

Operations Memorandum

To:	New Haven Board of Education Finance and Operations Committee
From:	Jamar Alleyne, Executive Director of Facilities Management
Date:	January 26, 2024
Re:	Purchase Order under State Contract 19PSX0002 with New England Pump & Valve Co to rebuild heating loop motor pump at Lincoln Bassett

Answer all questions and have a representative ready to present the details of each question during the Finance & Operations meeting or this proposal may not be advanced for consideration by the full Board of Education.

Company Information						
Vendor Name:	New England Pump & Valve Co					
Doing Business as: (DBA)						
Vendor Address:	36 Industrial Park Rd, Niantic, CT 06357					
Vendor Contact Name:						
Vendor Contact Email:	office@nepv.com					
Is the contractor a minority or women owned small business? No						
Agreement/Contract Information						
New or Renewal Agreeme	nt/Contract? Purchase Order					
Effective Dates: (mm/dd/yy) Multi-yrs. require Board of Aldermen approval	From 2/:	5/2024	То	06/30/2024		
Total Amount: If Multi-yr. include yr. to yr. breakdown	$\times (6.757)00$					
Funding Source Name: Acct. #:						
Contract #: (Local or State)	19PSX0002					



Key Questions:
1. What specific service will the contractor provide:
TO REBUILD BOTH HEATING LOOP MOTOR/PUMP LINCOLN STATE CONTRACT
2. How was the contractor selected? *Attach appropriate supporting documents
□ Quotes
□ Sealed Bid #
□ Sole Source #
□ RFP#
State Contract # 19PSX0002
Exempt Professional Accountant Actuary Appraiser Architect Artist Dentist Engineer Expert Professional Consultant Land Surveyor Lawyer Physician/Medical Doctor
3. If the vendor was selected through Solicitation (Bid/RFQ/RFP) process; answer the following:
a. Please explain how the vendor was chosen? *Attach Vendor Proposal
N/A – State Contract
b. Who were the members of the selection committee? (<i>Minimum 3 members required</i>)
N/A – State Contract



4. If this is a renewal with a current vendor, has the vendor has met all obligations under the existing agreement/contract?

N/A – State Contract

5. If this agreement/contract is a Renewal, has the cost increase? If yes, by how much? *Attach Renewal Letters

 $N/A-State\ Contract$

6. If this new agreement/contract, has cost for service increased from previous years? If yes, by how much?

This is a repair that is being performed, there is no reoccurring fiscal comparison for this type of work.

7. Is this a service that existing staff could provide? Why or why not?

No this is a service that is provided by licensed professionals that are vetted by the state.



Agreement/Contract Processing Checklist

To ensure timely processing of the submitted Agreement/Contract it is imperative to collect and provide all of the required documentation noted below and provide with submission to board.

Forms/Documents are available in: Drive <u>G:\F&O Agenda Minutes\Agreement_Contract_Checklist\2022-2023</u>

1. Has	this vendor performed service(s) in prior fiscal years?		
If	Yes, Vendor # <u>14369</u>		
If No or N	Vendor must provide completed W9		
2. A qu	otes or proposal submitting regarding the agreement/contract.		
If I	RFP Attach Vendor Submitted		
О	ther Copy of State Contract, Quotes, etc.		
	<u>ificates of Liability Insurance (COI) are required for ALL agreements/contracts</u> , rea ollowing and select the applicable Rider.	ıd	
It is the s submissi	submitters responsibility to request the COI from the vendor and attach with fon; the COI from the Vendor <u>must match rider specifications outlined</u> . to obtain or incorrect COIs will be returned for revision and will delay its processing	•	
Rider 300	Professional Services - Onsite Umbrella; w/ Auto; w/ Workers Compensation		
Rider 305	Professional Services – Onsite Umbrella; No Auto; No Workers Compensation		
Rider 310	Professional Services – Onsite Umbrella; w/ Auto; No Workers Compensation		
Rider 315	Professional Services – Onsite Umbrella; w/ Youth under 21		
Rider 320	Professional Services – Offsite; No Auto; No Workers Compensation		
Rider 325	Professional Services – Offsite; No Auto; No Workers Compensation; w/ Youth under 21		
Rider 330	Professional Services – Offsite Attorney; No Auto; No Workers Compensation		
Rider 335	Professional Services – Onsite; Physician/Dentist; No Auto		
Rider 340	Professional Services – Onsite Physician/Dentist w/ Youth under 21		
Rider 345	Professional Services – Onsite Temp Nurses		
Rider 350	Professional Services – Cyber – Onsite		
Rider 355	Professional Services – Cyber – Offsite		
	City of New Haven requires the information requested in the <u>Disclosure Affidavit</u> before any agency, department, or city official seeking agreement/contract shall obtain them, notarized.		
	osures are acceptable.		