



Legislation Details (With Text)

File #: 21-5353 **Version:** 1 **Name:**
Type: Proposals/Bids **Status:** Agenda Ready
File created: 10/4/2021 **In control:** Commissioners Court
On agenda: 10/12/2021 **Final action:**
Title: Request for approval of a project scheduled for advertisement for Peden Building renovation at 600 N. San Jacinto for Facilities & Property Maintenance (210295).

Sponsors:

Indexes:

Code sections:

Attachments: 1. 21-5353 Ad for Job No. 210295.pdf

Date	Ver.	Action By	Action	Result
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Department: Purchasing

Department Head/Elected Official: DeWight Dopslauf, Purchasing Agent, Purchasing Department

Regular or Supplemental RCA: Regular RCA

Type of Request: Proposals/Bids

Project ID (if applicable): 21/0295

Vendor/Entity Legal Name (if applicable):

MWDBE Participation (if applicable):

Request Summary (Agenda Caption):

Request for approval of a project scheduled for advertisement for Peden Building renovation at 600 N. San Jacinto for Facilities & Property Maintenance (210295).

Background and Discussion:

Expected Impact:

Alternative Options:

Alignment with Goal(s):

- _ Justice and Safety
- _ Economic Opportunity
- _ Housing
- _ Public Health
- _ Transportation
- _ Flooding
- _ Environment
- _ Governance and Customer Service

Prior Court Action (if any):

Date	Agenda Item #	Action Taken

Location:

Address (if applicable):

Precinct(s): Choose an item.

Fiscal and Personnel Summary				
Service Name	FY 21-22		Estimates	
			FY 22	Next 3 FYs
Incremental Expenditures				
Labor Expenditures	-	-	-	-
Non-Labor Expenditures	-	-	-	-
Total Incremental Expenditures	-	-	-	-
Funding Sources (General Fund, PIC Fund, Debt or CP, Grants, or Other - Please Specify)				
Existing Budget	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Current Budget	-	-	-	-
Additional Budget Requested	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Additional Budget Requested	-	-	-	-
Total Funding Sources	-	-	-	-
Personnel (Fill out section only if requesting new PCNs)				
Current Position Count for Service	-	-	-	-
Additional Positions Requested	-	-	-	-

Total Personnel	-	-	-
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Anticipated Implementation Date:

Emergency/Disaster Recovery Note: Choose an item.

Contact(s) name, title, department:

Attachments (if applicable):