### **CITY OF CHICAGO** DEPARTMENT OF PROCUREMENT SERVICES **ROOM 403, CITY HALL, 121 N. LASALLE STREET**

## 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 Procureme	•	, ,	s octow in accordance with the <u>n</u>	istractions for
Request that negotiations be conducted only services described herein.		ffice of Emergency Ma Person or Firm)	nagement and Communication	for the product and/or
This is a request for (One-Time C Delegate Agency (Check one). I (Program Name)	f Dalamata Aganov, this rai	quartie for "blanket opr	d) or X Term roval" for all contract William Contract No.	Agreement or
COMPLETE THIS SECTION IF  Describe in detail the change in terms of do the change. Indicate both the original and t supporting documents. Request approval for  Contract #:  Specification #	llars, time period, scope o he adjusted contract amou or a contract amendment o	f services, etc., its relation that and/or expiration date remodification to the fole Company or Agence	onship to the original contract and e with this change, as applicable, lowing;  cy Name:	the specific reasons for Attach copy of all
Dorsey Kuley 2-Originator Wame	- <b>5/3 1</b> Telephone	Contract or Progra  (Attach List, if mu  Aouey 1  Signature		1928/08 Date
Indicate SEE ATTACHED in each box bel	ow if additional space need	ed:		
PROCUREMENT HISTORY AT&T is the local carrier that has provided us AT&T's franchise territory in the State of Illino (3-1-1). 311 Service is available on all applic affiliates' Central Office Switches, as set forth ("Designated Answering Point"); provided th recorded announcement that informs the call they do call originates in the local dialing are	is to reach non-emergency able AT&T business, reside in Section 3 ("AT&T Centra at a 311 call originating fro er that the call cannot be co	police service or other mential, and coin phone lin l Offices"). 311 call traffic matelephone located o	unicipal services by dialing an abb les that permit local dialing in AT& c will be routed to Customer's desig utside Customer's geographic juri	reviated telephone number I local telephone company Inated 311 answering point Institution will be routed to a
The usage with AT&T for this service expired reduced rates. Under the proposed individual substantially below other 311 centers survey charges are, based on actual usage charges	al contract, normal tariffed red throughout the Country.	ates will be reduced 58% The total five-year cost	6 + (\$.12 per minute to \$.05 per m	inute). This rate is
The contract for this service expired over two can at any time, raise the rate for this service agreement with AT&T with optional extension	years ago. AT&T has continue back to the tariffed rate			
■ EXCLUSIVE OR UNIQUE C AT&T is the only provider offering 311 servic as it requires access to the ever-changing nu	es for the Chicago area. Li			er, AT&T in this instance,
APPROVED BY: Raymond Orozco, Exe	OR DESIGNEE cutive Director OEMC	11-5-08 DATE	Z S . L  BOARD CHAIRPERSON	



City of Chicago Richard M. Daley, Mayor

Office of Emergency Management and Communications

Raymond Orozco **Executive Director** 

120 North Racine Avenue 2nd Floor

Chicago, Illinois 60607-2010

http://www.cityofchicago.org

### *MEMORANDUM*

TO: Montel Gayles, Chief Procurement Officer

Department of Procurement Services

Lymon FROM:

Raymond Orozco, Executive Director

Office of Emergency Management and Communications

CC: Frank Lindbloom, Deputy Director of Finance

Office of Emergency Management and Communications

John O'Brien, Director Professional Services

Department of Procurement Services

DATE: 10/28/2008

**SUBJECT: Request for Sole Source Approval for 311 Telephone** 

**Usage Agreement** 

**CONTRACT TITLE:** 311 AT&T Telephone Usage Agreement

**VENDOR:** AT&T **ESTIMATED TOTAL COST:** \$500,000.00

Dear Mr. Gayles:

We respectfully request to be placed on the Sole Source Review Board meeting scheduled for Tuesda December 2, 2008 to allow OEMC to enter into a new 311 Telephone Usage Agreement with AT&T.

AT&T, which has provided this service to the 311 Center since it opened, is also the only local carrier able to provide this service. The City has been purchasing this service under an Individual Contract Agreement with SBC, which is now AT&T. This contract, which provides services at negotiated rates significantly below the tariffed rates for this service, expired two years ago. AT&T has indicated that unless the City signs a new agreement, rates for these services will default back to the tariffed rates, which are over 40% higher.

We are submitting a Sole Source DPS Checklist packet to address any issues.

Documentation includes

- (1) Project Checklist
- (2) Justification for Non-Competitive Procurement
- (3) Requisition #40487

If you have any questions, please contact Dorsey Ruley at 742-5139.

Thank you.

Cc: Joseph Chan, DPS

file





## DPS PROJECT CHECKLIST

	For DI	PS Use	Onl	v	
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Date R	eturned_				
Date A	ccepted_		19.8		
	l's Name		1112		
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IMPORTANT: PLEASE READ AND FOLLOW THE INSTRUCTIONS FOR COMPLETING THE PROJECT CHECKLIST AND CONTACT THE APPROPRIATE UNIT MANAGER IF YOU HAVE ANY FURTHER QUESTIONS. ALL INFORMATION SHOULD BE COMPLETED, 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.

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## DPS PROJECT CHECKLIST

### ARCHITECTURAL/ENGINEERING SUPPLEMENTAL CHECKLIST

	<b>Required Attachments:</b> 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?
	Will services be performed on or near a waterway?  If applicable, 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)
<del></del>	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  No
	Will work be performed within 50 feet of CTA or ATS structure or property? Yes No
	Will work be performed airside? Yes ☐ No ☐
	*NOTE: Any non-construction Aviation request, complete the applicable section.
	COMMODITIES SUPPLEMENTAL CHECKLIST
	<b>Required Attachments:</b> Detailed Specifications (Scope of Services) including detailed description of the product, delivery location, user department contact, price escalation considerations, Bidder's qualification, contract term and extension options, Contractor's 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.
	If Modification request, please verify and provide the following:
	Contractor's Name:
	Contractor's Address:
	Contractor's e-mail Address:
	Contractor's Phone Number:
	Contractor's Contact Person:
	CONSTRUCTION SUPPLEMENTAL CHECKLIST
	Required attachments:
	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

# DPS PROJECT CHECKLIST

### **VEHICLES/HEAVY EQUIPMENT SUPPLEMENTAL CHECKLIST**

Required Attachments:  Detailed Specifications in if any, and options/acces Special Provisions (Delive Bid Submittal Information Delivery Location(s) Technical Literature Drawings, if any	ssories. very, Warranty, Manua		ditional Unit Purchase	
☐ Part Number List ( ☐ Current Price List(s)/Cat ☐ Special Approval Form ☐ Exhibits and Attachment		Dealer;	or Other Source:	)
If Modification request, plant	ease verify and provide	e the following:		
Contractor's Name:				
Contractor's Address:				
Contractor's e-mail Address	s:			
Contractor's Phone Numbe	r:			
Contractor's Contact Person	n:			
Р	ROFESSIONAL SERV	ICES SUPPLE	MENTAL CHECKLIS	<b>БТ</b>
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