# **Procurement Method Report**

# **Sole Source / Inadequate Competition**

Use this form for Procurements (purchases/orders) that are Sole Source or Inadequate Competition.

Recipients shall accomplish <u>three (3)</u> requirements with this form: (1) identification of procurement method, (2) SAMS check, and (3) certification signature. (Project Manager's signature is adequate certification that competition was done, and that the recipient is complying with the most stringent procurement procedures-whether federal, state, or local).

Note: this is not the same as a purchasing contract, if using a purchasing contract please use the appropriate form.

Depai	tment/Project	:Skagway Police	e Department/ Purcha	se of Portable	radios		
Grant	Name: USDA F	orest Service Secure R	ural Schools Title III Funding	Grant CFDA #:_	2 I		
This m	ay include multiple	od (per each Purcha invoices for each purchase equires Borough Manager a	or order.				
Sole	Source/Inadequat	te Competition					
Vend	Particular Company of the Company of	ProComm Alaska (Motorola Solu	tions)				
	ase Amount:	\$39.518.15		1			
docur consis	Justification for Vendor Selection – Provide justification for Vendor Selection in the below box. Please include any written supporting documents providing justification for vendor selection. Explanations of exemptions must contain findings of fact. Evidence must be included, consisting of material facts sufficient to independently determine that the findings of fact listed are true and accurate. Factual evidence may consist of written documents, records, supporting data, affidavits, or other information proving that the findings of fact are true and accurate. Itemized listings of findings of fact and material factual evidence should be included or attached.						
patrol			Products for Alaska. The Radios will be s will replace the returned radios that				
Syste			s) report is required for se	lected vendor			
	SAMS Report is a	Mandatory Action					
	Check System for Award Management (SAM) for debarment/suspension.						
$\square$	2. Print SAMS report page and attach to this form.						
Certi	fication						
I certify	the above informatio	n is true and accurate. Docur	nents related to this procurement are o	on file and available upon r	equest.		
	In R	Mi	04/06/2023				
Project	Manager's Signature	)	Date				
Jerry	Reddick Chief Of	f Police					
Printed	Name and Title						
	C.	themit aigued form with acres	auting decomposts to Develop Manag	var for Assembly supress	,		
	31		orting documents to Borough Manag OR MUNICIPAL OFFICE USE ONLY	jer for Assembly approva			
□ Ap	oproved	Disapproved	Returned for Furthe	r Justification Date			
E STATE OF	rized Representative	mosting minutes) Date:			Date		

# Guidance for Procurement Method

(For reference purposes only)

### Single Source or Non-Competitive Evidence Guide

- Single source requests must be submitted with written evidence to support the request. (SMC 4.05.060 (A.3))
- Examples of subject matter experts as used below could be a **program manager/director**, **division director**, **IT** manager, or other high-level support staff for the program/project.
- Evidence requirements can and will vary from request to request and the below is not intended to be an all-inclusive list.

# Proprietary Product or Service Least Complex

- Written testimony from the Program Manager and/or subject matter expert(s) clearly describing:
  - Their name, title, and experience with the program and why this qualifies him/her to speak authoritatively on the matter.
  - Why the product or service is needed.
  - Why the proprietary product or service is the only one that will work for the program.
  - Quantified potential time and/or cost impacts if the product or service were not purchased, like:
    - Costs to transition to another product that outweigh any potential savings.
    - Investments made in the current product – training, specialized equipment, etc. – that would be lost.
    - Voiding existing equipment warranties or maintenance agreements.
    - Lack of compatibility.
  - Why using a competitive process is not practical.
- Written testimony from the vendor clearly describing:
  - o They are the only source of the proprietary product or service.
  - They do not offer their product or service through dealers or resellers or, if they do, that the pricing through a dealer or reseller would be the same or higher.
- Any documentation and/or records that support an existing agency standard.
- Copies of any previously approved documents directly related to the project.

# Unique Skill/Knowledge

- Documented research that demonstrates why it's not practical to compete the services. Web search results are often used.
- Online or newspaper posting stating the intent to award a single source contract, describing the services, and seeking additional vendors and results.
- Written testimony from the Program Manager and/or subject matter expert(s) clearly describing:
  - Their name, title, and experience with the program and why this qualifies him/her to speak authoritatively on the matter.
  - Why the selected vendor's unique skills and/or knowledge is the best for the program.
  - Quantified potential time and/or cost impacts if a different vendor were selected, like:
    - Impacts to data/research already performed.
    - Taking longer to perform the work.
    - Needing X number of hours to come up to the same level of expertise as the requested vendor, costing the state Y amount more.
  - Why using a competitive process is not practical.
- Written testimony from the vendor clearly describing their unique skill or knowledge and how they came to possess it. (Resume, CV, references, sample work, etc.)
- Written testimony from other vendors or third parties describing their inability to provide the same unique skill or knowledge and/or supporting the requested vendor.
- Copies of any previously approved documents directly related to the project.

# Guidance for Procurement Method

(For reference purposes only)

### Sole Source OR a single vendor response to a non-competitive bid

### Recipients Guidance:

Must obtain Borough Manager & Assembly pre-approval prior to execution of this type contract (regardless of amount)

#### Justification:

Must explain why vendor was chosen by completing Justification block.

#### Procurement Method:

- 1. Before selection of firm or vendor submit copies of solicitation, and response to Borough Manager for review and approval.
- 2. Provide all written supporting documents providing justification of sole source or single vendor selection.
- 3. Send to Borough Manager for Assembly approval prior to purchase.

#### Award

Must be within accordance of the specifications and award criteria in the solicitation to the responsive, responsible bidder and justification of sole source or single vendor selection.

#### Regulations

Alaska Statues, Code of Federal Regulations, Skagway Municipal Code

Alaska Statues, Title 36 Chapter 30

Alaska Administrative Code, Title 2 Chapter 12

- 2 C.F.R. § 200.320 (f): Procurement by noncompetitive proposals. Procurement by noncompetitive proposals is procurement through solicitation of a proposal from only one source and may be used only when one or more of the following circumstances apply:
  - (1) The item is available only from a single source;
  - (2) The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation:
- (3) The Federal awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from the non-Federal entity; or
  - (4) After solicitation of a number of sources, competition is determined inadequate.

Skagway Municipal Code, Title 4 Chapter 5

### SAMS Report is a Mandatory Action

#### Recipient Instruction:

Check the federally debarred/suspended vendors at System for Award Management at <a href="www.sam.gov">www.sam.gov</a> prior to execution of any procurement or contract (regardless of amount).



# PROCOMM ALASKA LLC

Unique Entity ID CAGE / NCAGE Purpose of Registration

MVZECTGMEQY8 3BMZ4 All Awards

Registration Status Expiration Date
Active Registration Jul 26, 2023
Physical Address Mailing Address

2100 E 63RD AVE 2100 E 63RD Avenue

Anchorage, Alaska 99507-2043 Anchorage, Alaska 99507-2043

United States United States

**Business Information** 

Doing Business as Division Name Division Number

 (blank)
 Procomm Alaska, LIc
 (blank)

 Congressional District
 State / Country of Incorporation
 URL

Alaska 00 Alaska / United States www.procommak.com

**Registration Dates** 

Activation Date Submission Date Initial Registration Date

Aug 9, 2022 Jul 26, 2022 Sep 18, 2002

**Entity Dates** 

Entity Start Date Fiscal Year End Close Date

Sep 5, 2000 Dec 31

**Immediate Owner** 

CAGE Legal Business Name

(blank) (blank)

**Highest Level Owner** 

CAGE Legal Business Name

(blank) (blank)

#### **Executive Compensation**

Registrants in the System for Award Management (SAM) respond to the Executive Compensation questions in accordance with Section 6202 of P.L. 110-252, amending the Federal Funding Accountability and Transparency Act (P.L. 109-282). This information is not displayed in SAM. It is sent to USAspending.gov for display in association with an eligible award. Maintaining an active registration in SAM demonstrates the registrant responded to the questions.

#### **Proceedings Questions**

Registrants in the System for Award Management (SAM.gov) respond to proceedings questions in accordance with FAR 52.209-7, FAR 52.209-9, or 2. C.F.R. 200 Appendix XII. Their responses are displayed in the responsibility/qualification section of SAM.gov. Maintaining an active registration in SAM.gov demonstrates the registrant responded to the proceedings questions.

### **Exclusion Summary**

Active Exclusions Records?

No

### **SAM Search Authorization**

I authorize my entity's non-sensitive information to be displayed in SAM public search results:

Yes

#### **Entity Types**

#### **Business Types**

Entity Structure Entity Type Organization Factors

Partnership or Limited Liability Partnership Business or Organization Limited Liability Company

Profit Structure

For Profit Organization

#### **Socio-Economic Types**

Check the registrant's Reps & Certs, if present, under FAR 52.212-3 or FAR 52.219-1 to determine if the entity is an SBA-certified HUBZone small business concern. Additional small business information may be found in the SBA's Dynamic Small Business Search if the entity completed the SBA supplemental pages during registration.

Financial Information				
Accepts Credit Card Payments Yes	Debt Subject To Offset  No			
EFT Indicator 0000	CAGE Code 3BMZ4			

### **Points of Contact**

### **Electronic Business**

2100 E 63RD Avenue **LINDA PETERS, CAO** 

Anchorage, Alaska 99507

**United States** 

LINDA PETERS, CAO/GM 2100 E 63RD Avenue

Anchorage, Alaska 99507

**United States** 

#### **Government Business**

2100 E 63RD Avenue **LINDA PETERS, CAO** Anchorage, Alaska 99507

**United States** 

2100 E 63RD Avenue LINDA PETERS, CAO/GM

Anchorage, Alaska 99507

**United States** 

#### **Past Performance**

2100 E 63RD Avenue **LINDA PETERS, CAO** 

Anchorage, Alaska 99507

**United States** 

Marybeth Wilkinson, ACCOUNTING

COORDINATOR

2100 E 63RD Avenue

Anchorage, Alaska 99507

**United States** 

#### **Service Classifications**

# **NAICS Codes**

Primary **NAICS Codes NAICS Title** 

Yes 443142 **Electronics Stores** 

> **Telecommunications Resellers** 517911

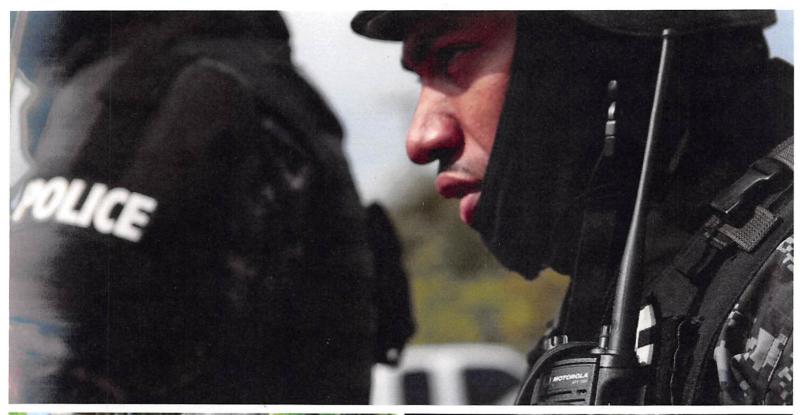
541330 **Engineering Services** 

811213 **Communication Equipment Repair And Maintenance** 

811219 Other Electronic And Precision Equipment Repair And Maintenance

## **Disaster Response**

This entity does not appear in the disaster response registry.







# SKAGWAY POLICE DEPT, CITY OF

**PD APX8000** 03/24/2023

The design, technical, pricing, and other information ( "Information ") furnished with this submission is confidential proprietary information of Motorola Solutions, Inc., or the Motorola Solutions entity providing this quote ( "Motorola ") and is submitted with the restriction that it is to be used for evaluation purposes only. To the fullest extent allowed by applicable law, the Information is not to be disclosed publicly or in any manner to anyone other than those required to evaluate the Information without the express written permission of Motorola.

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03/24/2023

SKAGWAY POLICE DEPT, CITY OF 308 17TH AVE SKAGWAY, AK 99840

RE: Motorola Quote for PD APX8000 Dear James Michels,

Motorola Solutions is pleased to present SKAGWAY POLICE DEPT, CITY OF with this quote for quality communications equipment and services. The development of this quote provided us the opportunity to evaluate your requirements and propose a solution to best fulfill your communications needs.

This information is provided to assist you in your evaluation process. Our goal is to provide SKAGWAY POLICE DEPT, CITY OF with the best products and services available in the communications industry. Please direct any questions to Cheryl Moore at cmoore@procommak.com.

We thank you for the opportunity to provide you with premier communications and look forward to your review and feedback regarding this quote.

Sincerely,

Cheryl Moore

Motorola Solutions Manufacturer's Representative



Billing Address: SKAGWAY POLICE DEPT, CITY OF 308 17TH AVE SKAGWAY, AK 99840 US Quote Date:03/24/2023 Expiration Date:05/23/2023 Quote Created By: Cheryl Moore cmoore@procommak.com 907-563-1176 X 147

End Customer: SKAGWAY POLICE DEPT, CITY OF James Michels j.michels@skagway.org 907-612-0255

Contract: 19860 NASPO 00318

ine #	Item Number	Description	Qty	List Price	Sale Price	Ext. Sale Price
	APX™ 8000 Series	APX8000				
1	H91TGD9PW6AN	APX 8000 ALL BAND PORTABLE MODEL 2.5	5	\$7,108.00	\$5,188.84	\$25,944.20
1a	QA01648AA	ADD: HW KEY SUPPLEMENTAL DATA	5	\$6.00	\$4.38	\$21.90
1b	Q806CB	ADD: ASTRO DIGITAL CAI OPERATION	5	\$567.00	\$413.91	\$2,069.55
1c	Q361AN	ADD: P25 9600 BAUD TRUNKING	5	\$330.00	\$240.90	\$1,204.50
1d	QA00580AA	ADD: TDMA OPERATION	5	\$495.00	\$361.35	\$1,806.75
1e	Q58AL	ADD: 3Y ESSENTIAL SERVICE	5	\$184.00	\$184.00	\$920.00
1f	QA05507AA	DEL: DELETE 7/800 MHZ BAND	5	-\$800.00	-\$584.00	-\$2,920.00
1g	QA05509AA	DEL: DELETE UHF BAND	5	-\$800.00	-\$584.00	-\$2,920.00
1h	Q498AU	ENH: ASTRO 25 OTAR W/ MULTIKEY	5	\$814.00	\$594.22	\$2,971.10
1i	H38BS	ADD: SMARTZONE OPERATION	5	\$1,650.00	\$1,204.50	\$6,022.50



Any sales transaction following Motorola's quote is based on and subject to the terms and conditions of the valid and executed written contract between Customer and Motorola (the ""Underlying Agreement"") that authorizes Customer to purchase equipment and/or services or license software (collectively ""Products""). If no Underlying Agreement exists between Motorola and Customer, then Motorola's Standard Terms of Use and Motorola's Standard Terms and Conditions of Sales and Supply shall govern the purchase of the Products.

Motorola Solutions, Inc.: 500 West Monroe, United States - 60661 ~ #: 36-1115800



_ine #	Item Number	Description	Qty	List Price	Sale Price	Ext. Sale Price
1j	Q629AH	ENH: AES ENCRYPTION AND ADP	5	\$523.00	\$381.79	\$1,908.95
2	PMNN4486A	BATT IMPRES 2 LIION R IP67 3400T	5	\$188.27	\$137.44	\$687.20
3	NNTN8860A	CHARGER, SINGLE-UNIT, IMPRES 2, 3A, 115VAC, US/NA	5	\$169.56	\$123.78	\$618.90
4	RLN6554A	APX WIRELESS RSM W/ DUC US/NA/JP/TW	5	\$324.00	\$236.52	\$1,182.60
Grand Total			\$	39.518.	15(USD)	

# Notes:

 Unless otherwise noted, this quote excludes sales tax or other applicable taxes (such as Goods and Services Tax, sales tax, Value Added Tax and other taxes of a similar nature). Any tax the customer is subject to will be added to invoices.





Signatures (As required)

# Purchase Order Checklist Marked as PO/ Contract/ Notice to Proceed on Company Letterhead (PO will not be processed without this) PO Number/ Contract Number PO Date Vendor = Motorola Solutions, Inc. Payment (Billing) Terms/ State Contract Number Bill-To Name on PO must be equal to the Legal Bill-To Name Bill-To Address Ship-To Address (If we are shipping to a MR location, it must be documented on PO) Ultimate Address (If the Ship-To address is the MR location then the Ultimate Destination address must be documented on PO) PO Amount must be equal to or greater than Order Total Non-Editable Format (Word/ Excel templates cannot be accepted) Bill To Contact Name & Phone # and EMAIL for customer accounts payable dept Ship To Contact Name & Phone # **Tax Exemption Status**