

Goal Modification Request Form

1. Date: 02/22/16 2. Requesting Department: ARA 3. Solicitation Number: Q25690
4. Solicitation Name: Gas. Electric, Water Technical/Regulatory Utility Consulting Services 5. Estimated Dollar Amount: \$415,000
6. Description of Solicitation (attach specifications/supporting documents): Professional gas, electric and water technical and regulatory utility consultant services. Engage a regulatory expert experienced in local and state regulatory utility matters to assist in addressing complex issues necessary to meet the City's regulatory responsibilities. See attached Statement of Work for additional detail.
PLEASE INDICATE WHETHER A PREVIOUS CONTRACT EXISTED FOR THIS SOLICITIATION.
A. Previous contract (if any): Yes No D B. Previous contract number: 4600012752
C. Goal on last contract 0% D. Was goal met? Yes No
E. If goal was not met, what percentage did the vendor achieve? N/A %
F. Why wasn't goal achieved?
N/A
SELECT ONE TYPE OF GOAL MODIFICATION REQUEST FROM THE FOUR OPTIONS BELOW.
A. I am requesting a waiver of the MWSBE Goal: Yes No B. Reason for waiver: (Check one) A public or administrative emergency exists which requires the goods or services to be provided with unusual immediacy If goods and services are specialized, technical, or unique nature as to require the City department to select its contractor without application of MWSBE provisions (such as contracts for expert witnesses, certain financial advisors or technical consultants) MWSBE provisions impose an unwarranted economic burden or risk on the City or unduly delay acquisition of the goods or services, or is not in the best interest of the City; or Level of MWSBE availability would produce minimal MWSBE participation. Other:
C. Detailed explanation for Waiver Reason: Services requested are highly technical, complex and of a specialized nature. The services are specific to the regulation of investor owned electric, gas and water utilities operating within Houston City limits. Please refer to the attached MWSBE waiver request memo.
A. Is this a Cooperative/Inter-Local agreement? Yes O No O
3. If yes, please specify the name of the agreement:
C. Did the Department explore opportunities for using certified firms? Yes No
D. Please explain how the department explored opportunities for using certified firms:

E. Please explain why the Department did not explore opportunities for using certified firms:



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3. REDUCED GOAL (to be completed by the department prior to advertisement)

A. I am requesting a MWSBE contract-specific goal below the following city wide goals:

Construction (34%) Professional Services (24%) Purchasing (11%)

Yes No for If yes, please complete a Contract-Specific Goal Request Form and submit with this form.

4. GOAL REVISION AFTER ADVERTISEMENT

A. I am requesting a revision of the MWSBE Goal that has already been advertised: Yes No for B. Original goal: ______ C. Proposed new goal: ______ D. Advertisement date: ______ E. Will the project be re-advertised? Yes No for F. Estimated dollar amount: \$______ G. Detailed reason for request:

Concurrence:

Alian following city wide goals:

Department Director of Designee Date

FOR OBO OFFICE USE ONLY:				
APPROVED:				
Dank & Llwy	3/1/16	non-divisible	W-535	
OBO Assistant Director or Designee	Date	OBO Reason	Tracking #	
DENIED:				
OBO Assistant Director or Designee	Date	OBO Reason	Tracking #	