AGENDA NOTES

Solicitation Name and Number Sole Source - Purchase of Modular Labs for the Polebridge Wastewater Treatment Plant		
Date Solicitation bid prices expires. (Indicate if vendor has agreed to extend bid date/prices. Include new date.) Solicitation Name, Number and Contract Number of expiring/expired Contract (If no previous contract, please indicate N/A) Previous Contract Number, Contractor Name and Award Amount (Include increases and Total Award Amount) Previous Amount Spent on Expiring/Expired Contract (If multiple award, List Amount Spent per Contract and include Total Amount Spent) Prime Contractor Information and LSBE-Subcontractor (Prime: Company Name, Owner Name and Title, 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, Number of years in business and Previous Business/Contracts and Amounts in DeKalb County)	Solicitation Name and Number	
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* '	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, Number of years in business and Previous Business/Contracts and	President: Joseph Jobe Years in business: 18
	Attachments	Non-Competitive Request Form including Vendor Quote