

SHELTERED MARKET REVIEW FORM

Project Title: Baggage Carousel Replacemen	Hard Age	ency Contact: Stac	y Seibert
This form is to review projects estimated wit initial term). This form <u>does not apply</u> for federal, state, or other grant-funded projects	sole source p		resident and the contract of the second sector of the contract
TYPE OF CONTRACT:			
Fixed Contract Estimate: \$			Estimate: \$42,000.00 ial term, not including renewals)
TYPE OF PURCHASE: Check one and inclu	de the applic	able NAICS code	(s):
✓ Commodity	☐ Commo	odity and Service (ex. supply and install)
☐ Contract Service	☐ Constr	uction Project (ex.	supply and install, with licensing)
NAICS CODES ¹ : 423840 http://www.census.gov/eos/www/naics			
SOLE BRAND SOLICITATION: If this is a Sole If yes, attach a list of sole brand vene		ition, is there a lim	ited distribution vendor list?
SUPPORTING INFORMATION FOR REVIEW	:		
Scope of Work: Maintenance and repair parts the airport.	for our bagga	ge carousel which	is essential to the operation of
✓ Yes No Has this commodity/service	s been previo	usly provided to t i	ne County?
List Vendor Name/Names if previously suppl UNIFIED SUPPLY	ed:		
ATTACH ANY SUPPORTING D	OCUMENTAT	ON / INFORMATION	ON TO THIS FORM
This Section to be completed by Office of Eco	nomic and Sm	all Business Devel	opment only:
Solicit to Sheltered Market** Yes No	-		
**If no SBE yendor applies or this is not award	led from the S	heltered Market s	olicitation, then:
Solicit to Non-Sheltered Market.			
 Solicit to Non-Sheltered Market. Request for Goals at that time 		ply to this solicitat	ion. Using agency must submit a
Approved by:		1 /	- ///
Print Name and Title:	d Small Dusin	Dain / d	Date:
Office of Economic ar	u əman busine	233 Development	BIR