

DEPARTMENT OF FINANCE | division of purchases

# Council Report for monthly contract abstracts

March 2020



Photo: Fully-bloomed cherry blossom, Trevecca Nazarene University  
Credit Elijah M. Henderson on Unsplash



# REPORT SUMMARY

## MARCH 2020



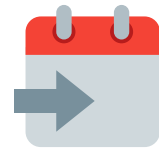
17

contracts awarded



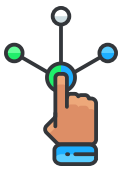
\$132.9 M

total value of contracts



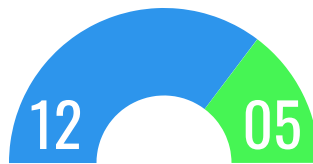
3.9 yrs

average contract length



02

average number of bidders



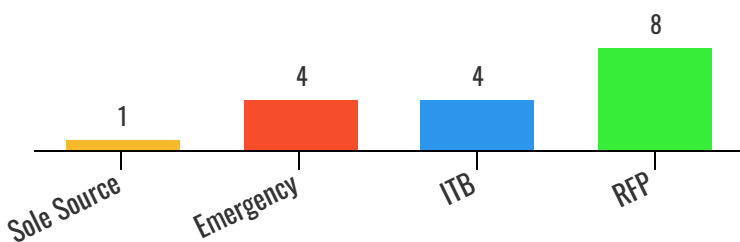
● Replacement ● New

replacement vs. new contracts

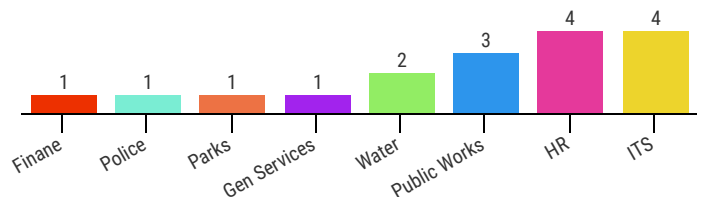


29%

contracts with DBE participation



contracts by selection method



contracts by department

**Contract Information**

Contract & Solicitation Title: Database administration support for the Oracle hosted E-Business Suite R12 application.

Contract Summary: Contractor agrees to provide database administration support for the Oracle hosted E-Business Suite R12 application for items related to performance, tuning, patching, and validation along with internal DBA advisory services.

Contract Number: 6462599 Solicitation Number: N/A Requisition Number: N/A

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): No

Type of Contract/PO: Multi-Year Contract Requires Council Legislation: No

High Risk Contract (Per Finance Department Contract Risk Management Policy): No

Sexual Harassment Training Required (per BL2018-1281): Yes

Estimated Start Date: 02/28/2020 Estimated Expiration Date: 02/27/2025 Contract Term: 60 months

Estimated Contract Life Value: \$200,000.00 Fund: 51137 BU: 502229

Payment Terms: Net 30 Selection Method: Sole Source

Procurement Staff: Terri Ray BAO Staff: Christopher Wood

Procuring Department: ITS Department(s) Served: ITS

**Prime Contractor Information**

Prime Contracting Firm: InfoSapient, Inc. ISN#: 22897

Address: 7777 Glades Road, Suite 100 City: Boca Raton State: FL Zip: 33434

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact: Maria Barguil Email Address: maria.barguil@infosapient.com Phone #: 561-374-0715

Prime Contractor Signatory: Maria Barguil Email Address: maria.barguil@infosapient.com

**Disadvantaged Business Participation for Entire Contract**

*Small Business and Service Disabled Veteran Business Program:*

N/A Amount: N/A Percent, if applicable: N/A

*Equal Business Opportunity (EBO) Program:*

Program Not Applicable Amount: N/A Percent, if applicable: N/A

*Federal Disadvantaged Business Enterprise:*

No Amount: N/A Percent, if applicable: N/A

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
InfoSapient, Inc.	<input type="checkbox"/>	N/A	N/A	Approved Sole Source Form

**Contract Information**Contract & Solicitation Title: Contract Summary: Contract Number:  Solicitation Number:  Requisition Number: Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): Type of Contract/PO:  **Requires Council Legislation:** **High Risk Contract** (Per Finance Department Contract Risk Management Policy): **Sexual Harassment Training Required** (per BL2018-1281): Estimated Start Date:  Estimated Expiration Date:  Contract Term: Estimated Contract Life Value:  Fund:  BU: Payment Terms:  Selection Method: Procurement Staff:  BAO Staff: Procuring Department:  Department(s) Served: **Prime Contractor Information**Prime Contracting Firm: ISN#: Address: City: State: Zip: Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact:  Email Address:  Phone #: **Prime Contractor Signatory:**  **Email Address:** **Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*Amount: Percent, if applicable: *Equal Business Opportunity (EBO) Program:*Amount: Percent, if applicable: *Federal Disadvantaged Business Enterprise:*Amount: Percent, if applicable: 

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Arbor Art Tree Care, Inc."/>	<input type="checkbox"/>	<input type="text" value="78.00"/>	<input type="text" value="\$2,205,000.00"/>	<input type="text" value="Awarded"/>
<input type="text" value="The Davey Tree Expert Co."/>	<input type="checkbox"/>	<input type="text" value="89.46"/>	<input type="text" value="\$2,620,000.00"/>	<input type="text" value="Awarded"/>
<input type="text" value="N/A"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Select from the Following:"/>
<input type="text" value="N/A"/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Select from the Following:"/>
<input type="text" value=""/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Select from the Following:"/>



**Contract Information**Contract & Solicitation Title: Information Technology Services Temporary PersonnelContract Summary: Contractor agrees to provide temporary personnel for information technology services.Contract Number: 6467804 Solicitation Number: N/A Requisition Number: N/AReplaces Expiring Contract? (Enter "No" or Expiring Contract No.): 349544Type of Contract/PO: Other **Requires Council Legislation:** No**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No**Sexual Harassment Training Required** (per BL2018-1281): NoEstimated Start Date: 03/01/2020 Estimated Expiration Date: 08/31/2020 Contract Term: 6 MonthsEstimated Contract Life Value: \$280,129.50 Fund: 51137 BU: 14521121Payment Terms: Net 30 Selection Method: EmergencyProcurement Staff: Terri Ray BAO Staff: Christopher WoodProcuring Department: ITS Department(s) Served: Metro Wide**Prime Contractor Information**Prime Contracting Firm: Internal Data Resources, Inc. (IDR, Inc.) ISN#: 25349Address: 25 Century Blvd, Suite 410 City: Nashville State: TN Zip: 37214Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact: Danny Roberge Email Address: DRoberge@idr-inc.com Phone #: 61-739-2789**Prime Contractor Signatory:** Danny Roberge Email Address: DRoberge@idr-inc.com**Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*N/A Amount: N/A Percent, if applicable: N/A*Equal Business Opportunity (EBO) Program:*Program Not Applicable Amount: N/A Percent, if applicable: N/A*Federal Disadvantaged Business Enterprise:*No Amount: N/A Percent, if applicable: N/A

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<u>Internal Data Resources, Inc</u>	<input type="checkbox"/>	<u>N/A</u>	<u>N/A</u>	<u>Approved Emergency Justification</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>

**Contract Information**Contract & Solicitation Title: Service & Maintenance of Network Video SystemsContract Summary: Contractor agrees to provide ongoing services and maintenance of Metro's network video systems as needed.Contract Number: 6468010 Solicitation Number: 9008 Requisition Number: 158306Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): 349507Type of Contract/PO: IDIQ Contract **Requires Council Legislation:** No**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No**Sexual Harassment Training Required** (per BL2018-1281): YesEstimated Start Date: March 25, 2020 Estimated Expiration Date: March 24, 2025 Contract Term: 60  
MonthsEstimated Contract Life Value: \$50,000,000.00 Fund: 51137 BU: 14521072Payment Terms: Net 30 Selection Method: RFPProcurement Staff: Christina Alexander BAO Staff: Jerval WatsonProcuring Department: ITS Department(s) Served: ITS/Metro Wide**Prime Contractor Information**Prime Contracting Firm: Eye in the SkyISN#: 8142Address: 570 Church Street E. Ste. 611City: Brentwood State: TNZip: 37027Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact: John Touhy Email Address: john@eyeintheskycams.com Phone #: 615-469-5688Prime Contractor Signatory: John TouhyEmail Address: john@eyeintheskycams.com**Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*SBE/SDV Participation Amount: \$314,433.00 Percent, if applicable: 1.91%*Equal Business Opportunity (EBO) Program:*Program Not Applicable Amount: 0 Percent, if applicable: 0*Federal Disadvantaged Business Enterprise:*No Amount: 0 Percent, if applicable: 0

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<u>Eye in the Sky</u>	<input type="checkbox"/>	<u>94.69</u>	<u>\$16,443,312.50</u>	<u>Awarded</u>
<u>Motorola</u>	<input type="checkbox"/>	<u>36.45</u>	<u>\$22,558,518.61</u>	<u>Evaluated but not selected</u>
<u>System Integrations</u>	<input type="checkbox"/>	<u>56.58</u>	<u>\$13,713,400.00</u>	<u>Evaluated but not selected</u>

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**Contract Information**

Contract & Solicitation Title: Pre-employment Testing for Metro

Contract Summary: CONTRACTOR agrees to provide Pre-employment Testing for Metro in accordance with Exhibit A.

Contract Number: 6468245 Solicitation Number: 8005 Requisition Number: 165817

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): 352409

Type of Contract/PO: IDIQ Contract **Requires Council Legislation:** No

**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No

**Sexual Harassment Training Required** (per BL2018-1281): Yes

Estimated Start Date: 2/24/2020 Estimated Expiration Date: 2/23/2025 Contract Term: 5 years

Estimated Contract Life Value: \$1,000,000.00 Fund: 10101 BU: 08126400

Payment Terms: Net 30 Selection Method: RFP

Procurement Staff: Sandra Walker BAO Staff: Jerval Watson

Procuring Department: Human Resources Department(s) Served: Metrowide

Mdl

**Prime Contractor Information**

Prime Contracting Firm: Ergometrics ISN#:

Address: 2122 164th St. SW Suite 300 City: Lynnwood State: WA Zip: 98087

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact: Zari Morehouse Email Address: zarim@ergometrics.org Phone #: (425) 741-0101-Ext 103

Prime Contractor Signatory: CARL SWANDER Email Address: carl@ergometrics.org

**Disadvantaged Business Participation for Entire Contract**

*Small Business and Service Disabled Veteran Business Program:*

N/A Amount: 0.00 Percent, if applicable: N/A

*Equal Business Opportunity (EBO) Program:*

Program Not Applicable Amount: 0.00 Percent, if applicable: N/A

*Federal Disadvantaged Business Enterprise:*

No Amount: 0.00 Percent, if applicable: N/A

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<u>Ergometrics</u>	<input type="checkbox"/>	<u>75.00</u>	<u>67,000.00</u>	<u>Awarded</u>
<u>FirstIdea, Inc</u>	<input type="checkbox"/>	<u>51.54</u>	<u>129,000.00</u>	<u>Evaluated but not selected</u>
<u>Industrial Organizational Sol</u>	<input type="checkbox"/>	<u>78.62</u>	<u>100,750.00</u>	<u>Awarded</u>

**Contract Information**

Contract & Solicitation Title:

Contract Summary:

Contract Number:  Solicitation Number:  Requisition Number:

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.):

Type of Contract/PO:  **Requires Council Legislation:**

**High Risk Contract** (Per Finance Department Contract Risk Management Policy):

**Sexual Harassment Training Required** (per BL2018-1281):

Estimated Start Date:  Estimated Expiration Date:  Contract Term:

Estimated Contract Life Value:  Fund:  BU:

Payment Terms:  Selection Method:

Procurement Staff:  BAO Staff:

Procuring Department:  Department(s) Served:

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**Prime Contractor Information**

Prime Contracting Firm:  ISN#:

Address:  City:  State:  Zip:

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact:  Email Address:  Phone #:

Prime Contractor Signatory:  Email Address:

**Disadvantaged Business Participation for Entire Contract**

*Small Business and Service Disabled Veteran Business Program:*

Amount:  Percent, if applicable:

*Equal Business Opportunity (EBO) Program:*

Amount:  Percent, if applicable:

*Federal Disadvantaged Business Enterprise:*

Amount:  Percent, if applicable:

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Ergometrics"/>	<input type="checkbox"/>	<input type="text" value="75.00"/>	<input type="text" value="67,000.00"/>	<input type="text" value="Awarded"/>
<input type="text" value="FirstIdea, Inc"/>	<input type="checkbox"/>	<input type="text" value="51.54"/>	<input type="text" value="129,000.00"/>	<input type="text" value="Evaluated but not selected"/>
<input type="text" value="Industrial Organizational Sol"/>	<input type="checkbox"/>	<input type="text" value="78.62"/>	<input type="text" value="100,750.00"/>	<input type="text" value="Awarded"/>
<input type="text" value=""/>	<input type="checkbox"/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value="Select from the Following:"/>



**Contract Information**Contract & Solicitation Title: Injury on Duty (IOD) Claims AdministrationContract Summary: CONTRACTOR agrees to provide Injury on Duty (IOD) Claims Administration, Medical Treatment Network and Integrated Occupational Health related services.Contract Number: 6468335 Solicitation Number: 8007 Requisition Number: N/AReplaces Expiring Contract? (Enter "No" or Expiring Contract No.): 351975Type of Contract/PO: IDIQ Contract **Requires Council Legislation:** No**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No**Sexual Harassment Training Required** (per BL2018-1281): YesEstimated Start Date: 3/30/2020 Estimated Expiration Date: 3/29/2025 Contract Term: 5 yearsEstimated Contract Life Value: \$6,200,000.00 Fund: 52200 BU: 12505100 and 12505200Payment Terms: Net 30 Selection Method: RFPProcurement Staff: Sandra Walker BAO Staff: Christopher WoodProcuring Department: Human Resources Department(s) Served: Metrowide**Prime Contractor Information**Prime Contracting Firm: Alternative Service Concepts, LLCISN#: Address: 2501 McGavock Pike, Suite 802City: Nashville State: TNZip: 37214Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact: Thomas NewmanEmail Address: Thomas.Newman@ascrisk.comPhone #: (615) 360-0248Prime Contractor Signatory: Pam FinchEmail Address: pam.finch@ascrisk.com**Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*Select from the Following: Amount: \$0.00Percent, if applicable: N/A*Equal Business Opportunity (EBO) Program:*Select from the Following: Amount: \$0.00Percent, if applicable: N/A*Federal Disadvantaged Business Enterprise:*Select from the Following: Amount: \$0.00Percent, if applicable: N/A

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<u>Alternative Service</u>	<input type="checkbox"/>	<u>92.00</u>	<u>\$10,986,179.00</u>	<u>Awarded</u>
<u>Collins and Company, Inc.</u>	<input type="checkbox"/>	<u>70.37</u>	<u>\$19,720,890.00</u>	<u>Evaluated but not selected</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>

Mll

## Contract Information

SW

Contract & Solicitation Title:

Contract Summary:

Contract Number:  Solicitation Number:  Requisition Number:

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.):

Type of Contract/PO:  **Requires Council Legislation:**

**High Risk Contract** (Per Finance Department Contract Risk Management Policy):

**Sexual Harassment Training Required** (per BL2018-1281):

Estimated Start Date:  Estimated Expiration Date:  Contract Term:

Estimated Contract Life Value:  Fund:  BU:

Payment Terms:  Selection Method:

Procurement Staff:  BAO Staff:

Procuring Department:  Department(s) Served:

## Prime Contractor Information

Prime Contracting Firm:  ISN#:

Address:  City:  State:  Zip:

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact:  Email Address:

Phone #:

**Prime Contractor Signatory:**  **Email Address:**

## Disadvantaged Business Participation for Entire Contract

*Small Business and Service Disabled Veteran Business Program:*

Amount:  Percent, if applicable:

*Equal Business Opportunity (EBO) Program:*

Amount:  Percent, if applicable:

*Federal Disadvantaged Business Enterprise:*

Amount:  Percent, if applicable:

\* Amounts and/or percentages are not exclusive.

## Summary of Offer

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Tennessee Equine Hospital"/>	<input type="checkbox"/>	<input type="text" value="93"/>	<input type="text" value="\$6,796.53"/>	<input type="text" value="Awarded"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>

**Contract Information**Contract & Solicitation Title: Public Safety Promotional Testing ServicesContract Summary: Contractor agrees to provide promotional testing services as needed.Contract Number: 6468699 Solicitation Number: 14015 Requisition Number: 165833Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): 352408Type of Contract/PO: IDIQ Contract **Requires Council Legislation:** No**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No**Sexual Harassment Training Required** (per BL2018-1281): YesEstimated Start Date: March 25, 2020 Estimated Expiration Date: March 24, 2025 Contract Term: 60  
MonthsEstimated Contract Life Value: \$1,000,000.00 Fund: 10101 BU: 08126600Payment Terms: Net 30 Selection Method: RFPProcurement Staff: Christina Alexander BAO Staff: Jerval WatsonProcuring Department: Human Resources Department(s) Served: Human Resources, Fire, MNPD**Prime Contractor Information**Prime Contracting Firm: Industrial Organizational Solutions ISN#: 19223Address: 1520 Kensington Road Ste. 110 City: Oak Brook State: IL Zip: 60523Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact: Chad Legel Email Address: chad@iosolutions.com Phone #: 708-498-2673Prime Contractor Signatory: Chad Legel Email Address: chad@iosolutions.com**Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*No SBE/SDV participation Amount: 0 Percent, if applicable: 0*Equal Business Opportunity (EBO) Program:*Program Not Applicable Amount: 0 Percent, if applicable: 0*Federal Disadvantaged Business Enterprise:*No Amount: 0 Percent, if applicable: 0

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<u>Industrial Org Solutions</u>	<input type="checkbox"/>	<u>188</u>	<u>\$332,084.00</u>	<u>Awarded</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>

SW

## Contract Information

Contract & Solicitation Title:

Contract Summary:

Contract Number:  Solicitation Number:  Requisition Number:

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.):

Type of Contract/PO:  **Requires Council Legislation:**

**High Risk Contract** (Per Finance Department Contract Risk Management Policy):

**Sexual Harassment Training Required** (per BL2018-1281):

Estimated Start Date:  Estimated Expiration Date:  Contract Term:

Estimated Contract Life Value:  Fund:  BU:

Payment Terms:  Selection Method:

Procurement Staff:  BAO Staff:

Procuring Department:  Department(s) Served:

## Prime Contractor Information

Prime Contracting Firm:  ISN#:

Address:  City:  State:  Zip:

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact:  Email Address:  Phone #:

Prime Contractor Signatory:  Email Address:

## Disadvantaged Business Participation for Entire Contract

*Small Business and Service Disabled Veteran Business Program:*

Amount:  Percent, if applicable:

*Equal Business Opportunity (EBO) Program:*

Amount:  Percent, if applicable:

*Federal Disadvantaged Business Enterprise:*

Amount:  Percent, if applicable:

\* Amounts and/or percentages are not exclusive.

## Summary of Offer

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Sessions Paving Co."/>	<input type="checkbox"/>	<input type="text" value="81"/>	<input type="text" value="\$243,555.00"/>	<input type="text" value="Awarded"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>

**Contract Information**Contract & Solicitation Title: Billing and Mailing ServicesContract Summary: Contractor agrees to provide billing and mailing services.Contract Number: 6468949 Solicitation Number: N/A Requisition Number: N/AReplaces Expiring Contract? (Enter "No" or Expiring Contract No.): 356640Type of Contract/PO: Other **Requires Council Legislation:** No**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No**Sexual Harassment Training Required** (per BL2018-1281): NoEstimated Start Date: 03/03/2020 Estimated Expiration Date: 09/02/2020 Contract Term: 6 MonthsEstimated Contract Life Value: \$800,000.00 Fund: 67331 BU: 65555910Payment Terms: Net 30 Selection Method: EmergencyProcurement Staff: Terri Ray BAO Staff: Christopher WoodProcuring Department: Water Services Department(s) Served: Water Services**Prime Contractor Information**Prime Contracting Firm: Doxim, Inc. dba Doxim Utilitec LLC ISN#: 1001322Address: 747 East Whitecomb Avenue City: Madison Heights State: MI Zip: 48071Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact: Erin Romo Email Address: ERomo@utilitec.net Phone #: 248-526-4863**Prime Contractor Signatory:** Michael Hennessy **Email Address:** MHennessy@doxim.com**Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*N/A Amount: N/A Percent, if applicable: N/A*Equal Business Opportunity (EBO) Program:*Program Not Applicable Amount: N/A Percent, if applicable: N/A*Federal Disadvantaged Business Enterprise:*No Amount: N/A Percent, if applicable: N/A

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<u>Internal Data Resources, Inc</u>	<input type="checkbox"/>	<u>N/A</u>	<u>N/A</u>	<u>Approved Emergency Justification</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Select from the Following:</u>



**Contract Information**

Contract & Solicitation Title: Legislative Voting and Management System license, maintenance, and support.

Contract Summary: Contractor agrees to provide license, maintenance, and support for the Legislative Voting and Management System solution utilized by Metro Nashville Council.

Contract Number: 6469879 Solicitation Number: N/A Requisition Number: N/A

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): 357451

Type of Contract/PO: Other **Requires Council Legislation:** No

**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No

**Sexual Harassment Training Required** (per BL2018-1281): No

Estimated Start Date: 03/11/2020 Estimated Expiration Date: 04/10/2020 Contract Term: Monthly

Estimated Contract Life Value: \$62,000.00 Fund: 10101 BU: 03101000

Payment Terms: Net 30 Selection Method: Emergency

Procurement Staff: Terri Ray BAO Staff: Christopher Wood

Procuring Department: ITS Department(s) Served: ITS

**Prime Contractor Information**

Prime Contracting Firm: SOE Software Corporation dba Scytl ISN#: 17366

Address: 1111 N Westshore Blvd, Suite 300 City: Tampa State: FL Zip: 33607

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact: Tabetha Parker Email Address: Tabetha.Parker@scytl.com Phone #: 813-865-7537

**Prime Contractor Signatory:** Jonathan Brill **Email Address:** jonathan.brill@scytl.com

**Disadvantaged Business Participation for Entire Contract**

*Small Business and Service Disabled Veteran Business Program:*

N/A Amount: N/A Percent, if applicable: N/A

*Equal Business Opportunity (EBO) Program:*

Program Not Applicable Amount: N/A Percent, if applicable: N/A

*Federal Disadvantaged Business Enterprise:*

No Amount: N/A Percent, if applicable: N/A

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text"/>	<input type="checkbox"/>	<u>N/A</u>	<u>N/A</u>	<u>Approved Emergency Justification</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<u>Select from the Following:</u>

ml

**Contract Information**Contract & Solicitation Title: Group 2 ResurfacingContract Summary: Contractor will provide all labor, equipment, haul, materials, and work required to resurface various roadways within the Group 2 area.Contract Number: 6469997 Solicitation Number: 19170 Requisition Number: 4003836Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): 402211Type of Contract/PO: IDIQ Contract **Requires Council Legislation:** No**High Risk Contract** (Per Finance Department Contract Risk Management Policy): No**Sexual Harassment Training Required** (per BL2018-1281): YesEstimated Start Date: August 31, 2020 Estimated Expiration Date: August 31, 2025 Contract Term: 60  
MonthsEstimated Contract Life Value: \$30,000,000.00 Fund: 40119 BU: 42401119Payment Terms: Net 30 Selection Method: ITBProcurement Staff: Jonathan Meadows BAO Staff: Victoria NorfleetProcuring Department: Public Works Department(s) Served: Public Works**Prime Contractor Information**Prime Contracting Firm: Jones Bros. Contractors, LLCISN#: 33Address: 1010 Pleasant Grove Place, Suite 300  
37122City: Mt. Juliet State: TN Zip:Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact: Kirby Reed Email Address: kreed@jonesbroscnt.com Phone #: 615-349-5288Prime Contractor Signatory: Daniel Daugharty Email Address: dougharty@jonesbroscnt.com**Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*SBE/SDV Participation Amount: \$1,753,614.00 Percent, if applicable: 46%*Equal Business Opportunity (EBO) Program:*M/WBE Participation Amount: \$1,408,883.56 Percent, if applicable: 37%*Federal Disadvantaged Business Enterprise:*No Amount: 0.00 Percent, if applicable: 0%

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<u>Jones Bros Contractors LLC</u>	<input type="checkbox"/>	<u>n/a</u>	<u>\$3,805,736.25</u>	<u>Awarded</u>
<u>Rogers Group/Reostone LLC</u>	<input type="checkbox"/>	<u>n/a</u>	<u>\$4,112,966.50</u>	<u>Evaluated but not selected</u>
<u>Vulcan Materials Company</u>	<input type="checkbox"/>	<u>n/a</u>	<u>\$4,297,551.75</u>	<u>Evaluated but not selected</u>

# Contract Abstract

## Contract Information

Contract & Solicitation Title:

Contract Summary:

Contract Number:  Solicitation Number:  Requisition Number:

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.):

Type of Contract/PO:  **Requires Council Legislation:**

**High Risk Contract** (Per Finance Department Contract Risk Management Policy):

**Sexual Harassment Training Required** (per BL2018-1281):

Estimated Start Date:  Estimated Expiration Date:  Contract Term:

Estimated Contract Life Value:  Fund:  BU:

Payment Terms:  Selection Method:

Procurement Staff:  BAO Staff:

Procuring Department:  Department(s) Served:

## Prime Contractor Information

Prime Contracting Firm:  ISN#:

Address:  City:  State:  Zip:

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact:  Email Address:  Phone #:

Prime Contractor Signatory:  Email Address:

## Disadvantaged Business Participation for Entire Contract

*Small Business and Service Disabled Veteran Business Program:*

Amount:  Percent, if applicable:

*Equal Business Opportunity (EBO) Program:*

Amount:  Percent, if applicable:

*Federal Disadvantaged Business Enterprise:*

Amount:  Percent, if applicable:

\* Amounts and/or percentages are not exclusive.

## Summary of Offer

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Ace Pipe Cleaning, Inc"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text" value="\$602,300.00"/>	<input type="text" value="Awarded"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>

**Contract Information**Contract & Solicitation Title: Contract Summary: Contract Number:  Solicitation Number:  Requisition Number: Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): Type of Contract/PO:  **Requires Council Legislation:** **High Risk Contract** (Per Finance Department Contract Risk Management Policy): **Sexual Harassment Training Required** (per BL2018-1281): Estimated Start Date:  Estimated Expiration Date:  Contract Term: Estimated Contract Life Value:  Fund:  BU: Payment Terms:  Selection Method: Procurement Staff:  BAO Staff: Procuring Department:  Department(s) Served: **Prime Contractor Information**Prime Contracting Firm: ISN#: Address: City: State: 

Zip:

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact: Email Address: Phone #: **Prime Contractor Signatory:** **Email Address:** **Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:*Amount: 

Percent, if applicable:

*Equal Business Opportunity (EBO) Program:*Amount: 

Percent, if applicable:

*Federal Disadvantaged Business Enterprise:*Amount: 

Percent, if applicable:

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Jones Bros. Contractors, LLC"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text" value="\$3,925,503.75"/>	<input type="text" value="Awarded"/>
<input type="text" value="Rogers Group/Reostone LLC"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text" value="\$4,245,266.50"/>	<input type="text" value="Evaluated but not selected"/>
<input type="text" value="Vulcan Materials Company"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text" value="\$4,297,551.75"/>	<input type="text" value="Evaluated but not selected"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>

*ml*

## Contract Information

Contract & Solicitation Title:

Contract Summary:

Contract Number:  Solicitation Number:  Requisition Number:

Replaces Expiring Contract? (Enter "No" or Expiring Contract No.):

Type of Contract/PO:  **Requires Council Legislation:**

**High Risk Contract** (Per Finance Department Contract Risk Management Policy):

**Sexual Harassment Training Required** (per BL2018-1281):

Estimated Start Date:  Estimated Expiration Date:  Contract Term:

Estimated Contract Life Value:  Fund:  BU:

Payment Terms:  Selection Method:

Procurement Staff:  BAO Staff:

Procuring Department:  Department(s) Served:

## Prime Contractor Information

Prime Contracting Firm:  ISN#:

Address:  City:  State:  Zip:

Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE

Prime Company Contact:  Email Address:  Phone #:

**Prime Contractor Signatory:**  **Email Address:**

## Disadvantaged Business Participation for Entire Contract

*Small Business and Service Disabled Veteran Business Program:*

Amount:  Percent, if applicable:

*Equal Business Opportunity (EBO) Program:*

Amount:  Percent, if applicable:

*Federal Disadvantaged Business Enterprise:*

Amount:  Percent, if applicable:

\* Amounts and/or percentages are not exclusive.

## Summary of Offer

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Disaster Recover Svcs.,LLC"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Approved Emergency Justification"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Select from the Following:"/>



**Contract Information**Contract & Solicitation Title: Contract Summary: Contract Number:  Solicitation Number:  Requisition Number: Replaces Expiring Contract? (Enter "No" or Expiring Contract No.): Type of Contract/PO:  **Requires Council Legislation:** **High Risk Contract** (Per Finance Department Contract Risk Management Policy): **Sexual Harassment Training Required** (per BL2018-1281): Estimated Start Date:  Estimated Expiration Date:  Contract Term: Estimated Contract Life Value:  Fund:  BU: Payment Terms:  Selection Method: Procurement Staff:  BAO Staff: Procuring Department:  Department(s) Served: **Prime Contractor Information**Prime Contracting Firm:  ISN#: Address:  City:  State:  Zip: Prime Contractor is (Check Applicable): SBE  SDV  MBE  WBE Prime Company Contact:  Email Address:  Phone #: **Prime Contractor Signatory:**  Email Address: **Disadvantaged Business Participation for Entire Contract***Small Business and Service Disabled Veteran Business Program:* Amount:  Percent, if applicable: *Equal Business Opportunity (EBO) Program:* Amount:  Percent, if applicable: *Federal Disadvantaged Business Enterprise:* Amount:  Percent, if applicable: 

\* Amounts and/or percentages are not exclusive.

**Summary of Offer**

Offeror Name	Disadv. Bus. (Check if applicable)	Score (RFQ Only)	Evaluated Cost	Result
<input type="text" value="Civic Engineering"/>	<input checked="" type="checkbox"/>	<input type="text" value="N/A"/>	<input type="text" value="\$ 5,630,400.00"/>	<input type="text" value="Evaluated but not selected"/>
<input type="text" value="Neel-Schaffer"/>	<input type="checkbox"/>	<input type="text" value="N/A"/>	<input type="text" value="\$ 2,868,080.00"/>	<input type="text" value="Evaluated but not selected"/>
<input type="text" value="Orchard, Hiltz &amp; McCliment"/>	<input type="checkbox"/>	<input type="text" value="N/A"/>	<input type="text" value="\$10,443.800.00"/>	<input type="text" value="Evaluated but not selected"/>
<input type="text" value="Tetra Tech"/>	<input type="checkbox"/>	<input type="text" value="N/A"/>	<input type="text" value="\$ 2,615,700.00"/>	<input type="text" value="Awarded"/>
<input type="text" value="Thompson Consulting Serv."/>	<input type="checkbox"/>	<input type="text" value="N/A"/>	<input type="text" value="\$ 3,258,900.00"/>	<input type="text" value="Evaluated but not selected"/>