

# SHELTERED MARKET REVIEW FORM

#### Project Title: Runway Rubber and Paint/Striping Removal Services Agency Contact: Lisette Forrest

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

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: <u>248,000</u> <u>1</u> Year(s) of contract

Estimate Including Renewals: \_\_\_\_\_ Year(s) of contract

Funding Source: County	□ State	Federal	Penny for Transportation
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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**: <u>488119</u> 237310 - DTK

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

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

## Supporting Information for Review:

Scope of Work:

The Broward County Aviation Department (BCAD) is seeking a CONTRACTOR to provide services consisting of the removal of accumulated rubber deposits and paint from specific areas of designated asphaltic concrete runway pavement at Fort Lauderdale-Hollywood International Airport (FLL).

Has this commodity/service been previously provided to the County? ■ Yes □ No

List Vendor Name(s) if previously supplied:

Contract BLD2118749B1 - WATERBLASTING.COM

### 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\*\*\* UYes 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): \_\_\_\_\_

Date:

OESBD Approver Signature:	SANDY-MICHAEL MCDONALD	Digitally signed by SANDY-MICHAEL MCDONALD Date: 2021.11.29 15:59:23 -05'00'
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D.T.K.