

Goal Modification Request Form

1. Date: 05.25.15 2. Requesting Department: PWE/WWO/MMB 3. Solicitation Number: N25846
4. Solicitation Name: 69th Street WWTP Tertiary Filter System 5. Estimated Dollar Amount: \$20M
6. Description of Solicitation (attach specifications/supporting documents): Furnishing a complete Tertiary Filter System Equipment and Materials delivered to the Project site
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 D. Was goal met? Yes O No O
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) 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 I devel of MWSBE availability would produce minimal MWSBE participation. Other: Specialized equipment C. Detailed explanation for Waiver Reason: The high complexity of the design and strict manufacturing tolerances requires specialized technical skill set and knowledge base.
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:



OBO Assistant Director or Designee

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Date

OBO Reason

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