



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#:	RFP, BID, QUOTE OR RENEWAL #: #23-099-FM	INITIAL TERM WITH RENEWALS: 2 YRS + 1 X 2 YR TERM PERIOD	INITIAL TERM TOTAL COST: \$138,832.00
COMMITTEE: ETSB	TARGET COMMITTEE DATE: 09/10/2025	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$277,664.00
	CURRENT TERM TOTAL COST: \$138,832.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: FIRST RENEWAL
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: GenServe LLC	VENDOR #: 10193	DEPT: DuPage ETSB	DEPT CONTACT NAME: Eve Kraus
VENDOR CONTACT: Chris Rizzo	VENDOR CONTACT PHONE: 630-462-7770	DEPT CONTACT PHONE #: 630-550-7743	DEPT CONTACT EMAIL: etsb911@dupagecounty.gov
VENDOR CONTACT EMAIL: chrir@genserveinc.com	VENDOR WEBSITE:	DEPT REQ #: 925028	
<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 GenServe LLC, for semi-annual inspection, preventative maintenance, and emergency call out service for campus backup emergency generators, for the two-year period November 1, 2025 through October 31, 2027, for a contract total amount not to exceed \$138,832.00 per bid award #23-099-FM. (ETSB amount: \$16,000)			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished This is a joint contract through Facilities Management to provide semi-annual inspections, routine preventative maintenance, and emergency call-out services which is necessary to keep the twenty (20) backup emergency generators for FM, Animal Services, DOT, and ETSB in reliable working condition in the event of a power outage. ETSB covers the cost of three generators for DU-COMM and the radio infrastructure within the shelters.			

SECTION 2: DECISION MEMO REQUIREMENTS	
DECISION MEMO NOT REQUIRED RENEWAL	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.
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. Per bid award #23-099-FM.
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.

SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: GenServe LLC	Vendor#: 10193	Dept: DuPage ETSB	Division:
Attn: Chris Rizzo	Email: chrisr@genserveinc.com	Attn: 9-1-1 System Manager	Email: etsb911@dupagecounty.gov
Address: 444 Randy Road	City: Carol Stream	Address: 421 N. County Farm Road	City: Wheaton
State: IL	Zip: 60188	State: IL	Zip: 60188
Phone: 630-462-7770	Fax:	Phone: 630-550-7743	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: GenServe LLC	Vendor#: 10193	Dept: DuPage ETSB	Division:
Attn:	Email:	Attn: 9-1-1 System Manager	Email:
Address: PO Box 23974	City: New York	Address: Various	City:
State: NY	Zip: 10087-3974	State:	Zip:
Phone:	Fax:	Phone:	Fax:
<i>Shipping</i>		<i>Contract Dates</i>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Nov 1, 2025	Contract End Date (PO25): Oct 31, 2027

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		Semi-annual inspections, PM and Emergency call out service for emergency generators FY25	FY25	4000	5820	53300		1,500.00	1,500.00
2	1	EA		Semi-annual inspections, PM and Emergency call out service for emergency generators FY26	FY26	4000	5820	53300		9,000.00	9,000.00
3	1	EA		Semi-annual inspections, PM and Emergency call out service for emergency generators FY27	FY27	4000	5820	53300		5,500.00	5,500.00

FY is required, ensure the correct FY is selected.

Requisition Total \$ 16,000.00

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.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. Pending Parent Committee Approval PW 9/16/25 and CB 9/23/25
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB. LMZ 9/2/25