

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 **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.

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: 248,000 1 Year(s) of contract
☐ Estimate Including Renewals: _____ 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: 488119 237310 - DTK

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 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***** ☐ 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): _____ Date: _____

OESBD Approver Signature: SANDY-MICHAEL MCDONALD Digitally signed by SANDY-MICHAEL MCDONALD
 Date: 2021.11.29 15:59:23 -05'00'