



Request Form

1. Date: 4/15/2016 2. Requesting Department: Fleet Management 3. Solicitation Number: L25774								
4. Solicitation Name: Aerial Devices, Bucket Truck Maintenance & Rapair Service 5. Estimated Dollar Amount: \$1,535,379.45								
6. Description of Solicitation (attach specifications/supporting documents): The contractor will perform complete visual & operational inspections and preventative maintenance on the various types of Aerial Devices and Bucket Trucks for department.								
PLEASE INDICATE WHETHER A PREVIOUS CONTRACT EXISTED FOR THIS SOLICITIATION.								
A. Previous contract (if any): Yes O No O B. Previous contract number:								
C. Goal on last contract 11% D. Was goal met? Yes No •								
E. If goal was not met, what percentage did the vendor achieve?								
F. Why wasn't goal achieved?								
Very little opportunity to carve out on this specific and technical type work.								
SELECT ONE TYPE OF GOAL MODIFICATION REQUEST FROM THE FOUR OPTIONS BELOW.								
1. WAIVER								
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:								
2. COOPERATIVE OR INTER-LOCAL AGREEMENT								
A. Is this a Cooperative/Inter-Local agreement? Yes O No O								
B. 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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Goal Modification Request Form

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4. GOAL REVISION AFTER ADVERTISEMENT	
A. I am requesting a revision of the MWSBE Goal that I	w 15 a 1965 o magazato 70 a c
B. Original goal:C. Proposed new goal:	
E. Will the project be re-advertised? Yes No	F. Estimated dollar amount: \$ 1,535,379.45
G. Detailed reason for request: See Attachment!	
Concurrence:	To the exercise state of the state of the
Pamela Scott 4/15/16	Jun 4.) 4. 15/6
Requesting Department Initiator Date	Department Director or Designee Date

FOR OBO OFFICE USE ONLY:									
APPROVED:									
Lashes Lowing	4/20/16	limited MWBO AVAILABILITY	W-122						
OBO Assistant Director or Designee	Date	OBO Reason	Tracking #						
DENIED:									
OBO Assistant Director or Designee	Date	OBO Reason	Tracking #						



4/19/2016

4. Solicitation /Project Name:

1. Date:

STEP 1: PROVIDE SOLICITATION / PROJECT INFORMATION.

2. Department:

& Repair Services

Contract-Specific Goal Request Form ECEIVED

L25574

\$1,535,379.45

3. Solicitation #:

6. Contract Value:

Purchasing & Professional Services

Fleet Management

Aerial Devices/Bucket Truck Maintenance

APR 19 2016

A	В	C	D	E	F	G	H
Work Element Description	NAICS Code	Cost for Each Work Element	% Cost of Contract	# of MWBE Firms (B2G)	# of All Firms	MWBE Availability	Goal % for Work Elemen
arts	423120/441310	\$100,000.00	6.51%	8	707	1.13%	0.07%
abor	561210	\$1,435,379.45	93.49%	12	104	11.54%	10.79%
Totals		\$ 1,535,379.45	100%				10.86%
7. List method used to calculate8. Calculated Contract-Specific9. If contract goal should be m	Goal (Column H):	10.86%	- Specific Go	al, please e	-	er goal adjust	ments:
Based on pass history only 1.20% based on minimal result in the pa							
	55.	6%	-				
based on minimal result in the pa	ss. al: MWBE	6% Ju		a	Division	Manager	4/19/2016
10. List Proposed Contract Goz	al: MWBE	6% J w	Signature	2 <u></u>		Manager Fitle	4/19/2016 Date
10. List Proposed Contract Goa TEP 4: SIGN AND DATE FO	al: MWBE RM. Designee	6% Ju OR OBO OFFICE		o /-			
10. List Proposed Contract Goz TEP 4: SIGN AND DATE FO Terrance York Department Director / I	al: MWBE RM. Designee	_ Ju		o <u>L</u>		Γitle	
10. List Proposed Contract Goz TEP 4: SIGN AND DATE FO Terrance York Department Director / I	nl: MWBE RM. Designee FOOVED:	_ Ju	USE ONLY:	o/-		Title D:	