




TO: Felicia McRae, Purchasing Agent
Purchasing Division
FROM: Scott Brunner, P.E., Director  6-6-18
Traffic Engineering Division
SUBJECT: Solicitation No.: OPN2115816B1
Street Light Luminaires

Recommended Vendor: The Tools Man, Inc.
Recommended Group(s)/Line Item(s): All Items (1 - 7)
Initial Award Amount: \$289,082.50 Potential Total Amount: \$867,247.50
Initial Contract Term: One Year Contract Term, including Renewals: Three Years

CONCURRENCE:

The agency has reviewed Vendor's response(s) for specification compliance and Vendor responsibility. 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 Payment will be provided upon receive of materials.

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 Contracts Central 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 Contracts Central.

AND

- Reference Verification Forms are attached.


OR

- Reference Verification Forms are not required: Commodity only purchase (less than \$250,000); Service less than \$50,000 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.

TYPED NAME OF SIGNER: Scott Brunner TITLE: Director
(Individual authorized to administer the contract.)

SIGNATURE:  DATE: 6/6/2018



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115816B1 Street Light Luminaires
 Reference for: (Name of Firm) The Tools Man Inc.
 Organization/Firm Name providing reference: American Airlines Arena
 Contact Name/Title: Jackie Ventura
 Contact E-mail: jventura@heat.com
 Contact Phone: 786-777-1125
 Name of Referenced Project: Sell Industrial Lighting, Bulbs and other Industrial Supplies
 Contract No. n/a
 Contract Amount: \$120,430.18
 Date Services Provided: 10/15 thru 05/18

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

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

Description of services provided by Vendor:
 Vendor provided luminaire lights .

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
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				
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 type="checkbox"/>	<input checked="" type="checkbox"/>
3. Timeliness of:				
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)
 N/A

References Checked By
 Name: Jay Basail Title: Sr. Contract Grants Administrator
 Division/Department: Traffic Engineering/ Public Works Date of Verification: May 17, 2018



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115816B1 - Street Light Luminaires

Reference for: (Name of Firm) The Tools Man Inc.

Organization/Firm Name providing reference: Broward County Water Wastewater Services

Contact Name/Title: Gary Hew

Contact E-mail: Ghew@broward.org

Contact Phone: 954-847-2720

Name of Referenced Project: Heavy Machinery, Lifts, Water Meters, many others

Contract No. Y1422006B1

Contract Amount: \$1.8M

Date Services Provided: 01/2011 till Current

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

Vendor's role in Project: Prime Vendor Sub-consultant/Sub-contractor

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

Description of services provided by Vendor:

Purchases pumps and water meters.

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
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				
a. Staff expertise	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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)

N/A

References Checked By

Name: Jay Basail

Title: Sr. Contracts Grants Administration

Division/Department: Traffic Engineering/ Public Work

Date of Verification: May 16, 2018



Vendor Reference Verification Form

Broward County Solicitation No. and Title: OPN2115816B1 Street Light Luminaires
 Reference for: (Name of Firm) The Tools Man Inc.
 Organization/Firm Name providing reference: Leibherr Cranes
 Contact Name/Title: Katerin Rangel
 Contact E-mail: katerin.rangel@liebherr.com
 Contact Phone: 305-817-7500
 Name of Referenced Project: Tools and Supplies
 Contract No. n/a
 Contract Amount: 26,308
 Date Services Provided: 01/01/17 thru 12/31/17

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

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

Description of services provided by Vendor:
Tools and industrial supplies.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
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				
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 type="checkbox"/>	<input checked="" type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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)
Vendor is responsive and never experienced any issues.

References Checked By
 Name: Jay Basail Title: Sr. Contract Grants Administrator
 Division/Department: Traffic Engineering / Public Works Date of Verification: May 15, 2018