

AGENDA NOTES

Solicitation Name and Number	Self-Contained Breathing Apparatus (SCBA) Purchase Repair & Maintenance (Annual Contract with 4 Options to Renew) ITB No. 20-101219
Procurement Agent	Jenifer G. Chapital
Vendor agrees to renew under the same price, terms and conditions.	Yes
Solicitation Name, Number and Contract Number of expiring/expired contract (If no previous contract, please indicate N/A)	Self-Contained Breathing Apparatus (SCBA) Purchase Repair & Maintenance (Annual Contract with 4 Options to Renew) ITB No. 20-101219 CPA No. 1218886 – Municipal Emergency Services, Inc.
Contract Number, Contractor Name and Award Amount (Include increases and Total Award Amount)	<u>\$1,443,757.20</u>
Amount Spent on Expiring/Expired Contract (If multiple award, List Amount Spent per Contract and include Total Amount Spent)	<u>\$283,269.80</u>
Prime Contractor Information and LSBE – Subcontractor (Prime: Company Name, Owner Name and Title, Number years in business and Number of Years doing business with DeKalb County) (LSBE: LSBE Type (DeKalb or MSA, Participation Percentage, Company Name, Owner Name and Title, Address, Type of Work Provided and Number of years in business))	<u>Municipal Emergency Services, Inc. (MES) (Prime)</u> Thomas X. Hubregsen, President Years in Business: 20 Years Doing Business with DeKalb: 15 LSBE Participation Waived by LSBE Panel
Attachment	UD Contract Renewal Request Form