



# Goal Modification Request Form

1. Date: 9/16/2015 2. Requesting Department: LGL/HAS 3. Solicitation Number: N/A  
 4. Solicitation Name: N/A 5. Estimated Dollar Amount: \$ 300,000.00  
 6. Description of Solicitation (*Attach Specifications/Supporting Documents*): Legal Services Contract for the review of proposed contracts related to the design and construction projects for the International Terminal Redevelopment Program.

**PLEASE INDICATE WHETHER A PREVIOUS CONTRACT EXISTED FOR THIS SOLICITATION.**

A. Previous Contract (if any): Yes  No  B. Previous Contract #: \_\_\_\_\_ C. Goal on Last Contract: \_\_\_\_\_  
 D. Was Goal Met? Yes  No  E. If goal was not met, what percentage did the vendor achieve? \_\_\_\_\_  
 F. Why wasn't goal achieved: N/A

**SELECT ONE TYPE OF GOAL MODIFICATION REQUEST FROM THE FOUR OPTIONS BELOW.**

**1. WAIVER**

A. I am requesting a waiver of the MWBE 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: Coats Rose has expertise in design, construction, and insurance matters. The work Coats Rose is responsible for is not divisible as attorneys at Coats Rose will review City provided contract documents and send their suggested revisions and analysis electronically.

**2. COOPERATIVE OR INTER-LOCAL AGREEMENT**

A. Is this a Cooperative/Inter-Local Agreement? Yes  No

B. If yes, please specify the name of the Agreement: N/A

C. Did the Department explore opportunities for using certified firms? Yes  No

D. Please explain how the Department explored opportunities for using certified firms: N/A

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



## Goal Modification Request Form

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

A. I am **requesting** a MWBE contract-specific goal below the following citywide goals:

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

Yes  No  If yes, 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 MWBE Goal that has already been advertised: Yes  No

B. Original Goal: \_\_\_\_\_ C. New Proposed Goal: \_\_\_\_\_ D. Advertisement Date: \_\_\_\_\_

E. Will Project be Re-Advertised: Yes  No  F. Estimated Dollar Amount: \$ N/A

G. Detailed reason for request: N/A

Concurrence:

Jennifer Cannon  
Requesting Department Initiator  
(832) 393-6423

9/16/15  
Date

[Signature]  
Department Director or Designee

9-17-15  
Date

FOR OBO OFFICE USE ONLY:			
APPROVED:			
<u>[Signature]</u>	<u>9/21/15</u>	<u>Non-Divisible*</u>	<u>W-465</u>
OBO Assistant Director or Designee	Date	OBO Reason	Tracking #
DENIED:			
OBO Assistant Director or Designee	Date	OBO Reason	Tracking #

\* Approval based on non-divisibility of contract not because of stated specialized nature of services.