

METHOD OF SOURCE SELECTION  
Waiver for Non-Competitive Procurement

180495B

NOTE TO PREPARER

The purpose of this form is solely for the department to justify why the requested purchase, over \$5,000, is not being competitively quoted or bid. Signature by the Procurement Manager or their designee on this form indicates only agreement as to the reasonableness of the specified selection method justified herein; it is not authority to make the purchase.

Department is required to route any contracts through City Attorney and Risk for the respective approvals.

CHECK ONE OF THE FOLLOWING:  Initial MOSS  Revised MOSS (state reason(s) for revision): \_\_\_\_\_

DATE: 2/27/2019 DEPARTMENT: Fire Rescue DIVISION: Operations  
CONTACT: Michael Steele EXTENSION: 8459

PURCHASE/PROJECT AMOUNT: \$765,499.94 COST TERM: \_\_\_\_\_ (annual, quarterly, etc.)

ONE-TIME, SINGLE PURCHASE  
 CONTRACT/PURCHASE ORDER/AGREEMENT/PROJECT TERM BEGIN/END DATES: \_\_\_\_\_ / \_\_\_\_\_

COMMISSION APPROVAL REQUIRED (OVER \$100,000):  No, per Procurement Policy # \_\_\_\_\_  Yes, date: 3-21-19  
Procurement Policy link: <http://www.cityofgainesville.org/Portals/0/bf/Procurement%20Policy%20Resolution%20170116-adopted%202017-07-06.pdf>

DESCRIPTION OF THE MATERIAL OR SERVICE TO BE PROVIDED: Zoll Caridac Monitors

VENDOR NAME: Zoll Medical Corporation  
ADDRESS: 269 Mill Rd  
CITY, STATE, ZIP: Chelmsford, Massachusettes 01824-4105

Vendor is already in Financial System -- VC0000100451 and  Vendor Active Status is "Active"

Check one of the following selections:

Other Agency<sup>1</sup>  Professional Services<sup>2</sup>  Continuing Contracts<sup>2</sup>  Sole Source<sup>2</sup>  Specified Source<sup>2</sup>


Note: For an Emergency Purchase complete the stand-alone *Emergency Purchase Request* form

<sup>1</sup>Attach required documentation (ITB, Bid Record, Awarded Response, Complete Contract, and an executed "bridge agreement" or email from legal if not required, etc.)  
<sup>2</sup>Refer to respective Procurement Policy for more information. Written detailed justification is required for these selections: (Please be specific) Zoll Medical is the current provider of cardiac monitor defibrillators for the City of Gainesville Fire Rescue. It is critically important to maintain inter-operability between GFR and ACFR our primary response partner to deliver uninterrupted patient care. The inter-operability of equipment will decrease the need for device adaptors and allow for lower cost supply replacment.

Certification/Statement of Need:

The Requester hereby certifies that this proposed waiver of non-competitive procurement is based upon an objective review of the required product/service and appears to be in the best interest of the City. I know of no conflict of interest on my part or personal involvement in any way with this request or entity selected. No gratuities, favors or compromising action have taken place. Neither has my personal familiarity with particular brands, types of equipment, materials or firms been a deciding influence on my request to waive competitive bidding on this purchase if other suppliers are known to exist.

Requester: Michael Steele  3/12/19  
Printed Name/Signature Date

Department (Division) Head: JoAnne Rice   
Printed Name/Signature Date

Procurement Manager or Designee: \_\_\_\_\_  
Printed Name/Signature Date