

## City of Orlando Procurement and Contracts Division SOLICITATION REQUEST FORM

	<u> </u>			
Date:	Date Required:			Vac intercollements (14)
3/15/2017	8/1/2017			o Content Evelo) (148
Using Agency:  City Stores City of Orlando				
City Stores, City of Change				
Contact Name: Contact Title:				
David Schaefer Propoerty Control Supervisor  Contact Phone Number: Contact Email Address:				
david.schaefer@cityoforlando.net				
Brief Description of Goods/Services Requested:				
Request piggy back of Contract # 16154 with Applied Industrial				
Annual Contract: Yes No	Estimated Annua	Estimated Annual Amount (if Estimated Ar		
One Time Purchase: Yes No	Annual Contract): 45K	Annual Contract): \$ Purchase): \$		
Budget Allocation Checked:		Scope/Specification Document   Vendor List Attac		
Yes No No	Attached: Yes	Attached: Yes No No		
Grant Funds: Yes No No	B No Grant Documentation Attached: Yes No No			
Division Supervisor Signature:	Title (Print	Title (Printed)		Date
1) Robert	David	David L Schaefer		3/15/2017
Division Manager Signature:	Title (Printe	Title (Printed)		Date
		·		
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 byon the date indicated below:  (Name of Using Agency)				
Authorized Signature Date				
1		_		