

Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$96,286.00		
COMMITTEE: TARGET COMMITTEE DATE: ETSB 12/11/2024		PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$96,286.00		
	CURRENT TERM TOTAL COST: \$96,286.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM		
Vendor Information		Department Information			
VENDOR: Alliant Insurance Services, Inc.	VENDOR #: 12104 R02	DEPT: DuPage ETSB	DEPT CONTACT NAME: Eve Kraus		
VENDOR CONTACT:VENDOR CONTACT PHONE:Wendy Teller312-595-7495		DEPT CONTACT PHONE #: 630-550-7743	DEPT CONTACT EMAIL: etsb911@dupagecounty.gov		
VENDOR CONTACT EMAIL: wendy.teller@alliant.com	VENDOR WEBSITE: alliant.com	DEPT REQ #: 924039			

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.). Request for approval of PO 924039 to Alliant Insurance Services, Inc. for insurance services for one (1) year. The contract period runs from December 19, 2024 through December 19, 2025. The recommended renewal option of the VFIS policy is \$75,762.00. The renewal policy for cyber liability is \$20,524.00. The total recommended contract value is \$96,286.00.

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

This is for insurance coverage for ETSB for liability, damage, and cyber security attacks made to 9-1-1 infrastructure.

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 (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					
SOURCE SELECTION	Describe method used to select source. Alliant Insurance Services continues as the insurance broker for the County and ETSB and has made recommendations based on the current state of the market. See the Executive Summary on page 2 of the Alliant proposal for details.				
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 Purchase Order 924039 and allow for the policies through Alliant for property and cyber liability coverage. 2. Allow the current policy to expire as of December 19 and provide no coverage.				

	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. N/A
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.

SECTION 5: Purchase Requisition Information						
Send Pure	chase Order To:	Send Invoices To:				
Vendor: Alliant Insurance Services, Inc.	Verlagin.					
Attn: Wendy Teller	Email: wendy.teller@alliant.com	Attn: 9-1-1 Coordinator	Email: etsb911@dupagecounty.gov			
Address: 353 N. Clark St.	City: Chicago	Address: 421 N. County Farm Road	City: Wheaton			
State: IL	Zip: 60654	State: Zip: IL 60187				
Phone:	Fax:	Phone: 630-550-7743	Fax:			
Send Payments To:		Ship to:				
Vendor: Alliant Insurance Services, Inc.	Vendor#: 12104 R02	Dept: DuPage ETSB	Division:			
Attn: Wendy Teller	Email: wendy.teller@alliant.com	Attn: Email: 9-1-1 Coordinator etsb911@dupagecount				
Address: 29278 Network Place	City: Chicago	Address: City: 421 N. County Farm Road Wheaton				
State:	Zip: 60673-1292	State: Zip: IL 60187				
Phone:	Fax:	Phone:	Fax:			
l Shipping		Contract Dates				
Payment Terms: PER 50 ILCS 505/1						

Purchase Requisition Line Details											
LN	Qty	UOM	Item Detai l (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Property Insurance for ETSB	FY25	4000	5820	53130		75,762.00	75,762.00
2	1	EA		Cyber Liability Insurance	FY25	4000	5820	53130		20,524.00	20,524.00
FY is required, ensure the correct FY is selected. Requisition Total \$					\$ 96,286.00						

	Comments			
HEADER COMMENTS	Provide comments for P020 and P025.			
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Please return the PO to ETSB to send to the vendor.			
NTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.			
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB. LMZ 11/13/24			