



TO: Lucho Jaramillo, Purchasing Agent
Purchasing Division

FROM: Richard Waskiewicz, Enterprise Director of Facilities/Maintenance *RAW*
Broward County Aviation Department

SUBJECT: Solicitation No.: OPN2124596B1
Pre-Conditioned Aircraft Air Hoses

Recommended Vendor: AGSA, LLC dba PAGE GSE
 Recommended Group(s)/Line Item(s):
 Initial Award Amount: \$ 685,284.00 Potential Total Amount: \$ 1,142,140.00
 Initial Contract Term: Three Years Contract Term, including Renewals: Five Years

CONCURRENCE:

The agency has reviewed Vendor's response(s) for specification compliance and Vendor responsibility, which includes license requirements (if applicable). I have reviewed all documents including the Vendor Questionnaire and after careful evaluation, I concur with recommendation for award to the Vendor.

FINANCIAL BACKGROUND/D & B REPORT: (check one)

I am satisfied with the Vendor's financial background and/or rating and payment performance.
 Not applicable Provide explanation if choosing this option

LITIGATION HISTORY: (check one)

I have reviewed the Litigation History Form and there is no issue of concern.
 Refer to additional information from the Office of the County Attorney to address an issue/concern.

PAST PERFORMANCE: (check all that apply)

I have reviewed the Vendor's past Performance Evaluations in ContractsCentral and:

Vendor received an overall rating ≥ 2.59 on all evaluations.
 No evaluations within the past three years contained any items rated a score of 2 or less.
 Vendor received a rating ≤ 2.59 on an evaluation(s). Refer to additional information.
 Vendor received a score of ≤ 2 on an individual item(s). Refer to additional information.
 Past evaluations are not relevant to the scope of this contract.
 No past Performance Evaluations exist in ContractsCentral.

AND

Reference Verification Forms are attached.

OR

Reference Verification Forms are not required: Commodity only purchase (less than \$250,000); Service less than \$100,000 and the Vendor has a Performance Evaluation within the past three years.

NON-CONCURRENCE:

I do not concur. Detailed reason for non-concurrence is attached, including the reference to any bid requirement.

TYPED NAME OF SIGNER: Lisette Forrest TITLE: Contract/Grant Administrator Senior
 (Individual authorized to administer the contract.)

SIGNATURE: Lisette Forrest Digitally signed by Lisette Forrest Date: 2022.08.10 14:34:49 -04'00' DATE: 8/10/22



Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: OPN2124596B1 - Pre-Conditioned Aircraft Air Hoses

Reference for (Name of Firm): AGSA, LLC dba PAGE GSE

Organization/Firm Name providing reference: Allegheny Airport Authority, PIT

Contact Name: David Collins Title: Purchasing

Contact Email: dcollins@pitairport.com Contact Phone: (412) 472-5802

Name of Referenced Project: GPU Cables, PCAir Products & Bag chutes

Contract No. Contract # 3675 Contract Amount: 350,000.00

Date Services Provided: 2016 to present

(list date range or date services began until "current")

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor
 Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

Provider of PC Air hoses, power cords, cord heads, baggage slides

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)
 Page is a very reliable vendor. I have worked with them for several years and I'm very satisfied with their level of expertise, knowledge, customer support, and the products they provide.

References Checked By
 Name: Lisette Forrest Title: Contract/Grant Administrator Senior

Division/Department: BCAD Maintenance Division Date of Verification: 8/10/2022



Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: OPN2124596B1 - Pre-Conditioned Aircraft Air Hoses

Reference for (Name of Firm): AGSA, LLC dba PAGE GSE

Organization/Firm Name providing reference: City of Charlotte

Contact Name: Rick Grice

Title: Lead Loading bridge Technician

Contact Email: john.grice@cltairport.com

Contact Phone: (704) 361-0550

Name of Referenced Project: GPU Cables, PCAir Products & Bag chutes

Contract No. Contract # 2022000627

Contract Amount: 300,000.00

Date Services Provided: 5/2022

(list date range or date services began until "current")

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

Supplier of Page PCA hoses and PBB bagshutes

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

Page has always delivered quality products and anytime we have had questions or concerns they have always been right there to answer any questions and have resolved issues very quickly. We have been replacing all of our PCA hoses and Bagshutes to Page products.

References Checked By

Name: Lisette Forrest

Title: Contract Administrator Senior

Division/Department: BCAD Maintenance Division

Date of Verification: 08/10/2022



Vendor Reference Verification Form for Bids and Quotes

Broward County Solicitation No. and Title: OPN2124596B1 - Pre-Conditioned Aircraft Air Hoses

Reference for (Name of Firm): AGSA, LLC dba PAGE GSE

Organization/Firm Name providing reference: Greater Toronto Airport Authority

Contact Name: Ainslie Baillie Title: Purchasing

Contact Email: Ainslie.Baillie@gtaa.com Contact Phone: (416) 776-3090

Name of Referenced Project: GPU Cables, PCAir Products & Bag chutes

Contract No. GTAA # 2056763 Contract Amount: 1,000,000.00

Date Services Provided: 2017 - present

(list date range or date services began until "current")

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

GPU Cables, PCAir Products & Bag chutes

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

Wonderful to work with. Delivery is always on time. No issues with back orders. Highly recommended.

References Checked By

Name: Lisette Forrest

Title: Contract Administrator Senior

Division/Department: BCAD Maintenance

Date of Verification: 08/10/2022