



CHIEF PROCUREMENT OFFICE

Capital Development Board

NOTICE OF HEARING

X Sole/Sole Economically Feasible Source Contract

The office of the Chief Procurement Officer will hold a public hearing to hear testimony and receive comments on the proposed contract(s) described below.

Details of the proposed contract, justification for the Agency to contract in this way and the hearing procedure can be found at <https://cdb.illinois.gov/procurement/solesourceprocurementcontractawards.html>

SPECIAL HEARING DETAILS

DATE: May 19, 2025

TIME: 2:00PM

VIDEO LOCATIONS: WebEx call-in information

Meeting link:

<https://illinois.webex.com/illinois/j.php?MTID=mb913d86e2f731af3aaf1b1c419d3bfcd>

Meeting number:

2633 224 1075

Meeting password:

2V8wKaPn72X

Join by phone

+1-312-535-8110 Toll

+1-415-655-0002 Toll

Access code: 26332241075

HEARING OFFICER

Name: Natasha Ramirez, CPPB

State Purchasing Officer II

Executive Ethics Commission | William G. Stratton Building

Address: 401 South Spring Street, Suite 318 | Springfield, Illinois 62706

Phone: 217.299.4673

TESTIMONY

Anyone wishing to testify, please notify the HEARING OFFICER by 4:00 pm, Monday, May 12, 2025, of your desire to testify.

PROPOSED CONTRACT(S) SUBJECT OF THIS HEARING

Agency: CDB

Vendor: The George Sollitt Construction Company

Description: Construct Student Services / Adult Education Center Waukegan Campus

Project Number: 810-056-024

Sole Source Justification Form

Bulletin Reference Number

810-056-024

Requesting Agency/University

Capital Development Board

Sole Source Justification Form - Part I

Section I - General Information

Department/Bureau/Section: Capital Development Board-Construction

Need Identified Date: Mar 11, 2024

Supply/Service Need By Date: Jun 1, 2025

Project Title: Construct Student Services / Adult Education Center Waukegan Campus

Vendor: The George Sollitt Construction Company

Provide a description of the supplies or services required: Contractor needs to complete the Building Commissioning Procedures and Project Close-out of the Student Services/ Adult Services Center.

Value: Estimated

Value of Initial Term, this Change Order or Amendment: 645,820.69

Will this Sole Source amend a Professional or Artistic Services contract? ☐ Yes ☒ No

*Sole Source may not be used for amendments for Professional or Artistic Services if the amendment would increase the value by more than 5% of the initial award or extend the term by more than 60 days.

Type: New Sole Source

Section II - Proposed Term

☐ One-Time Purchase ☒ Term Contract

Estimated Contract Begin Date: 6/1/2025

Estimated Contract End Date: 6/1/2026

Number of Potential Renewals: 0

Length of Each Renewal in Months: 0

Total Value of All Renewals: 0

If a Term Contract, does the term, including renewals, exceed 12 months? ☐ Yes ☒ No

Section III - Funding Source

Select the type of funding to be used (Check all that apply): ☒ State Appropriate Funds ☐ Federal Funds ☐ Other (Explain):

Section IV - Sole Source Justification

This purchase is economically only available from a single source **primarily** because it is: (If "Other" explain in one sentence)

Pursuant to 44 ILL Adm Code 8.2025 b)5), contract has expired, but the supplies or services have not been fully received.

Are there secondary justification(s) for this sole source? ☐ Yes ☒ No

Section V - Purchase History

Has the Agency or University Purchased these supplies or services in the past? ☐ Yes ☒ No

Section VI - Business Rationale

1. Provide a detailed explanation of the need for the supplies or services:

Contract expired with Building Commissioning and Project Closeout at the Student Services / Adult Education Center not yet completed. AE has provided memorandum validating this base scope work remains to be performed.

Sole Source Justification Form

Bulletin Reference Number

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2. Provide a list and describe in detail the specifications required to satisfy the need:

Contract needs to be established to complete Building Commissioning and Project Closeout.

3. Provide detail explaining the justification selected in Section IV to explain why the requested supplies or services are the only ones available that can satisfy the agency or university requirements?

Contractor has previously established contract that expired, new contract needed to keep warranties valid after completion.

4. 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:

Contractor has the warranties and subcontractor contracts to complete this project as originally intended.

5. Has the Agency or University considered alternative supplies or services to satisfy their need? ☐ Yes ☒ No

5a. If no, why weren't alternatives evaluated?

6. Are there resellers or distributors?

☐ Yes ☐ No ☒ N/A

7. What efforts were made to get the best possible price (i.e. did the agency/university negotiate) and how did you determine the price for this purchase is considered fair and reasonable?

Project was originally competitively bid to the general public, and, and the contractor was determined to be the low, responsive builder.

8. Will this purchase obligate the State to this vendor for future purchases such as maintenance, licensing or continuing need?

☐ Yes ☒ No

9. What will be the financial or other impact to the State if this sole source is not approved and a competitive bid is required?

Project will remain stopped, and all Building Commissioning needed to complete the construction and Project Close-out will not be completed.

10. Is there any additional information you would like to add to justify this sole source?

Original contract expired due to lack of reminders from the AS-400. The contractor's contract end date wasn't input into the system.

Sole Source Justification Form

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Section VII

Requesting Department Signature Required

I know and understand the contents of this Sole Source Justification and attest that all statements are true and correct and the fairness and reasonableness of the price was adequately confirmed.

Requesting Department Representative

Mark Jones

Digitally signed by Mark Jones
Date: 2025.05.02 09:40:58 -05'00'

Phone Number

312-814-8806

Date

5/2/2025

Printed Name

Mark Jones

E-mail Address

mark.jones2@illinois.gov

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 the fairness and reasonableness of the price was adequately confirmed. (All prior form fields will lock once this e-signature is completed)

Agency Bureau/Division Head or University
Purchasing Director and Not a Designee

Timothy E.
Patrick

Digitally signed by Timothy
E. Patrick
Date: 2025.05.05 10:42:56
-05'00'

Phone Number

217-782-0601

Date

May 5, 2025

Printed Name

Timothy E. Patrick

E-mail Address

tim.patrick@illinois.gov

SPO Approval and Signature Required

☒ I have reviewed and understand the contents of this Sole Source Justification and agree with the State Agency or University determination.

☐ I have reviewed and understand the contents of this Sole Source Justification and do not agree with the State Agency or University determination. As a result, the State Agency or University must explore other sourcing methods to satisfy their need.

State Purchasing Officer Signature

GERALD STEVEN
BURLINGHAM

Digitally signed by GERALD
STEVEN BURLINGHAM
Date: 2025.05.05 10:49:16 -05'00'

Phone Number

217-836-0185

Date

May 5, 2025

Printed Name

Gerald S. Burlingham

E-mail Address

gerald.burlingham@illinois.gov

Sole Source Justification Form

Bulletin Reference Number

810-056-024

Requesting Agency/University

Capital Development Board

Sole Source Justification Form - Part II

Section I - General Information

Project Title

Vendor

Initial Date of Procurement Bulletin Posting

Was a Sole Source hearing held per 30 ILCS 500/20-25?

☐ Yes - Complete Section II and III below (Section II will only be visible when this option is selected)

☐ No - Section II not required, go to Section III below

Section III - CPO Approval and Signature Required

☐ Based on my review, I authorize the Agency/University to proceed in accordance with the published Notice referenced above.

☐ Based upon my review, I authorize the Agency/University to proceed with the following Changes.

☐ Based on my review, the Agency/University is not authorized to proceed with this sole source as presented and my recommendation is that it be cancelled.

☐ Other

CPO Signature

CPO Phone

Printed Name

Date

CPO E-mail