

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #: 22-065-CS	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$67,367.00 CONTRACT TOTAL COST WITH ALL RENEWALS: \$440,101.00		
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 07/01/2025	PROMPT FOR RENEWAL: 6 MONTHS			
	CURRENT TERM TOTAL COST: \$238,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: THIRD RENEWAL		
Vendor Information		Department Information			
VENDOR: CHICAGO UNITED INDUSTRIES, LTD.	VENDOR #: 32599	DEPT: COMMUNITY SERVICES	DEPT CONTACT NAME: GINA STRAFFORD-AHMED		
VENDOR CONTACT: VENDOR CONTACT PHONE: GABRIELA JAIME 312-786-1471		DEPT CONTACT PHONE #: 630-407-6444	DEPT CONTACT EMAIL: GINA.STRAFFORD@DUPAGECOUNT Y.GOV		
VENDOR CONTACT EMAIL: GJAIME@CUILTD.COM	VENDOR WEBSITE:	DEPT REQ #:			

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.). Furnish, deliver, and install Energy Star rated appliances with proper disposal for the grant funded Weatherization program.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Weatherization program provides energy efficiency upgrades to eligible low-income households.

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 RENEWAL OF RFP	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. RFP #22-065-CS				
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). Approve the change order increase as requested. Do not approve the change order and reduce the ability to assist clients in need. Award the funding to a different vendor without the same qualifications				

	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						
Send Purcho	ase Order To:	Send Invoices To:				
Vendor: CHICAGO UNITED INDUSTRIES, LTD	Vendor#: Dept: STRIES, LTD 32599 COMMUNITY SERVICES		Division: INTAKE & REFERRAL			
Attn: GABRIELA JAIME	Email: GJAIME@CUILTD.COM	Attn: GINA STRAFFORD-AHMED	Email: GINA.STRAFFORD@DUPAGECOUNT Y.GOV			
Address: 505 N LAKE SHORE DRIVE, SUITE 205	City: CHICAGO	Address: 421 N COUNTY FARM ROAD	City: WHEATON			
State: IL	Zip: 60611	State:	Zip: 60187			
Phone: 312-786-1471	Fax:	Phone: 630-407-6444	Fax:			
Send Pay	ments To:	Ship to:				
Vendor: SAA	Vendor#:	Dept: SAA	Division:			
Attn:	Email:	Attn:	Email:			
Address:	City:	Address:	City:			
State:	Zip:	State:	Zip:			
Phone: Fax: Shipping		Phone:	Fax:			
		Contract Dates				
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):			
PER 50 ILCS 505/1	Destination	Jul 1, 2025	Sep 30, 2026			

	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		APPLIANCES		5000	1430	53090	25-221028	149,000.00	149,000.00
2	1	EA		APPLIANCES		5000	1490	53090	26-251028	89,000.00	89,000.00
FY is required, ensure the correct FY is selected. Requisition Total					\$ 238,000.00						

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.			