



**Town of Davie  
Budget & Finance/Purchasing Division  
AWARD RECOMMENDATION / INTENT TO AWARD**

To: Mr. Osdel Fernandez-Larrea, Interim Public Works Director

From: Procurement Manager Brian K. O'Connor, C.P.M.

Date: 18-Nov-16

RFP/ITB #: B-17-09 Item/Service: Athletic Field Weed & Pest Control

Attached are apparent low bid(s) and a tabulation for subject items/services requisitioned by your department. Please complete the applicable portions of this form in order that proper presentation and recommendations may be made. Please return this form to the Purchasing Division as soon as possible.

**1. PROCUREMENT COMMENTS:**

One bid received - Lake Therapy, Inc.

**2. RECOMMENDATION:**

A. Which bid(s) do you recommend? Lake Therapy, Inc.

B. Does this meet specifications as per your request and as advertised? YES  NO

If No, is the variance considered: MINOR  or MAJOR

Explain:

C. Is the recommendation the lowest bid received? YES  NO

D. List the bids that are low but which you believe DO NOT meet specifications and list reasons why each does not meet specifications; please attach a memorandum of explanation to this form if necessary.

NA

(attach an additional sheet if further comment or explanation is required)

PRINT NAME <u>Osdel Larrea</u> Acting Department Director or designee	SIGNATURE: <u>[Signature]</u> Procurement Manager
SIGNATURE <u>[Signature]</u>	DATE <u>11/21/16</u>
DATE <u>11-18-16</u>	SIGNATURE <u></u> Risk Manager (if required)
	DATE <u></u>

**3. PROCUREMENT ACTION/RECOMMENDATION(S):**

The Purchasing Division has reviewed all submittals and recommends award to the lowest, responsive, responsible bidder(s) which is Lake Therapy, Inc.

**THIS FORM MUST BE COMPLETED AND RETURNED TO THE PURCHASING DIVISION FOR ALL AWARD RECOMMENDATIONS OF \$25,000.00 AND ABOVE.  
FOR AWARD RECOMMENDATIONS REQUIRING COUNCIL APPROVAL, SUBMIT THIS FORM NO LATER THAN THREE (3) WEEKS PRIOR TO THE PUBLISHED COUNCIL AGENDA ITEM DEADLINES FOR PURCHASING ITEMS.**