AGENDA NOTES

Solicitation Name and Number	Valve Boxes and Risers (Annual Contract with 2
	Options to Renew)
	ITB 19-101100
D 4 4	
Procurement Agent	Judi Moore
Date Solicitation bid prices expires. (Indicate	November 27, 2019
if vendor has agreed to extend bid	
date/prices. Include new date.)	All vendors agree to extend pricing through March
·	27, 2020.
Solicitation Name, Number and Contract	Valve Boxes and Risers
Number of expiring/expired contract (If no	ITB 15-100542
previous contract, please indicate N/A)	CPA No. 1012670 with F.M. Shelton, Inc.
provious continue, preuse marcute (urz)	CPA No. 1012724 with Fortiline, Inc.
Previous Contract Number, Contractor	\$961,058.00
Name and Award Amount (Include increases	\$\tag{\pi}\$01,030.00
and Total Award Amount)	CPA No. 1012670 with F.M. Shelton, Inc.
and I otal Award Amount)	\$252,600.00 - Initial
	\$232,000.00 - Initial \$31,000.00 - 1 st Renewal
	\$1,000.00 - 1 Renewal \$100,000.00 - CO No. 1
	\$300,000.00 - 2 nd Renewal
	\$683,600.00
	CDA No. 1012724 with Fastiling Inc.
	CPA No. 1012724 with Fortiline, Inc.
	\$77,698.00 - Initial
	\$19,760.00 - 1 st Renewal
	\$100,000.00 - CO No. 1
	\$80,000.00 - 2 nd Renewal
	\$277,458.00
Previous Amount Spent on Expiring/Expired	\$149,459.10
Contract	
(If multiple award, List Amount Spent per	CPA No. 1012670
Contract and include Total Amount Spent)	\$14,482.40 - Initial
	\$22,680.00 - 1 st Renewal
	\$42,310.50 - CO No. 1
	\$0 - 2 nd Renewal
	\$79,472.90
	CPA No. 1012724
	\$10,469.10 - Initial
	\$20,376.90 - 1st Renewal
	\$12,042.70 - CO No. 1
	\$27,097.50 - 2 nd Renewal
	\$69,986.20
Prime Contractor Information and LSBE –	Fortiline Waterworks, Inc Prime
Subcontractor (Prime: Company Name,	Timothy Tysinger, CEO
Owner Name and Title, Number years in	Years in business: 22
business and Number of Years doing	Years doing business with DeKalb: 5
business with DeKalb County)	Type of work: Providing Supplies
business with Delian County)	13pc of work. From the buppines

(LSBE: LSBE Type (DeKalb or MSA,	GFE documentation approved by CPO.
Participation Percentage, Company Name,	
Owner Name and Title, Address, Type of	
Work Provided and Number of years in	
business)	
Attachments	1. Departmental Recommendation Form
	2. Bid Tabulation
	3. Market Survey