



Legislation Text

File #: 24-2193, **Version:** 1

Department: Purchasing

Department Head/Elected Official: DeWight Dopslauf

Regular or Supplemental RCA: Regular RCA

Type of Request: Contract - Amendment

Project ID (if applicable): 220278

Vendor/Entity Legal Name (if applicable): WHC HTX, LLC dba zTrip

MWDBE Contracted Goal (if applicable): N/A

MWDBE Current Participation (if applicable): N/A

Justification for 0% MWDBE Participation Goal: N/A - Goal not applicable to request

Request Summary (Agenda Caption):

Request that the County Judge execute an amendment to an agreement with WHC HTX, LLC dba zTrip to modify certain service requirement terms of the agreement for fixed route, paratransit, on-demand and non-emergency medical and related transit services for the Community Services Department for the period of October 16, 2022 - October 15, 2025, with no increase in the total contract amount (220278).

Background and Discussion:

The award to WHC HTX, LLC dab zTrip was approved on October 18, 2022, and an Amendment to the Agreement for non-emergency medical transportation as part of the RIDES Program for the purpose of modifying certain service requirement terms, at no additional cost to the County.

Expected Impact:

N/A

Alternative Options:

N/A

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
10/18/22	201	Award

Location: N/A

Address (if applicable): N/A

Precinct(s): Choose an item.

Fiscal and Personnel Summary

Service Name				
	Current Fiscal Year Cost			Annual Fiscal Cost
	Labor	Non-Labor	Total	Recurring Expenses
Funding Sources				
Existing Budget				
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
Total Current Budget	\$	\$	\$	\$
Additional Budget Request (<i>Requires Fiscal Review Request Form</i>)				
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
Choose an item.	\$	\$	\$	\$
Total Additional Budget Request	\$	\$	\$	\$
Total Funding Request	\$	\$	\$	\$
Personnel (Fill out section only if requesting new PCNs)				
Current Position Count for Service	-	-	-	-
Additional Positions Request	-	-	-	-
Total Personnel	-	-	-	-

Anticipated Court Date: 04/23/24**Anticipated Implementation Date** (if different from Court date): N/A**Emergency/Disaster Recovery Note:** Not an emergency, disaster, or COVID-19 related item

Contact(s) name, title, department: David Jones, Assistant Director, Housing and Community Development Department; Jeremy Woodard, Sourcing Manager, Purchasing

Attachments (if applicable): Letter