



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

<b>SECTION 1: DESCRIPTION</b>			
<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #: Sole Source	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$15,000.00
COMMITTEE: TRANSPORTATION	TARGET COMMITTEE DATE: 05/21/2024	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$15,000.00
	CURRENT TERM TOTAL COST: \$15,000.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Altec, Inc	VENDOR #: 26527	DEPT: Division of Transportation	DEPT CONTACT NAME: Roula Eikosidekas
VENDOR CONTACT: Thomas Browne	VENDOR CONTACT PHONE: 815-531-9172	DEPT CONTACT PHONE #: 630-407-6920	DEPT CONTACT EMAIL: roula.eikosidekas@dupagecounty.gov
VENDOR CONTACT EMAIL: thomas.browne@altec.com	VENDOR WEBSITE:	DEPT REQ #: 24-1500-41	
<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.).  DOT Fleet is requesting a purchase order to Altec Inc., to furnish and deliver replacement OEM parts and service on as-needed basis. Effective June 1, 2024 through May 31, 2025, for a contract total not to exceed \$15,000.00, per 55 ILCS 5/5-1022 (c) not suitable for competitive bids (direct replacement of compatible equipment parts).  <ul style="list-style-type: none"> <li>• Hourly rate for labor and travel for mobile service in Northern IL is: \$179.</li> <li>• Hourly rate for labor at Grayslake, IL is: \$170.</li> <li>• Parts are priced at 0% off list.</li> </ul>			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished  TO provide Altec OEM replacement parts and repair services for our County Vehicles.			

<b>SECTION 2: DECISION MEMO REQUIREMENTS</b>	
DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. SOLE SOURCE PER DUPAGE ORDINANCE, SECTION 2-350 (MUST FILL OUT SECTION 4)
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

<b>SECTION 3: DECISION MEMO</b>	
STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact.
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. SOLE AUTHORIZED DISTRIBUTOR WHERE THE MANUFACTURER HAS ESTABLISHED TERRITORIES
<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.  Original equipment manufacturer (OEM) repairs, parts, inspection, maintenance and repair services for the Division of Transportation.
<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.  Yes
<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.  Attached is a letter confirming that Altec Industries Inc., is the sole authorized Altec distributor.

### SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Altec, Inc.	Vendor#: 26527	Dept: Division of Transportation	Division: Accounts Payable
Attn: Thomas Browne	Email: thomas.browne@altec.com	Attn: Kathy Curcio	Email: DOTFinance@dupagecounty.gov
Address: 210 Inverness Center Drive	City: Birmingham	Address: 421 N. County Farm Road	City: Wheaton
State: AL	Zip: 35242	State: IL	Zip: 60187
Phone: 815-531-9172	Fax:	Phone: 630-407-6892	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Altec, Inc.	Vendor#: 26527	Dept: Division of Transportation	Division: Fleet
Attn:	Email:	Attn: William Bell	Email: william.bell@dupagecounty.gov
Address: same as above	City:	Address: 180 N. County Farm Road	City: Wheaton
State:	Zip:	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-407-6931	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jun 1, 2024	Contract End Date (PO25): May 31, 2025
Contract Administrator (PO25): Roula Eikosidekas			

**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	EA		Replacement Parts	FY24	1500	3520	52250		5,000.00	5,000.00
2	1	EA		Service Repairs	FY25	1500	3520	53380		2,500.00	2,500.00
3	1	EA		Replacement Parts	FY24	1500	3520	52250		5,000.00	5,000.00
4	1	EA		Service Repairs	FY25	1500	3520	53380		2,500.00	2,500.00
<b><i>FY is required, assure the correct FY is selected.</i></b>										Requisition Total	\$ 15,000.00

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025.  To furnish and deliver replacement OEM parts and service repairs on as-needed basis for the DOT Fleet - sole source.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.  Email Approved PO to: Thomas Browne, William Bell and Mike Figuray.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.  see above.
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