



**Sole Source Request**

**Directions:** Complete the request, attach supporting documentation, sign, and submit to the Procurement and Contract Services Manager for consideration. The information provided should be sufficient to withstand challenges from other vendors, their representatives, City staff and members of the public. The use of brand name descriptions and standardization is the least preferred type of justification. **ONLY TYPED FORMS WILL BE ACCEPTED**

**Definition:** A procurement decision whereby purchases are directed to one source because of standardization, warranty, unique knowledge, significant cost savings, proprietary product, or restricted distribution, even though competitive sources may be available. Issuing a solicitation for goods and or services is not necessary when the Procurement and Contract Services Manager determines and documents the fact that a sole source vendor for the good or service requested is in the best interest of the City.

**IMPORTANT:** Time constraints may not be considered a factor if the requester has not sought competitive bids or proposals in a timely manner.

<b>Requesting Department/Division:</b>	Fire
<b>Requestor Name and Phone:</b>	Kevin McCaw 969-1302
<b>Good/Service to be purchased:</b>	Off-Road Ambulance
<b>Sole Source Request</b>	<p>This sole source request is necessary because (Check all that apply):</p> <p><input checked="" type="checkbox"/> Goods or Services are proprietary and only available from the manufacturer or a single distributor, or service provider (<i>attach sole source letter from manufacturer</i>)</p> <p><input checked="" type="checkbox"/> Based on past procurement experience, it is determined that only one (1) distributor services the region in which the good or service is needed</p> <p><input type="checkbox"/> Goods or services are available at a discount from a single distributor for a limited period of time</p> <p><input checked="" type="checkbox"/> Vendor has significant previous or specialized knowledge on a proposed project that would result in significant monetary and/or time savings in completion of the project.</p> <p><input type="checkbox"/> Maintain uniformity and consistency in an area (e.g. decorative light pole, bench, or other infrastructure), a good must be purchased from a single distributor</p> <p><input type="checkbox"/> Required by Granting Organization (Grant Requirement)</p> <p><input type="checkbox"/> Maintenance/Repair required to maintain manufacturer's Warranty</p> <p><input checked="" type="checkbox"/> Interchangeability with existing equipment</p> <p><input type="checkbox"/> Standardized product – provide copy of approved Standardization request</p> <p><input checked="" type="checkbox"/> Other – provide detailed justification</p>
<b>Supporting Documentation/Information – Attach additional pages as needed</b>	
1. State the need for the purchase of the good or service:	We currently cannot extract patients from off road, remote areas, walking / bike trails. We have had non-breathier and injuries happen in these locations within our City with a full size ambulance.
2. State the information to support the reason the identified vendor is a sole source for the purchase, supporting the box(s) checked above:	They are the only vendor that builds this product. They also hold the only patent on an enclosed off-road ambulance. It helps with environmental (heat, rain, cold) conditions that we are trying to protect patients from, without an enclosed area this is not possible. ASAP is the only one who can provide this. It also helps keep us be compliant with federal privacy practices. ASAP lengthens and modifies the UTV chassis to accommodate a larger rear equipment mounting area and more weight carrying capacity, they are the only manufacture that does this.
3. Describe any other facts that support the request (if any):	Sometimes we need to remove clothing from people to treat injuries this is the only manufacturer and model that gives our patients the privacy and dignity of being transported unseen from the general public.
4. Were other Vendors contacted? List names of vendors.	Yes - Kimtek Corporation, Polaris Government, QTAC, and SuperATV
5. Anticipated Annual Spend:	\$92,500. One time costs with very minimal on going costs.
6. Requested length of time the sole source is needed:	What is the requested length of time requested for the sole source? (Check the one that applies) <input checked="" type="checkbox"/> One-time purchase <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> Until the good or service is replaced or no longer needed by the Requesting Department
7. Vendor's Information Name, Contact, Address, Email, and Phone	Scott Carlisle General Manager Alternative Support Apparatus 5609 Gundy Drive PO Box 556 Midvale Ohio 44653 Scarlisle@asap911.com 740-922-2727



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Statement of Need and Certification: The sole source request is based upon an objective review of the good/service and market availability, and appears to be in the best interest of the City. I know of no conflict of interest on my part. No gratuities, favors or compromising actions have taken place. I hereby certify that this justification is accurate and complete to the best of my knowledge and belief.

P. Michael Snider, Fire Chief
Director/Chief Name

[Signature]
Director/Chief Signature

05.24.2023
Date

-----DO NOT WRITE BELOW THIS LINE-----

Request Declined: The request for a sole source purchase is declined for the following reason(s):

Request may be submitted for consideration once the needed additional information is provided.

Procurement & Contract Services Manager Signature : \_\_\_\_\_ Date \_\_\_\_\_ Request Declined

Sole Source Request Approval: Based on the information provided the sole source request is approved.

The request is good for (time period): until purchase

Goods – proceed with processing of a requisition. Services – a services agreement may need to be negotiated between the Vendor and City before proceeding with the processing of a requisition.

[Signature]
Procurement & Contract Services Manager

5-24-23
Date

\_\_\_\_\_  
City Manager Date

\_\_\_\_\_  
Park Administrator Date

Original to File in Procurement Copy returned to Requestor

Table with 2 columns: Spend Range and Approvals Required. Rows include \$5,000 - \$19,999.99, \$20,000 - \$74,999.99, and ≥ \$75,000.

- It is the only UTV ambulance independently tested by a third party for safety (Transportation Research Center INC 10820 State Route 347 East Liberty Ohio 43319).
o This includes
• Tilt Table
• Slope climbing
• Breaking
• Turning radius
• It is the only UTV ambulance that complies with federal HIPPA regulations.
• With the City hosting more large crowd events it makes it more difficult to get to patients in a timely manner.
o Walking and bike trails are not accessible to full sized ambulances as we have seen with nonbreathier / cardiac events and injuries that have already happened in these locations within our City.
o We currently cannot extract patients form off road or remote areas.
o Large sporting events are crowed and traffic is congested, delaying responses time to critical / injured people. This will help with these events.
o During our downtown events barriers are put in place to protect people from vehicles entering the highly populated areas. But this includes Med units (ambulances) so a more maneuverable unit for transport is needed.