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CITY OF HOUSTON OFFICE BUSINESS OPPORTUNITY

030

Goal Modification Request Form

1. Date: 11.21.2016 2. Requesting Department: HEC - OEM 3. Solicitation Number: 4. Solicitation Name: Furniture & Installation 5. Estimated Dollar Amount: \$ 349,524.06

6. Description of Solicitation (attach specifications/supporting documents):

To purchase furniture for the Emergency Operations Center to expand available workspace to accommodate increased levels of activities during major disasters and special security events.

PLEASE INDICATE WHETHER A PREVIOUS CONTRACT EXISTED FOR THIS SOLICITATION.

- A. Previous contract (if any): Yes No B. Previous contract number: 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?

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) C. Detailed explanation for Waiver Reason:

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: 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:

The City of Houston is currently utilizing the State's contract for procurement of furniture.



**Goal Modification
Request Form**

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 If yes, please complete a Contract-Specific Goal Request Form and submit with this form.

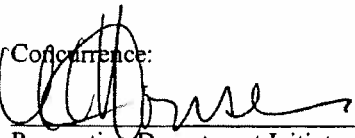
4. GOAL REVISION AFTER ADVERTISEMENT

A. I am requesting a revision of the MWSBE Goal that has already been advertised: Yes No

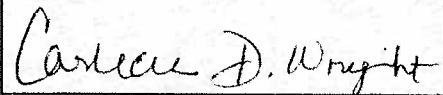
B. Original goal: _____ C. Proposed new goal: _____ D. Advertisement date: _____

E. Will the project be re-advertised? Yes No F. Estimated dollar amount: \$ _____

G. Detailed reason for request:

Concurrence:

Requesting Department Initiator 11.21.16
Date


Department Director or Designee 11.21.16
Date

FOR OBO OFFICE USE ONLY:			
APPROVED:			
	11/21/16	TXMAS INTERLOCAL NON-DIVISIDLE	W-693
OBO Deputy Director or Designee	Date	OBO Reason	Tracking #
DENIED:			
OBO Deputy Director or Designee	Date	OBO Reason	Tracking #

COMMENTS: