CONTRACT AWARD SHEET
DEPARTMENT OF PROCUREMENT MANAGEMENT

Bid No. **IQ9218-4/15-2**
Award Sheet

DIVISION

BID NO.: **IQ9218-4/15-2** PREVIOUS BID NO.:
TITLE: **MOBILITY SCOOTERS AND ANNUAL MAINTENANCE**
CURRENT CONTRACT PERIOD: **01/01/2012** through **12/31/2012**
Total # of OTRs: **4**

MODIFICATION HISTORY

Bid No. **IQ9218-4/15-2** *Award Sheet*

DPM Notes

APPLICABLE ORDINANCES

LIVING WAGE: **No** UAP: **Yes** IG: **Yes**

OTHER APPLICABLE ORDINANCES:

CONTRACT AWARD INFORMATION:

Yes Local Preference	**No** Micro Enterprise	**No** Full Federal Funding	**No** Performance Bond
Yes Small Business Enterprise (SBE)	**No** PTP Funds	**No** Partial Federal Funding	**Yes** Insurance

Miscellaneous:

REQUISITION NO.:

PROCUREMENT AGENT: **KM! RA**
PHONE: 305 375-5375 FAX: 305 375-4407 EMAIL: KMRA@MIAMIDADE.GOV

VENDOR NAME: MEDTEK MEDICAL SOLUTIONS LLC
DBA:
FEIN: 142008686 SUFFIX : 02 33122
STREET: 2828 NW 72ND AVE CITY:MIAMI ST: FL ZIP:
FOB_TERMS: DEST-P DELIVERY:
PAYMENT TERMS: NET45 TOLL PHONE: 786-312-9686

VENDOR INFORMATION:

Local Vendor: **Yes**

CERTIFIED VENDOR				*ASSIGNED MEASURES*	
SBE	**No**	Set Aside	**No**	Bid Pref.	**No**
Micro Ent.	**No**	Selection Factor	**No**	Goal	**No**
Other:				*Vendor Record Verified?*	**No**

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Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
MAURICIO ZUNIGA	786-458-8080	786-312-9686	786-458-8088	MZUNIGA@MEDTEK-MS.COM

ITEMS AWARDED Section:

Details:

Item #	Description	Qty	Unit_Price

End of ITEMS AWARDED Section

AWARD INFORMATION Section

BCC Award: **DPM Award:** **No**
BCC Date: **DPM Date:** **12/05/2011**

Contract Amount: $ 10,000.00

Additional Items Allowed: **Agenda Item No.:**

Special Conditions:

BPO INFORMATION Section:

1	**ABCW1200367**

Commodity ID	Commodity Name
470-80	WHEELCHAIRS

Department	Department Allocation
PR	$10,000.00

End of BPO Information Section