICES (I	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.  DETAIL SELECTION PROCESS ON DECISION MEMO)			

	SECTION 3: DECISION MEMO
STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact.  QUALITY OF LIFE
SOURCE SELECTION	Describe method used to select source.  Three consulting firms were contacted to perform elevator consulting work on behalf of the County. Staff has reviewed the qualifications of these firms. Donnelly & Associates possesses the staff and resources with experience in elevator equipment to provide comprehensive equipment assessment. The consultant has provided similar consulting services for the County in the past.
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action).  1. Approve a contract to be issued to Donnelly & Associates, Inc., to provide professional elevator consulting services upon request.  2. Select another elevator consulting firm to provide the consulting services. However, staff has reviewed the qualifications of other firms in order to select the most qualified firm to provide the consulting work for the County. Donnelly & Associates Inc. has successfully provided these services for the County in the past and has the qualified staff and resources to provide the consulting services required.

	SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION
JUSTIFICATION	Select an item from the following dropdown menu to justify why this is a sole source procurement.
NECESSITY AND UNIQUE FEATURES	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
MARKET TESTING	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
AVAILABILITY	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

Send Pu	ırchase Order To:	Send Invoices To:				
Vendor: Vendor#: Donnelly & Associates, Inc. 11341		Dept: Facilities Management	Division:			
Attn: Joe Donnelly	Email: jpdpe@comcast.net	Attn:	Email: FMAccountsPayable @dupagecounty.gov			
Address: 920 Burnham Court	City: Glenview	Address: 421 N. County Farm Road	City: Wheaton			
State: IL	Zip: 60025	State:	Zip: 60187			
Phone: 847-902-7917	Fax:	Phone: 630-407-5700	Fax: 630-407-5701			
Send Payments To:		Ship to:				
Vendor: Donnelly & Associates, Inc.	Vendor#: 11341	Dept: Facilities Management	Division:			
Attn:	Email:	Attn: Mark Thomas	Email: mark.thomas@dupagecounty.gov			
Address: 920 Burnham Court	City: Glenview	Address: Various	City: Wheaton			
State:	Zip: 60025	State:	Zip: 60187			
Phone: 847-902-7917	Fax:	Phone: 630-816-2979	Fax:			
Shipping		Contract Dates				
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25):  May 7, 2024  Contract End Date (PO25):  May 6, 2026				

	Purchase Requisition Line Details										
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	LO		Other Professional Services	FY24	1000	1100	53090		15,360.00	15,360.00
2	1	LO		Other Professional Services	FY25	1000	1100	53090		3,000.00	3,000.00
3	1	LO		Other Professional Services	FY26	1000	1100	53090		1,640.00	1,640.00
FY is required, assure the correct FY is selected. Requisition Total					\$ 20,000.00						

Comments				
HEADER COMMENTS	Provide comments for P020 and P025.  Other Professional Services for Elevators and Escalators			
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.			
	Send PO to Cathie Figlewski, Clara Gomez, & Katie Boffa			
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.  PW: 5/7/24			
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.			

The following documents have been attached:	W-9	✓ Vendor Ethics Disclosure Statement