

# SHELTERED MARKET REVIEW FORM

**Project Title:** LIQUID CARBON DIOXIDE SUPPLY SERVICES **Agency Contact:** Carlos Garcia

This form is to review projects estimated within the Sheltered Market Solicitation threshold ( $\leq$  \$250K fixed or initial term). This form **does not apply** for sole source projects, qualified vendor list projects, or for any federal, state, or other grant-funded projects. Please submit the completed form to [sbcomp@broward.org](mailto:sbcomp@broward.org).

**Type of Contract:** Check the type of contract; include dollar amount and the number of years.

- ☐ Fixed Contract Estimate: \_\_\_\_\_ Year(s) of contract  
☒ Initial Contract Term Estimate: \$200,000 1 Year(s) of contract  
☒ Estimate Including Renewals: \$600,000 3 Year(s) of contract

**Funding Source:** ☒ County ☐ State ☐ Federal ☐ Penny for Transportation

**Type of Purchase:** Check one and include all applicable [NAICS code\(s\)](#).

- ☒ Commodity ☐ Commodity and Service (e.g. supply and install)  
☐ Contract Service ☐ Construction Project (e.g. supply and install, with licensing)

**NAICS CODES:** 325120

**Sole Brand Solicitation:** Is this a Sole Brand solicitation? ☐ Yes ☐ No

If Yes, is there a limited distribution vendor list? ☐ Yes ☐ No If "Yes", **attach a list of sole brand vendors.**

## Supporting Information for Review:

Scope of Work:

The WORK to be performed under this Contract shall consist of furnishing all tools, equipment, software, hardware, materials, supplies, manufactured articles, furnishing all labor, transportation, and services, including fuel, power, water, and essential communications, and performing all work, or other operations required to furnish and deliver Liquid Carbon Dioxide (CO2) for Broward County Water and Wastewater Services. All work shall be in accordance with requirements of the Contract Documents and in compliance with the regulations of public agencies having jurisdiction, including but not limited to, Safety and Health Requirements of the Occupational Safety and Health Administration of the U.S. Department of Labor (OSHA).

Has this commodity/service been previously provided to the County? ☒ Yes ☐ No

List Vendor Name(s) if previously supplied:

AirGas USA, LLC - Master Agreement OPN2119963G1\_1 Non-SBE

## The following documents MUST be attached:

- ☒ Specifications ☒ Insurance Requirements Document from Risk Management  
☒ Licensing Requirements\* ☐ Additional Applicable Supporting Documentation\*\*

\*If Not Applicable, this must be stated in writing; \*\*e.g. Sole Brand/Source Request, Sole Brand Vendors List

## ➡THIS SECTION IS FOR OFFICE OF ECONOMIC AND SMALL BUSINESS DEVELOPMENT USE ONLY◀

Solicit to Sheltered Market\*\*\* ☐ Yes ☒ No (Review for Procurement Preference)

\*\*\*If no SBE vendor applies or this is not awarded from the Sheltered Market solicitation, then:

- ☒ Solicit to **Non-Sheltered Market**. **No goals will apply** to this solicitation.  
☒ **REVIEW FOR PROCUREMENT PREFERENCE**  
☐ Solicit to **Non-Sheltered Market**. **Goals may apply** to this solicitation. Using agency must submit a Request for Goal Assignment Form at that time.

OESBD Approver (Name / Title): Sandy-Michael McDonald, Director, OESBD Date: \_\_\_\_\_

OESBD Approver Signature: SANDY-MICHAEL MCDONALD Digitally signed by SANDY-MICHAEL MCDONALD  
 Date: 2022.06.14 13:33:04 -04'00'