



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 Asset Management

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

Cooperative Contract Number and Title: SWC90816, Motor Vehicle Maintenance & Inventory

Estimated Contract Spend: \$955,000.00

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 will benefit the County by providing specialized trained mechanics and technicians since DREAM does not have the adequate staffing, equipment, or resources to conduct repairs or preventative maintenance in the heavy equipment category. Vehicles in the heavy and specialized equipment category requires specialized trained mechanic technicians and equipment or requires repairs that only be performed by a factory authorized vendor.
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 vehicle program enrollment fees, cut 23% over previous contract
 - b. Reduced prices for repetitive/routine services over previous contract i.e. oil changes reduced to avg \$28
 - c. Enhanced program includes inventory management for non-program vehicles for low price of 27 cents per vehicle/month
 - d. Cost-effective vehicle administration and maintenance management services through a comprehensive network of commercial maintenance repair locations throughout the state.
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_____