

CHIEF PROCUREMENT OFFICE

Capital Development Board

HEARING CANCELLED

No requests for comments were received.

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: February 6, 2025 TIME: 2:00PM

VIDEO LOCATIONS: WebEx call-in information

Join from the meeting link:

https://illinois.webex.com/illinois/j.php?MTID=md45bb72abc24ece91e031c88d50da7f1

Webex call information:

+1-415-655-0002 US Toll Meeting number (access code): 2867 512 2705

HEARING OFFICER

NAME: Thaddeus Wilkins

ADDRESS: 160 N LaSalle Street, Suite C1010, Chicago, Illinois 60601

PHONE: 312-802-4562 FAX: 217-558-1399

E-MAIL: Thaddeus.Wilkins@illinois.gov

TESTIMONY

Anyone wishing to testify, please notify the HEARING OFFICER by 4:00 pm, Monday, February 3, 2025, of your desire to testify.

PROPOSED CONTRACT(S) SUBJECT OF THIS HEARING

Agency: CDB

Vendor: Henson Robinson Company

Description: Upgrade Air Handlers & Chillers at HSB

System Project Number: 830-080-017

	Bulletin Reference Number			Number	830-080-017					
	Requesting Agency/Ur			/University	Capital Development Board					
	ustification Forn eneral Informat							,		
Department/B	ureau/Section:	University of Illinois Springfield								
Need Identified Date:		Jan 21, 2025 Supply/Service Need By Date: Mar 21, 2025]				
Project Title:	Upgrade Air Han	Jpgrade Air Handlers & Chillers at HSB								
Vendor:	Henson Robinso	n Company								
Provide a desc	cription of the su	pplies or serv	vices required:	Upgrade Air	Handlers & Chillers	at HSB				
Value:	Actual		Value of Initial	Term, this Ch	nange Order or Ame	endment:	135,007.99			
Will this Sole S	ource amend a P	rofessional o	r Artistic Service	es contract?	Yes 🔀 No					
•	not be used for amen y more than 60 days.	idments for Pro	fessional or Artistic S	Services if the am	endment would increase	e the value b	y more than 5% of the	initial award	or	
Туре:	New Sole Source	9								
Section II - Pr	oposed Term			_						
One-Time	Purchase 🔀	Term Contr	act							
Estimated Cor	tract Begin Date	: Mar 2	21, 2025							
Estimated Cor	tract End Date:	Dec 3	1, 2025							
Number of Po	tential Renewals:									
Length of Each	n Renewal in Mor	nths:								
Total Value of	All Renewals:									
If a Term Cont	ract, does the ter	m, including	renewals, excee	ed 12 months?	? ☐ Yes 🖂	No				
	unding Source									
			all that apply):	State App	propriate Funds	Federal	Funds Othe	r (Explain):		
	ole Source Justin									
	-				rily because it is:		If "Other" explair	in one ser	itence)	
Critical Chang	es to the Existing	Contract ar	e Necessary and	Best Accomp	plished by the Cont	ract Holde	<u> </u>			
Are there seco	ndary justificatio	n(s) for this s	sole source?	Yes 🔀 N	lo					
Section V - Pu	rchase History									
Has the Agency or University Purchased these supplies or services in the past? Yes No										
	usiness Rational		d for the sure!							
	tailed explanatio			es or services:						
To complete	HVAC install not	operating co	rrectly.							

Version 7.01 Page 1 of 4

Bulletin Reference Number	830-080-017
Requesting Agency/University	Capital Development Board
2. Provide a list and describe in detail the specifications required to satisf	y the need:
HVAC not operating correctly needs additional equipment in order to co	omplete project.
3. Provide detail explaining the justification selected in Section IV to explain available that can satisfy the agency or university requirements?	in why the requested supplies or services are the only ones
Existing contractor has remaining work to perform.	
4. What are the unique features of the supplies or services that are not av specific quantifiable factors/qualifications:	ailable in any other product or by any other vendor? Provide
Existing contractor aware of the issues and installation of new equipment	nt and what needs to be done to complete operation.
5. Has the Agency or University considered alternative supplies or services	s to satisfy their need? Yes No
5a. If no, why weren't alternatives evaluated?	
Existing contractor has remaining work to perform.	
6. Are there resellers or distributors?	
☐ Yes ☐ No 区 N/A	
7. What efforts were made to get the best possible price (i.e. did the agen for this purchase is considered fair and reasonable?	cy/university negotiate) and how did you determine the price
8. Will this purchase obligate the State to this vendor for future purchase	es 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	e is not approved and a competitive bid is required?
Additional costs could be a result of using a different contractor without	prior knowledge of the project.
10. Is there any additional information you would like to add to justify thi	s sole source?
The need for the SSJF is related to the existing contract expiring due to aware of this expiration date, the necessary contract extension RFP wou requesting teh SSJF to allow the remaining work to be completed for the	ld have issued to not tallow the contract to expire. We are

Version 7.01 Page 2 of 4

Bulletin Reference Number				830-080-017					
	Requesting Agency/University Capital Development Board								
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 Dep	partment Representative	Daniel Johnson Digitally signed Date: 2025,01.2	by Daniel Johnson 1 15:35:49 -06'00'	Phone	Number	217-720-0315	Date	Jan 21, 2025	
Printed Name	Daniel Johnson		E-mail	Address	Daniel.I	P.Johnson@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 Date: 2025.01.21 18:16:17 Octoor Phone Number Phone Number 217-782-0601 Date Jan 21, 2025									
Printed Name	Timothy E. Patrick		E-mail Ac	ldress	tim.patric	k@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	a Otticar Signatura	GERALD STEVEN BURLINGHAM Date: 2025.01.22 08	AM P	hone Nu	ımber 21	17-836-0185	Date J	an 22, 2025	
Printed Name	Gerald S. Burlingham		E-mail Ac	ldress	gerald.bu	urlingham@illinois.gov			

Version 7.01 Page 3 of 4

	Bulletin Refere	ence Number	830-080-017				
	Requesting Ag	gency/University	Capital Developn	nent Board			
Sole Source Jus	tification Form - Part II	_					
Section I - Gen	eral Information						
Project Title							
Vendor							
Initial Date of Pr	ocurement Bulletin Posting						
Was a Sole Source hearing held per 30 ILCS 500/20-25?							
Yes - Comple	te Section II and III below (Section II will o	only be visible when this opti	on is selected)				
No - Section	I 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 is that it be c		authorized to proce	ed with this sole	source as presented and my recommer	ndation		
Other							
CPO Signature			CPO Phone				
Printed Name			Date				
CPO E-mail							

Version 7.01 Page 4 of 4