



Procurement Review Comprehensive Checklist  
 Procurement Services Division  
 This form must accompany all Purchase Order Requisitions

**SECTION 1: DESCRIPTION**

<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#: 24-1993	RFP, BID, QUOTE OR RENEWAL #: 23-053-FM	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$128,262.56
COMMITTEE: PUBLIC WORKS	TARGET COMMITTEE DATE: 08/06/2024	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$542,562.56
	CURRENT TERM TOTAL COST: \$138,100.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: FIRST RENEWAL
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Air Filter Solutions LLC	VENDOR #: 41943	DEPT: Facilities Management	DEPT CONTACT NAME: Mary Ventrella
VENDOR CONTACT: Mel Reeves	VENDOR CONTACT PHONE: 630-470-28888	DEPT CONTACT PHONE #: 630-407-5705	DEPT CONTACT EMAIL: mary.ventrella@dupagecounty.gov
VENDOR CONTACT EMAIL: melr@afsolutionsco.com	VENDOR WEBSITE:	DEPT REQ #:	
<i>Overview</i>			
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 for the approval of a contract to Air Filter Solutions LLC, to furnish and deliver air filters, as needed, for County facilities, for Facilities Management, for the period September 27, 2024 through September 26, 2025, for a total contract amount not to exceed \$138,100 per renewal option under bid award #23-053-FM. (\$130,000 for Facilities Management, \$4,000 for Animal Services, \$1,100 for the Division of Transportation, and \$3,000 for Health Department). First of three options to renew.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Air filters are necessary for the proper operation of the campus HVAC system and to properly maintain air quality throughout the County facilities.			

**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.
RENEWAL	
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

**SECTION 3: DECISION MEMO**

SOURCE SELECTION	Describe method used to select source.
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).

## SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

<b>JUSTIFICATION</b>	Select an item from the following dropdown menu to justify why this is a sole source procurement.
<b>NECESSITY AND UNIQUE FEATURES</b>	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.
<b>MARKET TESTING</b>	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.
<b>AVAILABILITY</b>	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.

## SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Air Filter Solutions LLC	Vendor#: 41943	Dept: Facilities Management	Division:
Attn: Kurt Bolin / Mel Reeves	Email: kurt@afsolutionsco.com / melr@afsolutionsco.com	Attn:	Email: FMAccountsPayable @dupagecounty.gov
Address: 519 Senon Drive	City: Lemont	Address: 421 N. County Farm Road	City: Wheaton
State: IL	Zip: 60439	State: IL	Zip: 60187
Phone: 773-410-8723 / 630-470-2888	Fax:	Phone: 630-407-5700	Fax: 630-407-5701
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Air Filter Solutions LLC	Vendor#: 41943	Dept: Facilities Management	Division:
Attn:	Email:	Attn:	Email:
Address: 519 Senon Drive	City: Lemont	Address: various locations	City: Wheaton
State: IL	Zip: 60439	State: IL	Zip: 60187
Phone:	Fax:	Phone:	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Sep 27, 2024	Contract End Date (PO25): Sep 26, 2025

**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		Facilities Management	FY24	1000	1100	52270		10,000.00	10,000.00
2	1	LO		Animal Services	FY24	1100	1300	52270		400.00	400.00
3	1	LO		Division of Transportation	FY24	1500	3510	52270		550.00	550.00
4	1	LO		Health Department	FY24	3000	2208	52270		1,500.00	1,500.00
5	1	LO		Facilities Management	FY25	1000	1100	52270		120,000.00	120,000.00
6	1	EA		Animal Services	FY25	1100	1300	52270		3,600.00	3,600.00
7	1	EA		Division of Transportation	FY25	1500	3510	52270		550.00	550.00
8	1	EA		Health Department	FY25	3000	2208	52270		1,500.00	1,500.00
<b><i>FY is required, ensure the correct FY is selected.</i></b>										Requisition Total	\$ 138,100.00

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025. Furnish and deliver air filters, as needed, for County facilities.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Send PO to Mary Ventrella, Cathie Figlewski, Clara Gomez. Kathy Black Curcio, Kristie Lecaros, & Andrea Gargani
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. Public Works Committee: 08/06/24 County Board: 08/13/24
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.