

CITY OF MADISON • FINANCE DEPARTMENT • PURCHASING SERVICES

Non-Competitive Selection Request

Date:	06/13/2024
Requisition Number:	24002184 (8 characters)
Requestor Name:	Mark E. Benno
Requestor Phone Number:	608-235-0758
Requestor Email:	mbenno@madisonpubliclibrary.org
Fund:	1200 LIBRARY
Agency:	50 LIBRARY V
Major:	53*** Supplies/Goods
	☐ 541** Utilities ✓ 542** Building/Facility Maintenance/Repair
	543** Software/Equipment Maintenance/Repair
	544** Public Works Maintenance/Repair
	545** Training/HR-Related Services
	546** Consulting/Professional Services
	548** Grants/Loans/Insurance/Other Services
Total Purchase Amount:	\$76,688.00
Vendor Name:	Integral Buiildig Systems (IBS)
Product/Service Description:	Installation of Paging System at Central Library
	\$50,000 and UNDER
	This form will be sent to the Purchasing Supervisor for review.
✓	OVER \$50,000
	Complete this form and draft a resolution using the sample resolutions provided by the City Attorney to your Budget Analyst. Your resolution will
	not be added to the Finance Committee agenda without this form.
Check the box(es) for the excepti	ion criteria you feel are applicable:
1. Public exigency (emer processes.	gency) will not permit the delay incident to advertising or other competitive
2. The services or goods	required are available from only one person or firm (i.e., true sole source).
3. The services are for p	rofessional services to be provided by attorneys.
4. The services are to be	rendered by a university, college, or other educational institution.
5. No acceptable bids ha	ive been received after formal advertising.
6. Service fees are estab	lished by law or professional code.
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	7.	A particular consultant has provided services to the City on a similar or continuing project in the recent past, and it would be economical to the City on the basis of time and money to retain the same consultant.
✓	8.	Otherwise authorized by law, rule, resolution, or regulation. Explain:
		IBS is the City's previously selected cabling vendor.
		rocurement is being paid with Federal or State grant funds, the vendor was identified by name in the roved Grant Application. (OPTIONAL)
REAS	SON	FOR REQUEST
Provio servic uniqu detail	de de ce car le per the l	MPETITIVE SELECTION PROCESS CANNOT BE USED: tailed explanation below. For a true sole source, provide all information to explain why this product or a only be purchased from this vendor. For one-of-a-kind items not sold through distributors, explain the formance features of the product requested that are not available from any other product. For services, unique qualifications this vendor possesses, or other reason(s) that meet the criteria selected above. ecific, measurable factors and qualifications.
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