

Legislation Text

File #: 21-4665, 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 that the County Judge execute an amendment to an agreement with Gilbane Building Company (Inventory and Preventative Maintenance) in the additional amount of \$544,500 for ongoing support and maintenance of mechanical, electrical and plumbing assessment data for consulting services for the implementation of IBM property management software for the extended period of August 28, 2021 - August 27, 2022 (170154).

Background and Discussion:

Expected Impact:

Alternative Options:

Alignment with Goal(s):

Justice and Safety

Economic Opportunity

□ Housing

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- \Box Public Health
- □ Transportation
- □ Flooding
- □ Environment
- \Box Governance and Customer Service

Prior Court Action (if any):

Location:

Address (if applicable list below):

- □ Countywide
- \Box Precinct 1
- Precinct 2
- Precinct 3
- Precinct 4

Fiscal and Personnel Sum	mary			
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, Deb	t or CP, Grants, or Ot	ther - Please Spe	cify)
Existing Budget	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Current Budget		-	-	-
Additional Budget Requested	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Additional Budget Requested		-	-	-
Total Funding Sources		-	-	-
Personnel (Fill out section only if	requesting ne	w PCNs)		
Current Position Count for Service		-	-	-
Additional Positions Requested		-	-	-
Total Personnel		-	-	-

Anticipated Implementation Date:

Emergency/Disaster Recovery Note:

 \Box 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):