

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #: Quote #23-076-DOT-RE	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$15,000.00		
COMMITTEE: TRANSPORTATION	TARGET COMMITTEE DATE: 10/17/2023	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$60,000.00		
	CURRENT TERM TOTAL COST: \$15,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: INITIAL TERM		
Vendor Information		Department Information			
VENDOR: Sicalco	VENDOR #: 32490	DEPT: Division of Transportation	DEPT CONTACT NAME: Roula Eikosidekas		
VENDOR CONTACT: Frank Sibr	VENDOR CONTACT PHONE: 630-371-2655	DEPT CONTACT PHONE #: 630-407-6920	DEPT CONTACT EMAIL: roula.eikosidekas@dupageco.org		
VENDOR CONTACT EMAIL: fsibr@sicalco.net	VENDOR WEBSITE:	DEPT REQ #: 23-1500-76			

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.).

DOT is requesting a purchase order to Sicalco LTD, to furnish and deliver liquid calcium chloride on as-needed basis. Effective October 18, 2023 through October 17, 2024, for a contract total not to exceed \$15,000.00, per low quote #23-076-DOT, this contract is subject to three one-year renewals upon mutual agreement.

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

To provide a liquid deicer that will work well in extremely low/freezing temperatures.

SECTION 2: DECISION MEMO REQUIREMENTS				
DECISION MEMO NOT REQUIRED LOWEST RESPONSIBLE QUOTE/BID	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. (QUOTE $< $25,000$, BID $\ge $25,000$; ATTACH TABULATION)			
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				
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
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 Pur	chase Order To:	Send Invoices To:				
Vendor:	Vendor#:	Dept:	Division: Accounts Payable			
Sicalco, LTD.	TD. 32490 Division of Transportation					
Attn:	Email:	Attn:	Email:			
Frank Sibr	fsibr@sicalco.net	Kathy Curcio	DOTFinance@dupageco.org			
Address:	City:	Address:	City:			
522 Chestnut Street, Suite GB	Hinsdale	421 N. County Farm Road	Wheaton			
State:	Zip:	State:	Zip:			
IL	60521	IL	60187			
Phone:	Fax:	Phone:	Fax:			
630-371-2655		630-407-6892				
Send Payments To:		Ship to:				
Vendor:	Vendor#:	Dept:	Division:			
Sicalco, LTD.	32490	Division of Transportation	Highway Maintenance			
Attn:	Email:	Attn:	Email:			
		David Koehler	david.koehler@dupageco.org			
Address:	City:	Address:	City:			
522 Chestnut Street, Suite GB	Hinsdale	140 N. County Farm Road	Wheaton			
State:	Zip:	State:	Zip:			
IL	60521	IL	60187			
Phone:	Fax:	Phone:	Fax:			
		630-407-6926				
Shipping		Contract Dates				
Payment Terms:	FOB:	Contract Start Date (PO25): Contract End Date (P				
PER 50 ILCS 505/1	Destination	Oct 18, 2023	Oct 17, 2024			

	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		Liquid Calcium Chloride	FY23	1500	3510	52270		7,500.00	7,500.00
2	1	EA		Liquid Calcium Chloride	FY24	1500	3510	52270		7,500.00	7,500.00
FY is required, assure the correct FY is selected. Requisition Total					\$ 15,000.00						

	Comments				
HEADER COMMENTS	Provide comments for P020 and P025. To furnish and deliver liquid calcium chloride for the DOT.				
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Email Approved PO to Frank Sibr, David Koehler 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: \checkmark W-9 \checkmark Vendor Ethics Disclosure Statement