

SECTION 1: DESCRIPTION						
General Tracking		Contract Terms				
FILE ID#: PW-P-0004-24	RFP, BID, QUOTE OR RENEWAL #: 21-105-PW	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$45,000.00			
COMMITTEE: PUBLIC WORKS			CONTRACT TOTAL COST WITH ALL RENEWALS: \$180,000.00			
		MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: SECOND RENEWAL			
Vendor Information		Department Information				
VENDOR: Univar Solutions USA, Inc.	VENDOR #:	DEPT: Public Works	DEPT CONTACT NAME: Jay Dahlberg			
VENDOR CONTACT: Shelley Riggle	VENDOR CONTACT PHONE: 513-969-7393	DEPT CONTACT PHONE #: 630-985-7400	DEPT CONTACT EMAIL: Jay.Dahlberg@dupageco.org			
VENDOR CONTACT EMAIL: muniteam- west@univarsolutions.com	VENDOR WEBSITE: www.univarsolutions.com	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.). Sodium Bisulfite for both the Woodridge and Knollwood Wastewater Treatment Facilities in bulk on an as-needed basis for a 1-year period from 4/1/24 through 3/31/25 in the amount of \$45,000 per Bid #21-105-PW. This is the second of three possible renewals under this contract.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished De-chlorination is an essential part of the wastewater treatment process and is required in order to meet EPA standards and regulations. Sodium Bisulfite is used in the de-chlorination process to remove chlorine from the final effluent phase of the treatment process.

SECTION 2: DECISION MEMO REQUIREMENTS				
DECISION MEMO NOT REQUIRED RENEWAL	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.			
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.
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.

Send Purc	hase Order To:	Send Invoices To:			
Vendor: Vendor#: Univar Solutions USA, Inc. 12464		Dept: DuPage County Public Works	Division: Public Works		
Attn: Shelley Riggle	Email: Shelley.Riggle@univarsolutions.com	Attn: Magda	Email: pwaccountspayable@dupageco.or		
Address: 124 Chapel Hill Drive	City: Fairfield	Address: City: 7900 S. Route 53 Woodridge			
State: Ohio	Zip: 45014	State: Zip: Illinois 60517			
Phone: 513-969-7393	Fax:	Phone: 630-985-7400	Fax: 630-985-4802		
Send Po	ayments To:	Ship to:			
Vendor: Univar Solutions USA, Inc.	Vendor#: 12464	Dept: SAME AS ABOVE	Division:		
Attn:	Email:	Attn:	Email:		
Address: 62190 Collections Center Drive	City: Chicago	Address: City:			
State: Illinois	Zip: 60693-0621	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		Apr 1, 2024	Mar 31, 2025		

					Purchas	se Requis	ition Lin	e Details			
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Sodium Bisulfite for a 1-year period from 4/1/24 through 3/31/25 for the Woodridge and Knollwood Facilities per Bid #21-105-PW . This is the second of three possible renewals under this contract	FY24	2000	2555	52330		40,000.00	40,000.00
2	1	EA		Sodium Bisulfite for a 1-year period from 4/1/24 through 3/31/25 for the Woodridge and Knollwood Facilities per Bid #21-105-PW . This is the second of three possible renewals under this contract	FY25	2000	2555	52330		5,000.00	5,000.00
FY is required, assure the correct FY is selected. Requisition Total					\$ 45,000.00						

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.					
	ents have been attached: W-9 Vendor Ethics Disclosure Statement					

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