

Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$25,000.00 CONTRACT TOTAL COST WITH ALL RENEWALS: \$25,000.00		
COMMITTEE: PUBLIC WORKS	TARGET COMMITTEE DATE: 08/20/2024	PROMPT FOR RENEWAL: 3 MONTHS			
	CURRENT TERM TOTAL COST: \$25,000.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM		
Vendor Information		Department Information			
VENDOR: VENDOR #: Dorner Company		DEPT: Public Works	DEPT CONTACT NAME: John Adams		
VENDOR CONTACT: Jim Ozimek	VENDOR CONTACT PHONE: 219-406-5022	DEPT CONTACT PHONE #: 630-985-7400	DEPT CONTACT EMAIL: jonathan.adams@dupagecounty.go v		
VENDOR CONTACT EMAIL: JOzimek@dornerco.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.). The current 10" Cla-Val Valve is discontinued and beyond life and requires replacement. Approval is being requested for new 10" valve from sole source to replace the old valve within the distribution system. The new 10" Cla-Val valve is of like-kind for other similar valves in other water systems.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Current valve is 20-30 years old and replacement parts are discontinued. The valve is not working properly. Replacement necessary to ensure adequate distribution supply pressures for subdivision and prevent water main breaks.

SECTION 2: DECISION MEMO REQUIREMENTS				
DECISION MEMO NOT REQUIRED SOLE SOURCE PER DUPAGE ORDIN	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. ANCE, SECTION 2-350 (MUST FILL OUT SECTION 4)			
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				
STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact.			
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. SOLE PROVIDER OF A LICENSED OR PATENTED GOOD OR SERVICE
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. The 10" Cla-Val Valve is discontinued and beyond life and requires replacement. The current Cla-Val has been in operation for more than 30-years and is in need of replacement.
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. Additional quotes were requested from another supplier, but only alternatives came back or the item was no-quoted due to the sole-source distributor.
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. Per Cla-Val, Dorner Company is the sole-source distributor for Cla-Val Valve components and parts.

Send	d Purchase Order To:	Send Invoices To:			
Vendor: Dorner Company	Vendor#:	Dept: Public Works	Division: Public Works		
Attn: Jim Ozimek	Email: JOzimek@dornerco.com	Attn: Magda	Email: pwaccountspayable@dupagecou y.gov		
Address: PO Box 189	City: Sussex	Address: 7900 S. Rt. 53	City: Woodridge		
State: WI	Zip: 53089-0189	State:	Zip: 60517		
Phone: 219-406-5022	Fax:	Phone: 630-985-7400	Fax: 630-985-4802		
S	end Payments To:		Ship to:		
Vendor: Same as Above	Vendor#: Same as Above	Dept: Same as Above	Division: Same as Above		
Attn:	Email:	Attn:	Email:		
Address:	City:	Address:	City:		
State:	Zip:	State:	Zip:		
Phone:	Fax:	Phone:	Fax:		
 Shipping		Contract Dates			
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):		
PER 50 ILCS 505/1	Destination	Aug 27, 2024	Nov 30, 2024		

Purchase Requisition Line Details											
LN	Qty	UOM	ltem Detai l (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Supply and delivery of the 10" Cla-Val per proposal number Q1685cldu.	FY24	2000	2640	52250		21,500.00	21,500.00
2	1	EA		Service tech for installation and troubleshooting as required per proposal number Q1685cldu.	FY24	2000	2640	53300		3,500.00	3,500.00
FY is required, assure the correct FY is selected. Requisition Total					\$ 25,000.00						

	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.			
The following documents have been attached: W-9 Vendor Ethics Disclosure Statement				