



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

### SECTION 1: DESCRIPTION

| General Tracking                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                          | Contract Terms                            |                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------|-----------------------------------------------------|
| FILE ID#: SM-P-0023-25                                                                                                                                                                                                                                                                                                                                                                                                                                                            | RFP, BID, QUOTE OR RENEWAL #: 25-115-SWM | INITIAL TERM WITH RENEWALS: OTHER         | INITIAL TERM TOTAL COST: \$181,889.00               |
| COMMITTEE: STORMWATER                                                                                                                                                                                                                                                                                                                                                                                                                                                             | TARGET COMMITTEE DATE: 11/04/2025        | PROMPT FOR RENEWAL:                       | CONTRACT TOTAL COST WITH ALL RENEWALS: \$647,292.00 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | CURRENT TERM TOTAL COST: \$181,889.00    | MAX LENGTH WITH ALL RENEWALS: THREE YEARS | CURRENT TERM PERIOD: INITIAL TERM                   |
| Vendor Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          | Department Information                    |                                                     |
| VENDOR: Water Well Solutions                                                                                                                                                                                                                                                                                                                                                                                                                                                      | VENDOR #: 12848                          | DEPT: Stormwater Management               | DEPT CONTACT NAME: Jamie Lock                       |
| VENDOR CONTACT: Todd Kerry                                                                                                                                                                                                                                                                                                                                                                                                                                                        | VENDOR CONTACT PHONE: 630-201-0749       | DEPT CONTACT PHONE #: 630-407-6705        | DEPT CONTACT EMAIL: jamie.lock@dupagecounty.gov     |
| VENDOR CONTACT EMAIL: todd.kerry@wwsbg.com                                                                                                                                                                                                                                                                                                                                                                                                                                        | VENDOR WEBSITE:                          | DEPT REQ #: 1600-2523                     |                                                     |
| 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.). \$181,889 - The Wood Dale Itasca Reservoir is a flood control facility that contains 3 groundwater wells that periodically need to be inspected and cleaned. The wells also contain existing pumps that need to be pulled, inspected and repaired if necessary. A low bid contractor has been selected to perform this work. |                                          |                                           |                                                     |
| JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished<br>Bid #25-115-SWM                                                                                                                                                                                                                                                                                                                                                             |                                          |                                           |                                                     |

### 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.  
LOWEST RESPONSIBLE QUOTE/BID (QUOTE < \$25,000, BID ≥ \$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

|                                     |                                                                                                                                                                      |
|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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:<br>Water Well Solutions     | Vendor#:<br>12848              | Dept:<br>Stormwater Management             | Division:                                 |
| Attn:<br>Todd Kerry                 | Email:<br>todd.kerry@wwssg.com | Attn:<br>Jamie Lock                        | Email:<br>jamie.lock@dupagecounty.gov     |
| Address:<br>825 E. North St         | City:<br>Elburn                | Address:<br>421 N. County Farm Road        | City:<br>Wheaton                          |
| State:<br>IL                        | Zip:<br>60119                  | State:<br>IL                               | Zip:<br>60187                             |
| Phone:<br>630-201-0749              | Fax:                           | Phone:<br>630-407-6705                     | Fax:                                      |
| <i>Send Payments To:</i>            |                                | <i>Ship to:</i>                            |                                           |
| Vendor:<br>same                     | Vendor#:                       | Dept:<br>same                              | Division:                                 |
| Attn:                               | Email:                         | Attn:                                      | Email:                                    |
| Address:                            | City:                          | Address:                                   | City:                                     |
| State:                              | Zip:                           | State:                                     | Zip:                                      |
| Phone:                              | Fax:                           | Phone:                                     | Fax:                                      |
| Shipping                            |                                | Contract Dates                             |                                           |
| Payment Terms:<br>PER 50 ILCS 505/1 | FOB:<br>Destination            | Contract Start Date (PO25):<br>Dec 1, 2025 | Contract End Date (PO25):<br>Nov 30, 2026 |

| Purchase Requisition Line Details                         |     |     |                            |                                                                       |      |         |      |           |                             |                   |               |
|-----------------------------------------------------------|-----|-----|----------------------------|-----------------------------------------------------------------------|------|---------|------|-----------|-----------------------------|-------------------|---------------|
| LN                                                        | Qty | UOM | Item Detail<br>(Product #) | Description                                                           | FY   | Company | AU   | Acct Code | Sub-Accts/<br>Activity Code | Unit Price        | Extension     |
| 1                                                         | 1   | EA  |                            | On Call Crane Services per lowest responsible bidder (Bid 22-069-SWM) | FY26 | 1600    | 3000 | 53090     |                             | 181,889.00        | 181,889.00    |
| <b>FY is required, ensure the correct FY is selected.</b> |     |     |                            |                                                                       |      |         |      |           |                             | Requisition Total | \$ 181,889.00 |

| 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.      |
| APPROVALS            | Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB. |