

Harris County, Texas

1001 Preston St., Suite 934 Houston, Texas 77002

Legislation Text

File #: 21-4620, Version: 1
Department: Purchasing
Department Head/Elected Official: DeWight Dopslauf, Purchasing Agent, Purchasing Department
Regular or Supplemental RCA: Regular RCA
□ Supplemental RCA
Type of Request: Contract - Amendment
Project ID (if applicable):
Vendor/Entity Legal Name (if applicable):
MWDBE Participation (if applicable):
Request Summary (Agenda Caption): Request for approval of a renewal option with Bear Services, LP for construction of a pedestrian sidewalk and trail improvements in the South zone of Precinct 2 through August 31, 2022 at a cost of \$499,818, subject to applicable bonds to be received (200081).
Background and Discussion:
Expected Impact:
Alternative Options:
Alignment with Goal(s):
 ☐ Justice and Safety ☐ Economic Opportunity ☐ Housing ☐ Public Health
☐ Transportation

File #: 21-4620, Version: 1
☐ Flooding ☐ Environment ☐ Governance and Customer Service
Prior Court Action (if any):
Location: Address (if applicable list below):
☐ Countywide ☐ Precinct 1 ☐ Precinct 2 ☐ Precinct 3 ☐ Precinct 4

Fiscal and Persor	nel Summ	ary			
Service Name			FY 21-22	Estimates	
				FY 22	Next 3 FYs
Incremental Expend	litures			•	
Labor Expenditures			-	-	-
Non-Labor Expenditures			-	-	-
Total Incremental Expenditures			-	-	-
Funding Sources (Ge	eneral Fund, F	PIC Fund, Debt or	CP, Grants, or O	ther - Please Spe	cify)
Existing Budget		-	-	-	-
		-	-	-	-
		-	-	-	-
Total Current Budget			-	-	-
Additional Budget Requested		-	-	-	-
		-	-	-	-
		-	-	-	-
Total Additional Budget Requested			-	-	-
Total Funding Sources			-	-	-
Personnel (Fill out se	ction only if r	equesting new PC	CNs)	-	
Current Position Count for Service			-	-	-
Additional Positions Requested			-	-	-
Total Personnel			-	-	-

Anticipated Implementation Date:

File #: 21-4620, Version: 1
Emergency/Disaster Recovery Note:
\square Not an emergency, disaster recovery, or COVID-19 related item
 □ Emergency Item □ COVID-19 related Item □ Disaster Recovery related Item
Contact(s) name, title, department:
Attachments (if applicable):