

Sole Source Hearing Details

Agency Name: Capital Development Board

Title of Procurement: | Wilbur Wright College: Replace Flooring

Project Number: 810-022-006

Vendor Name: A.L.L Masonry Construction Co. Inc.

Hearing Date: November 30, 2023 CANCELLED

Hearing Time: 2:00 PM

WEBEX INFORMATION:

Webex Details: WEDEX INFORMATION.

https://illinois.webex.com/illinois/j.php?MTID=mccf2635e87e701832614d174c02102a6

Meeting number (access code): 2632 547 4548

Meeting password: 6TxcNqffq34

Hearing Officer: Thaddeus Wilkins, Hearing Officer

Chief Procurement Office - Capital Development Board

E-mail: Thaddeus.Wilkins@illinois.gov

phone 312-802-4562

Notice Contact: Ken Morris, Deputy Chief Procurement Officer

Chief Procurement Office - Capital Development Board

E-mail: Ken.Morris@illinois.gov

phone 217-836-0075

The hearing has been cancelled as no written comments or written requests for public hearing were received by 4PM on Monday, November 27, 2023

If a public hearing is requested, the purchasing agency shall present testimony justifying the procurement method. Any interested party may present testimony for or against the awarding of a sole source contract. The purpose of the hearing will be to receive information from the public as to whether contract award by Sole Source is appropriate and in accordance with the Illinois Procurement Code. Formal rules of evidence will not apply. Hearings may be recorded in order to aid in the production of minutes. Parties may submit written comments in lieu of attending the hearing. Written comments will be afforded the same weight as oral comments received at hearing. After consideration of the testimony, the Chief Procurement Officer may approve the purchasing agency's request to contract by the sole source procurement method.

SOLE SOURCE JUSTIFICATION FORM

| | Bulletin or Reference Number: | | | | |
|--|--|--|--|--|--|
| SECTION I - GENERAL INFORMATION | | | | | |
| Poguanting Agency/University: CDP | Department/Bureau/Section: Construction | | | | |
| Requesting Agency/University: CDB | | | | | |
| | e Date: 10.17.2023 | | | | |
| Project Title: Wilbur Wright College: Replace Flooring Vendor: A.L.L Masonry Construction Co. Inc | 9 | | | | |
| A.E.E Masonly Constitution Co. Inc | | | | | |
| Provide a description of the supplies or services required: | | | | | |
| There is defective material that was used on the project that's preventing the | completion of work by the contractor. This is to establish a | | | | |
| new contract in order to close the vendors contract. | | | | | |
| Value of Initial Term, this Change Order or Amendment, or if a Renewal, Valu | ue of this Renewal: \$81,228.57 Value is: ⊠ Actual ☐ Estimated | | | | |
| (\$77.926.14 in Retainage) This is a: New Sole | | | | | |
| (\$77,926.14 in Retainage) This is a: New Sole | Source | | | | |
| Professional and Artistic? | | | | | |
| | rvices if the amendment would increase the value by more than 5% of the initial award | | | | |
| or extend the term by more than 60 days. | · | | | | |
| SECTION II - PROPOSED TERM | | | | | |
| SECTION II - PROPOSED TERIN | | | | | |
| ☐ One-Time Purchase | | | | | |
| ☐ Term Contract Estimated Begin Date: 12/01/2023 Estimated | Contract End Date: 10/31/2024 | | | | |
| ☐ One-Time Amendment or Change Order to an Existing Contract for Rea | sons Other Than Adding Additional Funds | | | | |
| Explain (Then Skip Section III and go to Section IV): | ostic Stile. Than Adding Additional Funds | | | | |
| , | | | | | |
| If a Tarm Contract, does the term including renewals, evered 12 months? | □ Voc □ No | | | | |
| If a Term Contract, does the term, including renewals, exceed 12 months? If yes, a detailed justification is required: | ☐ Yes ☐ No | | | | |
| ALL Masonry has worked to try different materials supplied by the manufactu | re that could adhere to the stairs. After two attempts both of which has failed | | | | |
| preventing the project to move towards Final Acceptance. The warranty work | | | | | |
| is the method of travel for the students and staff throughout the building. This | work needs to be completed soon to prevent accidents from happening. A | | | | |
| new contract is needed to allow the contractor to correct the defective work. | | | | | |
| SECTION III - RENEWALS | | | | | |
| SECTION III - RENEWALS | | | | | |
| Number of Potential/Remaining Renewals: | 0 | | | | |
| Length of Each Renewal in Months: | 0 | | | | |
| Total Value of All or Remaining Renewals: | \$ 0 | | | | |
| | * * | | | | |
| SECTION IV - FUNDING | | | | | |
| | | | | | |
| Select the type of funding to be used (check all that apply): | Other (Fundain) | | | | |
| ☐ Federal Funds ☐ State Appropriated Funds | ☐ Other (Explain): | | | | |
| SECTION V - SOLE SOURCE JUSTIFICATION | | | | | |
| | | | | | |
| This purchase is economically only available from a single source because i | t is: | | | | |
| Art or Entertainment Services or Athletic Events | | | | | |
| Compatibility of Equipment, Accessories, Replacement Parts or Sen | <i>r</i> ice | | | | |
| ☐ Critical Changes to the Existing Contract Are Necessary and Best Are | | | | | |
| | The state of the contract of the state of th | | | | |
| | From the Holder Converset or Detent Number(a) | | | | |
| Items are Copyrighted or Patented and the Items are Only Available | From the Holder – Copyright or Patent Number(s): | | | | |
| ☐ Items are Required by an Existing Franchise Agreement | | | | | |
| ☐ Items are Required for Research and No Other Source is Able to Me | et the Researcher's Documented Need | | | | |
| ☐ Items are for Commercial Resale | | | | | |
| ☐ Items Are Needed for Trial Use or Testing | | | | | |
| ☐ Media for Advertising | | | | | |
| ☐ Necessary Adjustment of Utility Facilities in Conjunction with Highwa | y Construction | | | | |
| | | | | | |
| | J | | | | |
| | | | | | |
| Radio and/or Television Broadcast Rights | | | | | |
| Railroad Crossings/Facilities Alterations – Proprietary | | | | | |
| Software License/Upgrade/Maintenance | | | | | |
| | vith the manufacture for the material being installed on this project. | | | | |

PPB SSJF 140301 V5.1

SOLE SOURCE JUSTIFICATION FORM

| | | | | | Bulletin or Referen | ce Number: | |
|---|--|--|------------------------|--|---|--|---|
| SECT | ION V | I - HISTORY | | | <u> </u> | | |
| Has th | ne Ager | ncy or University | purchased these | supplies or services | s in the past? ⊠ Yes □ N | No | |
| | | | | CONTRACT AND and type of procure | | ne entire relationship with this vendo | or for this supply or |
| Term: One Two Three Four Five Six Sever Eight Nine Ten If mor | 5 | erm From: /28/2021 10 years, explair | Term To: 10/26/2022 | Value: \$ 855,602.44 \$ \$ \$ \$ \$ \$ \$ \$ \$ | Description: Construction Services | Contract Number: 21050081 | Type: Competitively Bid Select One |
| SECT | ION VI | I - BUSINESS R | ATIONAL E | | | | |
| 1. | Provid | e a detailed exp | lanation of the ne | ed for the supplies o contract to provide o | r services: loseout and final payment to tl | he vendor. | |
| 2. | Why are the requested supplies or services the only one that can satisfy your requirements? All services required to close out the project are directly related to the previous/current contract. | | | | | | |
| 3. | 3. What are the unique features of the supplies or services that are not available in any other product or by any other vendor? Provide specific, quantifiable factors/qualifications: The luminescent tape on the nosing of the stair that continued to de-laminate. After multiple attempts to repair using Tarkett's (Manufacturer) recommendations they finally agreed to cover the treads under their warranty and produce a new set of stair treads with a different nosing. There are 6 staircases that has defective glue/tape all testing taking place is being done on one staircase to prevent disruption to the school. | | | | | | |
| 4. | If services, what are the unique qualifications this vendor possesses? Provide specific, measurable factors/qualifications: ALL Construction has paid the manufacture for the product that's being installed. ALL Construction are the contractors that has installed the material and therefor responsible to correct all defects associated with this contract. | | | | | | |
| 5. | Were a | alternative suppl | ies or services ev | aluated? Yes | ⊠ No | | |
| | 5a. | If yes, name th | e alternative vend | lors whose supplies | or services were evaluated: | | |
| | 5b. | | | s for each vendor an apabilities and comp | | e? Please be specific with regard to | o features, |
| | 5c. | The work being different adhere | ents to the contract | rranty work per the r ctor to test out and it | manufacture requirements. The has failed. The manufacture the that they can supply a warrar | hat was selected by the | |
| 6. | What | efforts were mad | le to get the best | possible price? The | project was competitvely bid i | | |
| 7. | Will th | - | | | | nce, licensing or continuing need? | Yes No |
| 8. | 7a. If yes, please provide details regarding future obligations and/or needs:Why is the price for this purchase considered to be fair and reasonable?This contract was bid in 2021, the contractor is providing the services orginally agreed at no additional cost. | | | | | | |
| 9. | If this is a renewal, describe why circumstances are such that competitive selection is still not an alternative since awarding the original contract: N/A | | | | | | |
| 10. | What will be the financial or other impact to the State if this sole source is not approved and a competitive bid is required? The only impact would be an excess in cost to put together | | | | | | |
| 11. | Is there any additional justification information that you would like to add to justify this sole source? No additional information to add at this time. | | | | | | |

SOLE SOURCE JUSTIFICATION FORM

Bulletin or Reference Number:

| REQUESTING DEPARTMENT SIGNATURE REQUIRED | | | | | | | |
|--|--|-----------------------------------|--|--|--|--|--|
| I know and understand the contents of this Sole Source Jureasonableness of the price was adequately confirmed. | stification and attest that all statements are true and correct | and that the fairness and | | | | | |
| furt E. Patal | Timothy E. Patrick | 10-24-2023 | | | | | |
| Requesting Department Representative | Printed Name | Date | | | | | |
| 217-782-0601 | tim.patrick@illinois.gov | _ | | | | | |
| Requesting Department Representative Telephone Number | Requesting Department Representative Email Address | | | | | | |
| STATE AGENCY BUREAU/DIVISION HEAD OR UNIVERSITY PURCHASING DIRECTOR APPROVAL AND SIGNATURE REQUIRED | | | | | | | |
| I know and understand the contents of this Sole Source Justification and attest that all statements are true and correct and that the fairness and reasonableness of the price was adequately confirmed. | | | | | | | |
| di Wh | Jim Underwood | 10/24/23 | | | | | |
| State Agency Bureau/Division Head and Not a Designee or University Purchasing Director Signature and Not a Designee | Printed Name | Date | | | | | |
| 217-782-8725 | Jim.Underwood@illinois.gov | | | | | | |
| State Agency Bureau/Division Head or University Purchasing Director Telephone Number | State Agency Bureau/Division Head or University Purchasing Director Email Address | _ | | | | | |
| | | | | | | | |
| SPO APPROVAL AND SIGNATURE REQUIRED | | | | | | | |
| I know and understand the contents of this Sole Source Jureasonableness of the price was adequately confirmed. | stification and have verified that all statements are true and | correct and that the fairness and | | | | | |
| Jorald S. Burlingham, CPP (SPO Signature | Gerald S. Burlingham SPO Printed Name | 11.14.23 | | | | | |
| of o digitature | Of O Fillited Name | Date | | | | | |
| 217-836-0185 | gerald.burlingham@illinois.gov | | | | | | |

SPO Email Address

SPO Telephone Number

SECTION VIII - APPROVALS