

BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

Contract C Grant	Requested Board Meeting Date: 01/24/2023 or Procurement Director Award:			
* = Mandatory, information must be provided				
*Contractor/Vendor Name/Grantor (DBA):				
Tucson Winsupply (Headquarters: Tucson, AZ)				
*Project Title/Description:				
Hand Tools Non-Powered, Accessories and Supplies				
*Purpose:				
\$308,000.00 (including sales tax) and includes four (4) one-yea Administering Department: Regional Wastewater Reclamation *Procurement Method:				
Pursuant to Pima County Procurement Code 11.12.010, Comperesponses were received. Award is to the lowest, responsive an	etitive sealed bidding, Solicitation No. IFB-PO-2300049 was conducted. Three (3 and responsible bidder.			
PRCUID: 468793 Attachments: Notice of Recommendation for Award and Maste	er Agreement.			
*Program Goals/Predicted Outcomes:				
To purchase hand tools non-powered, accessories and supplies throughout Pima County facilities.	which will allow Pima County staff to complete regular and emergency repairs			
*Public Benefit:				

*Retroactive:

*Metrics Available to Measure Performance:

No.

TO: COB 12/21/2022 32 PAGES VERSION: I

To help maintain Pima County facilities and ensure safety of Pima County employees and public.

After receipt of order, compare receipt date to order date to make sure items are received within bid specifications.

1919299248CKFB

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (*) fields

Contract / Award Information				•	
Document Type: MA	Department C	ode: <u>PO</u>	Contract Number (i.e., 15-1	23): <u>23-111</u>	
Commencement Date: 04/17/2023 Termination Date: 04/16/2024 Prior Cor			Prior Contract Number (Syne	ntract Number (Synergen/CMS):	
Expense Amount \$ 308,000.00	*	Reven	ue Amount: \$		
*Funding Source(s) required: Gener	al Fund -63%, Wast	ewater Ops- 37%			
Funding from General Fund?	res C No	If Yes \$	% <u>63</u>		
Contract is fully or partially funded w	ith Federal Funds?	C Yes @ No			
If Yes, is the Contract to a vendor of	or subrecipient?	<u> </u>			
Were insurance or indemnity clauses If Yes, attach Risk's approval.	modified?	€ Yes ® No			
Vendor is using a Social Security Num If Yes, attach the required form per Adr		C Yes © No 2-10.			
Amendment / Revised Award Info	rmation				
Document Type:	Department Cod	de:	Contract Number (i.e., 15-123):	District American M. Annual	
Amendment No.:	.*	AMS Ve	sion No.:		
Commencement Date:		New Ter	mination Date:		
		Prior Co	ntract No. (Synergen/CMS):		
C Expense C Revenue C Inc	crease C Decrease				
	Yes C No If Ye	Amount	This Amendment: \$	the section of the se	
*Funding Source(s) required:		· · · · · · · · · · · · · · · · · · ·			
Funding from General Fund?			0/.		
		s \$	<u> </u>		
Grant/Amendment Information (f		•			
Document Type:					
Commencement Date:	Termina		Amendment Numb	er:	
Match Amount: \$		Revenue An	nount: \$		
*All Funding Source(s) required:	response to the second				
*Match funding from General Fund	de C Yes C No	If Yes \$	0/.		
*Match funding from other source		If Yes \$	70		
*Funding Source:		11 105 5	%		
*If Federal funds are received, is fu	nding coming directly	from the Federal gov	ernment or passed through oth	er organization(s)?	
Contact: Procurement Officer. Step	hen M. Romero Delaly:	aigned by Staphan V Raimara 22 12 19 10 56 55 0/ 00 DIVIS	_{ion Manager,} Ana Wilber	Digitally signed by Ana Wilber Date 2022 12 19 11 18 29 -07:00	
Department: Procurement Director	Terri Spencer	Oigitally signed by Terri Sp Date 2022 12 19 14 09 57	pricor	4-3021	
Department Director Signature: Jack	kson Jenkins	Application of the state of the	Date: 12/20/2	022	
Deputy County Administrator Signature	e: 95		Date:/2/20	12022	
County Administrator Signature:	(Ju		Date: 12 2	prove	