

**JUSTIFICATION FOR NON-COMPETITIVE PROCUREMENT**

**COMPLETE THIS SECTION IF NEW CONTRACT**

For contract(s) in this request, answer applicable questions in each of the 4 major subject areas below in accordance with the Instructions for Preparation of Non-Competitive Procurement Form on the reverse side.

Request that negotiations be conducted only with New Bedford Panoramex for the product and/or services described herein.  
 (Name of Person or Firm)

This is a request for \_\_\_\_\_ (One-Time Contractor Requisition # \_\_\_\_\_, copy attached) or \_\_\_\_\_ Term Agreement or  
 \_\_\_\_\_ Delegate Agency (Check one). If Delegate Agency, this request is for "blanket approval" of all contracts within the  
 \_\_\_\_\_ (Attach List) Pre-Assigned Specification No. \_\_\_\_\_  
 (Program Name) Pre-Assigned Contract No. \_\_\_\_\_

**COMPLETE THIS SECTION IF AMENDMENT OR MODIFICATION TO CONTRACT**

Describe in detail the change in terms of dollars, time period, scope of services, etc., its relationship to the original contract and the specific reasons for the change. Indicate both the original and the adjusted contract amount and/or expiration date with this change, as applicable. Attach copy of all supporting documents. Request approval for a contract amendment or modification to the following:

Contract #: \_\_\_\_\_ Company or Agency Name: \_\_\_\_\_  
 Specification #: \_\_\_\_\_ Contract or Program Description: \_\_\_\_\_  
 Mod. #: \_\_\_\_\_ (Attach List, if multiple)

PAUL SPIELER 773-243-8353 [Signature] DMP 8/12/04  
 Originator Name Telephone Signature Department Date

Indicate SEE ATTACHED in each box below if additional space needed:

<input checked="" type="checkbox"/> PROCUREMENT HISTORY	See Attached
<input checked="" type="checkbox"/> ESTIMATED COST	See Attached
<input checked="" type="checkbox"/> SCHEDULE REQUIREMENTS	See Attached
<input checked="" type="checkbox"/> EXCLUSIVE OR UNIQUE CAPABILITY	See Attached
<input checked="" type="checkbox"/> OTHER	See Attached

APPROVED BY: [Signature] DATE \_\_\_\_\_ BOARD CHAIRPERSON \_\_\_\_\_ DATE \_\_\_\_\_  
 DEPARTMENT HEAD OR DESIGNEE

## **O'Hare Modernization Program – Procurement of FAA Required ALSF-2 Equipment**

### **Procurement History**

New Approach Lighting with Sequential Flashers (ALSF-2) and Precision Approach Path Indicator (PAPI) systems are required for the relocated threshold on Runway 14L. The construction and operation of the O'Hare Modernization Program's first new runway, RW 9L-27R, requires the relocation of the landing threshold on existing Runway 14L. Relocation of the RW 14L landing threshold requires the installation of new ALSF-2 and PAPI equipment to maintain uninterrupted availability of Category II/III instrument approach procedures.

The new equipment must be supplied by an equipment manufacturer/vendor that has been certified by the Federal Aviation Administration. New Bedford Panoramex Corporation (NBP) 1037 W. 9<sup>th</sup> Street, Upland, CA 91786, currently is the only FAA certified vendor of ALSF-2 and PAPI equipment. Therefore competitive bidding is not possible.

Future procurement of other ALSF-2 and PAPI equipment will be required for other new runways planned under the OMP.

### **Estimated Cost**

The estimated cost for the ALSF-2 equipment is \$1,000,000. The estimated cost for the PAPI equipment is \$50,000. These cost estimates are based upon current agreed pricing between NBP and the FAA for standard ALSF-2 and PAPI equipment. The ALSF-2 system for Runway 14L will require some customized components; therefore, some price negotiation must still occur.

### **Schedule Requirements**

The current schedule for the OMP requires completion of the RW-14L threshold relocation by November 1, 2005. The estimated time for fabrication of the ALSF-2 equipment is 8 months. An additional 6 months is required to install the equipment. Based on the above dates and times, fabrication of the equipment must commence on or before September 1, 2004.

### **Exclusive or Unique Capability**

Refer to the attached correspondence from the FAA dated August 3, 2004 in which the FAA's contracting Officer confirms that NBP is the only source that meets the requirements of FAA Specification FAA-E-2689A which governs the supply of ALSF systems.

### **Other**

Due to the specialized nature of the equipment and the fact that no production activities occur locally (NBP's manufacturing facilities are located in Southern California) there are no MBE/WBE firms that will be able to participate in this supply contract for the ALSF-2 and PAPI equipment needed for RW 14 threshold displacement.





U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

800 Independence Avenue, SW  
Washington, DC 20591

August 3, 2004

Mr. Antoine Kanaan  
New Bedford Panoramex (NBP)  
1037 W. 9<sup>th</sup> Street  
Upland, CA 91786

Dear Mr. Kanaan:

SUBJECT: Contract DTFA01-01-C-00055; ALSF-2/SSALR Systems

FAA has contracted with NBP to provide ALSF-2/SSALR systems, FAA Type FA-10700. NBP is currently the only source who meets the requirements of FAA Specification FAA-E-2689a.

Questions or comments may be submitted to the undersigned at (202) 493-4759 or Billy Nesmith at (202) 493 4764.

Respectfully,

A handwritten signature in cursive script, appearing to read "Vickie L. Gordon".

Vickie L. Gordon  
Contracting Officer

# CPAC PROJECT CHECKLIST

For CPAC Team Use-Only	
Date Received	_____
Date Returned	_____
Date Accepted	_____

**IMPORTANT: PLEASE READ AND FOLLOW THE INSTRUCTIONS FOR COMPLETING THE PROJECT CHECKLIST AND CONTACT THE APPROPRIATE TEAM LEADER IF YOU HAVE ANY FURTHER QUESTIONS. ALL INFORMATION SHOULD BE COMPLETED INCLUDING THE SUPPLEMENTAL CHECKLIST REQUIRED BY THE SPECIFIC CPAC TEAM. ATTACH ALL REQUIRED MATERIALS AND SUBMIT FOR HANDLING TO THE DEPARTMENT OF PROCUREMENT SERVICES, ROOM 403, CITY HALL, 121 N. LASALLE STREET, CHICAGO, ILLINOIS 60602.**

**PROJECT**

Date: 08-11-2004 Contact Person: Paul Spieles  
 ID No (Spec, RX, Project): \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Department: DMP Project Manager: 773-243-8353  
 Bureau: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Contract No (if known): \_\_\_\_\_ Estimated Value \$ \_\_\_\_\_  
 Project Title/Description: ALSF-2 & PAPI Systems for RW 142 Relocation

**SCOPE STATEMENT**

\_\_\_\_\_ attached is a detailed scope of services and/or specification

**IMPORTANT: THIS IS A CRITICAL PORTION OF YOUR SUBMITTAL. IN ORDER FOR A TEAM TO ACCEPT YOUR SUBMITTAL YOU MUST COMPLETE ALL TEAM SPECIFIC SCOPE REQUIREMENTS AS SET FORTH IN THE SUPPLEMENTAL CHECKLIST FOR THAT TEAM.**

The following is a general description of what would be included in a Scope of Services or Specification:  
 A clear description of all anticipated services and products, including: time frame for completion, special qualifications of prospective vendors, special requirements or needs of the project, locations, anticipated participating user departments, citation of any applicable City ordinance or state/federal regulation or statute.

**TYPE OF PROCUREMENT REQUESTED (check all that apply)**

Competitive Bid  RFQ/RFP/RFS/RFI  Sole Source\*\*  Term Agreement  One Shot  
 Mod/Amendment  Time Extension  Additional Funding  Small Order  S/O Emergency

**FORMS**

F-25\* (add line item)  F-10\* (special approvals)  SSRB\*\* (sole source approval)  
 F-26\* (new term agreement)  RX (one-shot requisition)  OBM Authorization  
 F-27\* (time extension)  APRF (all purpose request form)  
 F-29\* (change vendor limit)

\*\* Sole source requests must include vendor quotes/proposal and MBE/WBE compliance requirements

**FUNDING**

City:  Corporate  Bond  Enterprise  Grant\*  Other GRABS  
 State:  IDOT/Transit  IDOT/Highway  Grant\*  Other \_\_\_\_\_  
 Federal:  FHWA  FTA  FAA  Grant\*  Other \_\_\_\_\_

Funding Strip(s): 00-582-85-205-8000-8000-480000SE  
 \* Attach copy of any applicable grant agreement terms and conditions

**TIME FRAME**

Date Needed: ASAP Requested Contract Term (y/m/d): One-Shot

**PRE BID/SUBMITTAL REQUIREMENTS**

Requesting Pre Bid/Submittal Conference?  Yes  No Requesting Conference be Mandatory?  Yes  No  
 Requesting Site Visit?  Yes  No Requesting Site Visit be Mandatory?  Yes  No

# CPAC PROJECT CHECKLIST

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## ARCHITECTURAL/ENGINEERING SUPPLEMENTAL CHECKLIST

**Required Attachments:** Scope of Services, including location, description of project, services required, deliverables, and other information as required

### Risk Management

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

**Pre-Qualification Category No.** \_\_\_\_\_ **Category Description:** \_\_\_\_\_

For Pre-Qualification Program, attach list of suggested firms to be solicited

**Other Agency Concurrence Required:**  None  State  Federal  Other (fill in) \_\_\_\_\_

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## AVIATION CONSTRUCTION SUPPLEMENTAL CHECKLIST

DOA sign-off for final design documents:  Yes  No

### Required Attachments:

Copy of Draft Contract Documents and Detailed Specifications.

### Risk Management:

Current Insurance Requirements prepared/approved by Risk Management: Yes  No

Will work be performed within 50 feet of CTA or ATS structure or property? Yes  No

Will work be performed airside? Yes  No

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## CAPITAL EQUIPMENT (VEHICLES) SUPPLEMENTAL CHECKLIST

### Required Attachments:

Detailed Specifications including detailed description of the vehicle(s) or equipment, mounted equipment, if any, and options/accessories.

Special Provisions (Delivery, Warranty, Manuals, Training, Additional Unit Purchase Options, Bid Submittal Information, etc.)

Delivery Location(s)

Technical Literature

Drawings, if any

Part Number List (  Manufacturer; or  Dealer;  or Other Source: \_\_\_\_\_ )

Copy of current Price List(s)/Catalog(s)

Form F-10 or other authorization document

Any other exhibits and attachments

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## COMMODITIES SUPPLEMENTAL CHECKLIST

### Required attachments:

Copies of price lists, catalogs, drawings, variations of part numbers

Any other exhibits or attachments

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## CONSTRUCTION SUPPLEMENTAL CHECKLIST (LARGE & SMALL)

### Required attachments: Copy of Draft (80% Completion)

Copy of Draft (80% Completion) Contract Documents and Detailed Specifications

### Risk Management

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

# CPAC PROJECT CHECKLIST

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## DELEGATE AGENCY SUPPLEMENTAL CHECKLIST

### Required attachments:

Attach Scope of Services that includes the following information 1) Program background & objectives; 2) Type of services for which proposals are sought; 3) Location and time line for delivery of services; 4) Qualifications, skills, and/or experience necessary; 5) Special licenses or certifications required; 6) Evaluation process (if known).

### Other Attachments (please submit all that apply)

1. Copy of grant application and/or grant agreement
2. Evidence of award authority (DAAC agenda with agency name highlighted; City Council ordinance with agency name highlighted; or OBM letter)
3. Modification information (Copy of Form F-8A; screen print of EPS AWDS table)

Does program require Executive Order 91-1 clearance?  Yes  No  
Is boilerplate from Law available or in production?  Yes  No  
Would your department benefit from technical assistance?  Yes  No

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## HARDWARE/SOFTWARE SUPPLEMENTAL CHECKLIST

ITSC (approved by BIS)

OBM (approved by Budget form/memo)

Attach any documentation indicating any previous purchase activity to assist in the procurement process

Grant document attached

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## PROFESSIONAL SERVICES SUPPLEMENTAL CHECKLIST

Detailed scope of services as described on page 1.

The Schedule of Compensation

Deliverables

Request for individual contract services (if applicable)

The appropriate EPS form

**\* If this is a Telecommunications/Utilities project, please also address the following:**

Has the project been reviewed by DGS?  Yes  No

Attach copy of DGS Recommendation; Reservation(s); or participate under current contract.

Does the project include software?  Yes  No

If yes, is signed ITSC form attached?  Yes  No

Does the location involve:

A public way?  Yes  No

Any concession in the City's facilities?  Yes  No

Is it anticipated City Council approval of the project or contract will be required?  Yes  No



# PROJECT CHECKLIST

## SMALL ORDERS SUPPLEMENTAL CHECKLIST

Yes No

- 1. Special Approval Form/Justification Letter.  
e.g. (Emergency Contract, Telecommunication Back-up documents, Proposals , EPS Form F-10, etc.,).
- 2. Suggested Vendor.
- 3. Commodity Code, Manufacturer, Catalog Information, Model No., Quantity, Unit Cost/Measure, Color etc.,
- 4. Detailed Specification or Scope of Work.

## ATTACHMENT REQUIRED FOR EACH SMALL ORDERS PROCUREMENT TYPE

(Check Appropriate Group)

### 1. ONE SHOT (PN)

- YES ( ) NO ( ) Detailed Specifications
- YES ( ) NO ( ) Suggested Vendor
- YES ( ) NO ( ) Support Documentation

### 3. EMERGENCY CONTRACT

- YES ( ) NO ( ) Justification Letter
- YES ( ) NO ( ) Vendor Proposal
- YES ( ) NO ( ) Pre-assigned Requisition (RX)

### 4. TELEPHONE/FAX BIDS

- YES ( ) NO ( ) Justification Letter

### 2. SOLE SOURCE REQUIREMENTS

- YES ( ) NO ( ) Vendor Proposal
- YES ( ) NO ( ) Disclosure Affidavit
- YES ( ) NO ( ) Letter of Exclusive or Unique Capability
- YES ( ) NO ( ) Support Documentation from Vendor/Manufacturer.
- YES ( ) NO ( ) Signature(s) of Originator or Departmental Head/Designee.

## WORK SERVICES & FACILITY MAINTENANCE SUPPLEMENTAL CHECKLIST

**Required Attachments:** Detailed Specifications (Scope of Services) including detailed description of the work, locations (with supporting detail), user department contacts, work hours/days, laborer/supervisor mix, compensation and price escalation considerations, contract term and extension options, contractor qualifications, citation of any applicable City/State/Federal statutes or regulations, citation of any applicable technical standards and price lists, catalogs, technical drawings and other exhibits and attachments as appropriate.

### Risk Management

- Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No
- Will services be performed on or near a waterway?  Yes  No
- Will services require the handling of hazardous/biowaste material?  Yes  No
- Will services require the blocking of streets or sidewalks in any way?  
Which may affect public safety?  Yes  No