



COOPERATIVE PURCHASING JUSTIFICATION AND APPROVAL FORM

In accordance with Division 12 of the Fulton County Purchasing Code the Purchasing Agent may enter into an agreement with any public procurement unit for the cooperative use of supplies or services; and, may procure supplies, services or construction items through contracts established by purchasing division of the state where such contract and contractors substantially meet the requirements of the Purchasing Code. Please complete the form below to request that the Purchasing Director review the spending unit's request to engage in cooperative purchasing.

Requesting Department/Agency: Real Estate and Asst Management

Department/Agency Contact Information: Joseph N. Davis, Director, (404) 612-3776

Cooperative Contract Number and Title: OMNIA Partners Contract #R240901, HVAC Solution

Estimated Contract Spend: \$150,000.00

Contract Source (Identify the source of the cooperative contract by checking the appropriate box):

- | | |
|--|---|
| ☒ Public Cooperative Entity (Ex: NASPO)
List cooperative entity: _____ | ☐ State of Georgia Statewide Contracts
(Department of Administrative Services) |
| ☐ Federal Government (Ex: GSA contract) | ☐ Other Governmental Entity
(Ex: City of Atlanta)
List Government Entity: _____ |

Verification Requirements

In order to utilize the cooperative purchasing, statewide or GSA contract, the User Department/Agency must provide justification for the use of the cooperative purchase and why the particular cooperative contract is most advantageous to the County as it relates to price and other factors.

1. Provide justification for the use of the cooperative purchase. Utilizing this contract would provide HVAC Full-Service Maintenance and Repairs to major HVAC mechanical systems and equipment for five (5) of nine (9) selected Fulton County facilities: East Roswell Library, Juvenile Justice Center, 4700 North Point, Central Library, and Medical Examiners building. This is beneficial because, as early as 2006, Fulton County has approved supplementing DREAM in-house staff by contracting the expertise and skills required to provide continued extensive HVAC full-service maintenance and repairs at selected County facilities due to insufficient in-house staff to perform these services.
2. Provide an explanation regarding the cost analysis conducted and why utilizing this contract is best value and advantageous to the County.
 - a. Leveraging benefits of volume purchasing and competitively priced HVAC products
 - b. Volume discounts and competitive discounts off list price
 - c. Service delivery requirement advantages, such as providing 24/7 emergency response
 - d. Licensed to do business in all 50 states.
3. Provide documentation verifying that the cooperative, statewide or GSA contract is current and awarded through a competitive process.
4. Provide a copy of the cost proposal/quote received.

TO BE COMPLETED BY THE DEPARTMENT OF PURCHASING REPRESENTATIVE:

DOES THE SOLICITATION MEET THE REQUIREMENTS	YES	NO
Reviewed the justification provided by the requesting department/agency and determined that the use of the cooperative purchase/statewide/GSA Contract is justified.	☐	☐
Reviewed the cost analysis provided and determined that the use of the cooperative purchase/statewide/GSA Contract is best value and/or advantageous to the County:	☐	☐
Reviewed the documentation provided and obtained a copy of the contract, solicitation documents, award letters, etc., to verify that the cooperative, statewide or GSA contract is current and was awarded through a competitive process.	☐	☐
The use of the contract meets the needs of the requesting department/agency.	☐	☐
The proposed contracting entity is authorized to conduct business in the State of Georgia.	☐	☐
If applicable, the contracting entity must comply with the Georgia Security and Immigration Act (E-Verify). A copy of the Georgia Immigration and Security Contractor Affidavit is obtained from the contracting entity.	☐	☐
If federal funded, documented that the contracting entity is not on the Excluded Parties List System (EPLS) that identifies those parties debarred, suspended, proposed for debarment, excluded or disqualified under the non-procurement rule, or otherwise declared ineligible from receiving federal contracts, certain subcontracts, and certain federal assistance and benefits.	☐	☐
Obtain Certificate Insurance requirements based on the coverage and limits included in the cooperative purchase/statewide/GSA contract. The County must be the Certificate Holder, Add'l Insured and Subrogation boxes should be marked.	☐	☐

Purchasing Representative Recommendation:

I have reviewed the items on the above checklist for this solicitation and the request

☐

meets the requirements

☐

does not meet the requirements

(Ensure that backup documentation has been scanned/saved into folder for this request)

(CAPA/APA) Purchasing Agent _____ Date_____

Chief Purchasing Agent _____ Date_____