

**EVALUATION OF BID  
PROPOSALS**

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FOR: CITY HALL ELEVATOR REMODEL

Bid File No.: 3757  
Bid Opening: 7/7/2020

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**BIDDERS**

**TOTAL NET BID AMOUNT**

1. Elevator Industries  
110 Main Ave  
Sacramento, CA 95838

\$1,648,734.00

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Each bidder has agreed to allow the City sixty-four (64) days from date bids are opened to accept or reject their bid proposal. Purchasing requests that you complete the following sections and return this bid evaluation to the Purchasing Unit at the latest by Monday, July 20, 2020 5:00 P.M.

The Budget Allocation for this expenditure is \$890,000. The contract price is 59.77% above the Budget Allocation. If the overage is greater than 10% or only one bid was received, give explanation:

There are a limited number of companies who can perform the work in question in this area. It is also believed that the number of working days gave hesitation to other potential bidders.

**BACKGROUND OF PROJECT** (To be completed by Evaluating Department/Division. Explain need for project/equipment):

The timeworn elevators at City Hall are in need of a modernization and rehabilitation. Maintenance of these elevators passenger elevators and one service/freight elevator has become increasingly more frequent, and substantially more costly as the life expectancy of these units has elapsed. Plans and specifications were developed to change out the machinery in order to give the elevators a safer, more reliable operation as well as modernize the passenger carts to meet the current ADA standards.

**DEPARTMENT CONCLUSIONS AND RECOMMENDATION:**

Award a contract in the amount of \$ \_\_\_\_\_  
to \_\_\_\_\_  
as the lowest responsive and responsible bidder.

Remarks:

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Reject all bids. Reason: The sole bidder was 59.77% over the engineer's estimate.

Department Head Approval



WILLIAM C. HERR, Assistant Director

Title ASST DIRECTOR PWD

Date 7.27.2020

- Approve Dept. Recommendation     Approve Finance/Purchasing Recommendation  
 Disapprove     Disapprove  
 See Attachment

FINANCE DEPARTMENT

CITY MANAGER



08/07/2020  
Date



8/11/2020  
City Manager or Designee    Date



8/10/20  
Finance Director    Date

**FISCAL IMPACT STATEMENT**

**PROGRAM:**

<u>RECOMMENDATION</u>	<u>TOTAL OR CURRENT</u>	<u>ANNUALIZED COST</u>
Direct Cost	_____	_____
Indirect Cost	_____	_____
<b>TOTAL COST</b>	_____	_____
Additional Revenue or Savings Generated	_____	_____
Net City Cost	_____	_____
Amount Budgeted (If none budgeted, identify source)	_____	_____