

ALL AREAS MUST BE FILLED IN

ITB-RQ TABULATION FORM

FOR PURCHASES NOT TO EXCEED \$40,000 TOTAL

THIS IS NOT AN ORDER

Requisition Number: _____ Date: 5/8/2014 Purchase Order No. _____

Verbal Quotes >\$2,500 and <\$5,000 Written Quotes >\$5,000 and <\$40,000 Formal Procurement >\$40,000
 One Time Purchase OR Requirements Contract (Term Agreement) Begin Date 7/1/2014 End Date 6/30/2015

INSURANCE REQUIREMENTS: Required Not Required Insurance Certificate Forward to Risk Management Date: _____

Workers' Compensation Liability: \$1,000,000
 Contractor's Pollution Liability: \$1,000,000 insurance each claim, incident, or occurrence, with an annual aggregate limit of \$1,000,000
 Commercial Automotive Liability: \$1,000,000 \$2,000,000 each claim, incident, or occurrence, with an annual aggregate limit of \$1,000,000
 Commercial General Liability: \$1,000,000 \$2,000,000 each claim, incident, or occurrence, with an annual aggregate limit of \$1,000,000
 Professional Liability: \$1,000,000 \$2,000,000 each claim, incident, or occurrence, with an annual aggregate limit of \$1,000,000
 Payment Bond and Amount: _____ Payment Bond and Amount: _____

Bid/Quote Title: Calcium Nitrate Liquid Odor Management Control Program Bid/Quote Number: WW14-02 Bid/Quote Due Date: 4/22/2014

AWARDED CONTRACT TO:	<input checked="" type="checkbox"/> Vendor #1	<input type="checkbox"/> Vendor #2	<input type="checkbox"/> Vendor #3	<input type="checkbox"/> Vendor #4	<input type="checkbox"/> Vendor #5	<input type="checkbox"/> Vendor #6	<input type="checkbox"/> Vendor #7	<input type="checkbox"/> Vendor #8	<input type="checkbox"/> Vendor #9
Vendor #1	Evouqua Water Technologies, LLC	Vendor #2	AH Water, Inc.	Vendor #4	Vendor #5	Vendor #6	Vendor #7	Vendor #8	Vendor #9
Address	2650 Tallevast Road Sarasota, FL 34243	Address	26111 Ynez Road, Ste C-3 Temecula, CA 92591	Address		Address			
Phone No.	941-359-7930	Phone No.	951-296-3735	Phone No.		Phone No.			
Fax No.	941-359-7985	Fax No.	951-296-1837	Fax No.		Fax No.			
Contact	Jennifer R. Miller	Contact	Vincent Marano	Contact		Contact			
Date Contacted	3/24/2014	Date Contacted	3/24/2014	Date Contacted		Date Contacted			
LHC FOB:	Destination	LHC FOB:	Destination	LHC FOB:		LHC FOB:	Destination		
Terms:		Terms:		Terms:		Terms:			
How Contacted	Fax <input type="checkbox"/> Mail <input type="checkbox"/> Ph <input type="checkbox"/> email <input checked="" type="checkbox"/>	How Contacted	Fax <input type="checkbox"/> Mail <input type="checkbox"/> Ph <input type="checkbox"/> email <input checked="" type="checkbox"/>	How Contacted	Fax <input type="checkbox"/> Mail <input type="checkbox"/> Ph <input type="checkbox"/> email <input checked="" type="checkbox"/>	How Contacted	Fax <input type="checkbox"/> Mail <input type="checkbox"/> Ph <input type="checkbox"/> email <input type="checkbox"/>	How Contacted	Fax <input type="checkbox"/> Mail <input type="checkbox"/> Ph <input type="checkbox"/> email <input type="checkbox"/>
Call Returned	Yes <input type="checkbox"/> No <input type="checkbox"/>	Call Returned	Yes <input type="checkbox"/> No <input type="checkbox"/>	Call Returned	Yes <input type="checkbox"/> No <input type="checkbox"/>	Call Returned	Yes <input type="checkbox"/> No <input type="checkbox"/>	Call Returned	Yes <input type="checkbox"/> No <input type="checkbox"/>
Bid Received	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Bid Received	Yes <input type="checkbox"/> No <input type="checkbox"/>	Bid Received	Yes <input type="checkbox"/> No <input type="checkbox"/>	Bid Received	Yes <input type="checkbox"/> No <input type="checkbox"/>	Bid Received	Yes <input type="checkbox"/> No <input type="checkbox"/>
Declined to Bid	Yes <input type="checkbox"/> No <input type="checkbox"/>	Declined to Bid	Yes <input type="checkbox"/> No <input type="checkbox"/>	Declined to Bid	Yes <input type="checkbox"/> No <input type="checkbox"/>	Declined to Bid	Yes <input type="checkbox"/> No <input type="checkbox"/>	Declined to Bid	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contractor Lic #		Contractor Lic #		Contractor Lic #		Contractor Lic #		Contractor Lic #	
Comments:	Vendor quoted *1.789 for \$447,250	Comments:	Vendor quoted*2.027 for \$506,750	Comments:		Comments:		Comments:	

Comments/Specifications: _____

Dept/Division/Section: Operations/Wastewater Prepared By: *[Signature]* Phone No.: 855-3999 Date: 5/8/2014

ATTACH VENDOR QUOTES THAT ARE GREATER THAN \$2,500 AND LESS THAN OR EQUAL TO \$40,000. REQUISITION MUST MATCH ITB - RQ TABULATION FORM. KEEP ORIGINAL

PROCUREMENT DOCUMENTS ON FILE FOR SIX (6) YEARS PAST EXPIRATION OR COMPLETION OF CONTRACT, WHICHEVER IS LONGER

IF PROCUREMENT IS OVER \$40,000, PROCUREMENT MUST GO BEFORE CITY COUNCIL FOR APPROVAL.

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ITEM #	CATEGORY	DESCRIPTION	QTY	U/M	VENDOR 1 UNIT PRICE	VENDOR 1 TOTAL PRICE	VENDOR 2 UNIT PRICE	VENDOR 2 TOTAL PRICE	VENDOR 3 UNIT PRICE	VENDOR 3 TOTAL PRICE
1		Calcium Nitrate Liquid Odor Management Control Program, Including all costs per specifications	250,000	Gal	\$ 1.79	447,250.00	\$ 2.03	506,750.00		
2						-		-		-
3						-		-		-
4						-		-		-
5						-		-		-
6						-		-		-
7						-		-		-
8						-		-		-
9						-		-		-
10						-		-		-
11						-		-		-
12						-		-		-
13						-		-		-
14						-		-		-
15						-		-		-
GRAND TOTAL:						\$ 447,250.00	\$ 506,750.00			\$ -

ATTACH VENDOR QUOTES THAT ARE GREATER THAN \$2,500 AND LESS THAN OR EQUAL TO \$40,000. REQUISITION MUST MATCH ITB - RQ TABULATION FORM. KEEP ORIGINAL PROCUREMENT DOCUMENTS ON FILE FOR SIX (6) YEARS PAST EXPIRATION OR COMPLETION OF CONTRACT, WHICHEVER IS LONGER
IF PROCUREMENT IS OVER \$40,000, PROCUREMENT MUST GO BEFORE CITY COUNCIL FOR APPROVAL.

