

## Goal Modification Request Form

1. Date: 05/18/18 <sub>2</sub> . Requesting Department: Houston Health Department 3. Solicitation Number: N/A
1. Date: 05/18/18 2. Requesting Department: Houston Health Department 3. Solicitation Number: N/A 4. Solicitation Name: University of Houston (UH) 5. Estimated Dollar Amount: \$102,576.00
6. Description of Solicitation (attach specifications/supporting documents):  A collaborative with formaldehyde air scientists at UH for the City's Community Scale Air Toxic project.
PLEASE INDICATE WHETHER A PREVIOUS CONTRACT EXISTED FOR THIS SOLICITIATION.
A. Previous contract (if any): Yes No B. Previous contract number: N/A
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 <u>ONE</u> TYPE OF GOAL MODIFICATION REQUEST FROM THE <u>FOUR</u> OPTIONS BELOW.
<ul> <li>A. I am requesting a waiver of the MWSBE Goal: Yes No No</li> <li>B. Reason for waiver: (Check one)</li> <li>A public or administrative emergency exists which requires the goods or services to be provided with unusual immediacy</li> <li>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)</li> <li>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</li> <li>Level of MWSBE availability would produce minimal MWSBE participation.</li> <li>Other:</li> <li>C. Detailed explanation for Waiver Reason:</li> </ul>
2. COOPERATIVE OR INTER-LOCAL AGREEMENT  A. Is this a Cooperative/Inter-Local agreement? Yes No No  B. If yes, please specify the name of the agreement: University of Houston  C. Did the Department explore opportunities for using certified firms? Yes No   No   No   No   O
<ul><li>D. Please explain how the department explored opportunities for using certified firms:</li><li>E. Please explain why the Department did not explore opportunities for using certified firms:</li></ul>

The services to be provided are specialized and governed by the EPA, the funder. UH employs an atmospheric scientist with the required specialization in atmospheric chemistry and extensive experience measuring formaldehyde which is vital to the research component of this Agreement. The work is not divisible.



# Goal Modification Request Form

4. GOAL REVISION AFTER ADVI			) ()
A, I am requesting a revision of the M			
B. Original goal:C. Proposed new goal: E. Will the project be re-advertised? Yes O No O			
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G. Detailed reason for request:			
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Requesting Department Initiator	7 18   2018 Date	Department Director or Desi	gnee Date
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## Interoffice Memorandum

To:

Marsha Murray, Deputy Director

From:

Tifney M. Scott, Procurement Specialist, Department

Services

Date:

June 11, 2018

Subject:

Goal Modification Request - 0% Goal Waiver

Health Department

RE: University of Houston Air Scientist

The Goal Modification Request for the above reference solicitation has been reviewed and evaluated.

This solicitation involves the employment of air scientist from the University of Houston.

#### **Department's Information:**

The City seeks to enter into a professional services agreement with the University of Houston for a collaborative research with formaldehyde air scientist at the University of Houston for the City's Community Scale Air Toxic project. The services needed required specialization in atmospheric chemistry and extensive experience measuring formaldehyde which is vital to the research involved in this project. Due to the complexity, and unique nature of the highly specialized services needed, The Health Department recommends using the atmospheric scientist employed by the university.

#### **Department Services Findings:**

The documentation and scope of work supports a 0% Goal Waiver due to the services requested being so highly specialized, and unique in nature. Therefore, it is the recommendation to **APPROVE** the 0% Goal Waiver Request.

Reviewed and Accepted

Date '

Marsha Murray, Deputy Director

