



## Department of Purchasing and Contracting NON-COMPETITIVE PROCUREMENT REQUEST FORM

Requesting Department: Police Services  
 Department Contact Person: Charles Flood Telephone: 770 724 7470  
 Email: ceflood@dekalbcountyga.gov

Requisition Number: Pending Suggested Supplier: Utility & Assoc.  
 Estimated Amount of Purchase: \$ 3,888,931.50  
 Detailed Description of the Goods or Services to be purchased: 5 year contract Body worn cameras and associated accessories.

**Emergency** (For Emergency Requests, Please check this box and answer all questions below.)

1. Date and Time of Emergency Occurrence: \_\_\_\_\_

2. Please state the nature of the emergency posing a risk to public health, welfare, safety or resources:

\_\_\_\_\_

3. State how the Estimated Amount was determined to be Fair and Reasonable (attach supporting documentation):

\_\_\_\_\_

**Sole Source** (Please check box and answer all of the following completely.)

1. Provide an explanation why the product, service or supplier requested is the only method that can satisfy the requirements. Please explain why alternatives are unacceptable. Be specific with regard to specification, features, characteristics, requirements, capabilities and compatibility. (Attach additional documents, if necessary):

This request covers current body camera equipment worn by sworn personnel as well as accessories that include vehicle connectivity, cloud storage, uniform modification & all accessories. At this time it would be extremely cost prohibitive to remove/replace all required items.

2. Will this purchase obligate us to a particular vendor for future purchases? (Either in terms of maintenance that only this vendor will be able to perform and/or if we purchase this item, will we need more "like" items in the future to match this one?) Explain in detail.

Yes unless the County chooses to completely replace the system and incur what could be substantial costs.

3. Explain the impact to the County or Public if this request is not approved.

Current system/equipment will not be supported and could prevent proper coverage for the safety of all involved.

I hereby request that this non-competitive procurement request be approved for the purchase of the above stated work, material, equipment, commodity, or service.

Department Director (Typed/Printed Name) Mirtha V Ramos

Signature:

Date: 5/7/2021

**Do Not Write Below – for the Department of Purchasing and Contracting Use Only**

Procurement Agent (Typed/Printed Name) Lola Awonusi

Signature:   
Omolola Awonusi (May 11, 2021 15:09 EDT)

Date: May 11, 2021

Procurement Manager (Typed/Printed Name) Delois Robinson

Signature:

Date: May 11, 2021

Approved  Not Approved

Signature: , Director, Department of Purchasing and Contracting

Date: May 12, 2021



# Department of Purchasing and Contracting NON-COMPETITIVE PROCUREMENT REQUEST FORM

Requesting Department: Marshal's Office

Department Contact Person: Nichole Robinson Telephone: 371

Email: nrobinson@dekalbcountyga.gov

Requisition Number: Pending Suggested Supplier: Utility & Assoc.

Estimated Amount of Purchase: \$ 270,930.00

Detailed Description of the Goods or Services to be purchased: \_\_\_\_\_

5 year contract Body worn cameras and associated accessories.

**Emergency** (For Emergency Requests, Please check this box and answer **all** questions below.)

1. Date and Time of Emergency Occurrence: \_\_\_\_\_

2. Please state the nature of the emergency posing a risk to public health, welfare, safety or resources:

\_\_\_\_\_

3. State how the Estimated Amount was determined to be Fair and Reasonable (attach supporting documentation):

\_\_\_\_\_

**Sole Source** (Please check box and answer all of the following completely.)

1. Provide an explanation why the product, service or supplier requested is the only method that can satisfy the requirements. Please explain why alternatives are unacceptable. Be specific with regard to specification, features, characteristics, requirements, capabilities and compatibility. (Attach additional documents, if necessary):

This request covers current body camera equipment worn by sworn personnel as well as accessories that include vehicle connectivity, cloud storage, uniform modification & all accessories. At this time it would be extremely cost prohibitive to remove/replace all required items.

2. Will this purchase obligate us to a particular vendor for future purchases? (Either in terms of maintenance that only this vendor will be able to perform and/or if we purchase this item, will we need more "like" items in the future to match this one?) Explain in detail.

Yes unless the County chooses to completely replace the system and incur what could be substantial costs.

3. Explain the impact to the County or Public if this request is not approved.

Current system/equipment will not be supported and could prevent proper coverage for the safety of all involved.

I hereby request that this non-competitive procurement request be approved for the purchase of the above stated work, material, equipment, commodity, or service.

Department Director (Typed/Printed Name) William Taylor Signature: Chief Marshal William J. Taylor Date: 05/07/21

### Do Not Write Below – for the Department of Purchasing and Contracting Use Only

Procurement Agent (Typed/Printed Name) Lola Awonusi Signature: Lola Awonusi Date: May 11, 2021

Procurement Manager (Typed/Printed Name) Delois Robinson Signature: Delois Robinson Date: May 11, 2021

Approved  Not Approved

Signature: Cathryn Horner, Director, Department of Purchasing and Contracting Date: May 12, 2021