

Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION						
General Tracking		Contract Terms				
FILE ID#: DC-P-0002-24	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$50,000.00			
COMMITTEE: DEVELOPMENT	TARGET COMMITTEE DATE: 08/06/2024	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: \$50,000.00			
	CURRENT TERM TOTAL COST: \$50,000.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM			
Vendor Information		Department Information				
VENDOR: VENDOR #: Village of Roselle		DEPT: Building & Zoning Department	DEPT CONTACT NAME: Paul Hoss			
VENDOR CONTACT: Elizabeth Sheffer	VENDOR CONTACT PHONE: 630-671-2801	DEPT CONTACT PHONE #: 630-407-6700	DEPT CONTACT EMAIL: Paul.Hoss@dupagecounty.gov			
VENDOR CONTACT EMAIL: esheffer@roselle.il.us	VENDOR WEBSITE: https://www.roselle.il.us/	DEPT REQ #:	1			

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.). This Intergovernmental Agreement is with the Village of Roselle for the reimbursement of costs by the Village of the abatement of asbestos at 233 E. Maple Avenue, Roselle, DuPage County, Illinois. The total cost of this abatement shall not exceed \$50,000.

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

The removal of asbestos will allow for the Village of Roselle to encourage development of Senior Affordable Housing. This is an initiative sought out by the County Board to increase the stock of affordable housing within the County.

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.					
IGA (INTERGOVERNMENTAL AGRE	EMENT)				
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
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.

C	d Purchase Order To:		–				
	u Purcnase Order I o:	Send	Send Invoices To:				
Vendor:	Vendor#:	Dept:	Division:				
Village of Roselle		Building & Zoning	Zoning				
Attn:	Email:	Attn:	Email:				
Elizabeth Sheffer	esheffer@roselle.il.us	Paul Hoss	Paul. Hoss@dupagecounty.gov				
Address:	City:	Address:	City:				
31 S. Prospect St	Roselle	421 N County Farm Road	Wheaton				
State:	Zip:	State:	Zip:				
IL	60172	IL	60187				
Phone: Fax:		Phone:	Fax:				
630-671-2801		630-407-6700					
Send Payments To:		Ship to:					
Vendor: Vendor#:		Dept:	Division:				
Village of Roselle		Building & Zoning	Zoning				
Attn:	Email:	Attn:	Email:				
Elizabeth Sheffer	esheffer@roselle.il.us	Paul Hoss	Paul. Hoss@dupagecounty.gov				
Address:	City:	Address:	City:				
31 S. Prospect St	Roselle	421 N County Farm Road	Wheaton				
State:	Zip:	State:	Zip:				
IL	60172	IL	60187				
Phone:	Fax:	Phone:	Fax:				
630-671-2801		630-407-6700					
Shipping		Contract Dates					
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):				
ER 50 ILCS 505/1 Destination		Aug 13, 2024	Aug 13, 2025				

					Purcha	se Requisi	ition Lir	e Details			
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Abatement of Asbestos	FY24	1100				50,000.00	50,000.00
FY is	require	d, ensure	the correct FY i	is selected.						Requisition Total	\$ 50,000.00

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