



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#: 24-1603	RFP, BID, QUOTE OR RENEWAL #: 24-056-FM	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$94,553.00
COMMITTEE: PUBLIC WORKS	TARGET COMMITTEE DATE: 06/04/2024	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: \$94,553.00
	CURRENT TERM TOTAL COST: \$94,553.00	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Excel Electric, Inc.	VENDOR #: 30775	DEPT: Facilities Management	DEPT CONTACT NAME: Geoff Matteson
VENDOR CONTACT: Bart Frankowicz	VENDOR CONTACT PHONE: 815-634-6802	DEPT CONTACT PHONE #: x5681	DEPT CONTACT EMAIL: geoffrey.matteson@dupagecounty.gov
VENDOR CONTACT EMAIL: bart@excelel.com	VENDOR WEBSITE:	DEPT REQ #:	
<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 Excel Electric, Inc., to install a medium voltage B-Feeder extension on the West campus, for Facilities Management, for the period June 11, 2024 through November 30, 2024, for a contract total amount not to exceed \$94,553.00, per lowest responsible bid #24-056-FM.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished The 120 building is currently fed with one single ComEd feed. The B-feeder is needed to provide a back up secondary ComEd option in the event of an electrical outage.			

**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: Excel Electric, Inc.	Vendor#: 30775	Dept: Facilities Management	Division:
Attn: Bart Frankowicz	Email: bart@excelel.com	Attn:	Email: FMAccountsPayable@dupagecounty.gov
Address: 24 W. Sangmeister Rd.	City: Frankfort	Address: 421 N. County Farm Road	City: Wheaton
State: IL	Zip: 60423	State: IL	Zip: 60187
Phone: 815-634-6802	Fax: 815-464-5552	Phone: 630-407-5700	Fax: 630-407-5701
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Excel Electric, Inc.	Vendor#: 30775	Dept: Facilities Management	Division:
Attn: Cherie Gabbert	Email: cherie@excelel.com	Attn: Geoff Matteson	Email: geoffrey.matteson@dupagecounty.gov
Address: 24 W. Sangmeister Rd.	City: Frankfort	Address: 120 N. County Farm Rd.	City: Wheaton
State: IL	Zip: 60423	State: IL	Zip: 60187
Phone: 815-634-6801	Fax: 815-464-5552	Phone: 630-407-5681	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jun 11, 2024	Contract End Date (PO25): Nov 30, 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	LO		B-Feeder Extension	FY24	6000	1220	54010	2306218	82,220.00	82,220.00
2	1	LO		Contingency	FY24	6000	1220	54010	2306218	12,333.00	12,333.00
<b><i>FY is required, ensure the correct FY is selected.</i></b>										Requisition Total	\$ 94,553.00

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025. West Campus B-feeder Extension
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Send PO to Cathie Figlewski, Clara Gomez & Katie Boffa
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. PW: 6/4/24 CB: 6/11/24
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.