



City of Orlando
Procurement and Contracts Division
SOLICITATION REQUEST FORM

Date: 11/19/2015	Date Required: 11/19/2015	Date Received in Procurement: 11/19/15 <small>Procurement and Contracts Division Use</small>
Using Agency: Fleet Management		Assigned Purchasing Agent: Lee Donite <small>Procurement and Contracts Division Use</small>
Contact Name: Daryl Greenlee	Contact Title: Fleet Manager	
Contact Phone Number: 407.246.3065	Contact Email Address: daryl.greenlee@cityoforlando.net	

DTJ
11.19.15

Brief Description of Goods/Services Requested: Tire purchases and other related services		
Annual Contract: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> One Time Purchase: Yes <input type="checkbox"/> No <input type="checkbox"/>	Estimated Annual Amount (if Annual Contract): \$ \$1,000,000.00	Estimated Amount (One Time Purchase): \$
Budget Allocation Checked: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Scope/Specification Document Attached: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Vendor List Attached: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Grant Funds: Yes <input type="checkbox"/> No <input type="checkbox"/>	Grant Documentation Attached: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

Division Supervisor Signature: 	Title (Printed) Fleet Manager	Date 11-19-15
Division Manager Signature: 	Title (Printed) Fleet and Facilities Division Mgr.	Date 11/19/15

If you need assistance with any part of this form please call (407) 246-2291. Please forward this above completed form with specifications and vendor list to the Procurement and Contracts Division for review and processing.

Note: When solicitation package is created, it will be returned for your final review and signature below.

FINAL SOLICITATION REVIEW AND SIGN-OFF BY DIVISION MANAGER	
The Solicitation package (Bid / RFP # _____) as prepared by the Procurement and Contracts Division has been reviewed and approved by _____ on the date indicated below: <small>(Name of Using Agency)</small>	
Authorized Signature _____	Date _____