



**City of Homestead
Procurement & Contract Services Division
AWARD RECOMMENDATION / INTENT TO AWARD**

To:

From: Procurement Specialist:

Date:

RFP/ITB #: Item/Service:

Attached are apparent low bid(s) and a tabulation for subject items/services requisitioned by your department. Please complete the applicable portions of this form in order that proper presentation and recommendations may be made. Please return this form to the Procurement Specialist as soon as possible.

1. PROCUREMENT COMMENTS:

Vendor took exception to Section 2.8 - Term of Contract. A request for clarification was sent to the vendor to confirm the term of the pricing provided in their bid form submittal. Vendor confirmed pricing submitted is only valid until November 30, 2022.

2. RECOMMENDATION:

A. Which bids do you recommend?

B. Does this meet specifications as per your request and as advertised? YES NO

If No, is the variance considered: MINOR or MAJOR

Explain:

C. Is the recommendation the lowest bid received? YES NO

D. List the bids that are low but which you believe DO NOT meet specifications and list reasons why each does not meet specifications; please attach a memorandum of explanation to this form if necessary.

only bid received.

(attach an additional sheet if further comment or explanation is required)

PRINT NAME
Department Director or designee

SIGNATURE
Procurement Manager For Malia Rivera

SIGNATURE

DATE

DATE

SIGNATURE
Risk Manager

DATE

3. PROCUREMENT ACTION/RECOMMENDATION(S):

The Procurement & Contract Services Division has reviewed the bid submittal and recommends award to **Allied Universal Corporation** through November 30, 2022.

THIS FORM MUST BE COMPLETED AND RETURNED TO THE PROCUREMENT & CONTRACT SERVICES DIVISION FOR ALL AWARD RECOMMENDATIONS OF \$35,000.00 AND ABOVE.
FOR AWARD RECOMMENDATIONS REQUIRING COUNCIL APPROVAL, SUBMIT THIS FORM NO LATER THAN THREE (3) WEEKS PRIOR TO THE PUBLISHED COMMISSION AGENDA ITEM DEADLINES FOR PURCHASING ITEMS.