

Keith K. Okamoto, P.E.

TO:

DEPARTMENT OF WATER SUPPLY . COUNTY OF HAWAI'I

345 KEKÛANAŌ A STREET, SUITE 20 . HILO, HAWAI'I 96720

TELEPHONE (808) 961-8050 • FAX (808) 961-8657

NOTICE & REQUEST FOR SOLE SOURCE

| - | | | | | | | | |
|---|--|--|----------------------------------|---|--|--|--|--|
| | FROM: Engineering - WOACB Division/Branch Pursuant to §103D-306, HRS, and Subchapter 9, Chapter 3-122, HAR, the Department requests sole source approval to purchase the following: | | | | | | | |
| Description of goods, services, or construction to be procured: | | | | | | | | |
| - 65 | The SimPlate for one year). | for HPC test is an easy, rapid and accur | rate test for HPC (3 each SimPla | ate for HPC pack of 25 every month | | | | |
| | W 1 10 | /C ' D '! N | A 1.3 | 2 A CD | | | | |
| 2. | Vendor / Contractor / Service Provider Name: IDEXX Distribution, Inc. | | Address: PO Box 101327 | 3. Amount of Request: | | | | |
| | IDEAX DIS | tribution, inc. | Atlanta, GA 30392-1327 | \$4031.16 + tax & freight (\$98.42 pack of 25 tests) | | | | |
| 4. | Term of Co From: 01/0 | ntract (shall not exceed 12 months), if a 1/2019 To: 12/31/2019 | pplicable: | 5. Prior Sole Source Ref. #: 18-02 | | | | |

- 6. Describe in detail the following:
- a. The unique features, characteristics, or capabilities of the goods, services or construction.

SEE BELOW

b. How the unique features, characteristics or capabilities of the goods, services or construction are essential for the Department.

Simplate for HPC results correlate to those obtained with plate count agar. SimPlate for HPC is easy to read and less subjective than plate count agar. There is no need for media preparation. In addition, quality control (QC) is simplified with SimPlate for HPC as QC checks are only needed on a per lot basis, and not for daily media batches. With SimPlate for HPC, there is less equipment to purchase and maintain.

... Water, Our Most Precious Resource... Ka Wai A Kane...

The Department of Water Supply is an Equal Opportunity provider and employer.

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| Describe the efforts and results in determining that this is the only vendor / contractor / service provider who ca provide the goods, services or construction: | | | | | | | | |
|---|--|--------------------------|------------------------------|----------------------------|--|--|--|--|
| IDEXX is a wholly owned subsidiary of IDEXX Laboratories, Inc. and is the sole supplier of SimPlate for HPC test kit to the Water Market. | | | | | | | | |
| | | | - | | | | | |
| Alternate Source. De but did not meet the D | | e sources for the go | ods, services, or constructi | on that were investigated | | | | |
| We could not find any o SimPlate for HPC test kit | | s is a patented metho | dology of IDEXX and the | y are the sole supplier of | | | | |
| contract and/or conduc | cting and managing this | | in the approval process as | | | | | |
| Name | Position | | Involvement in | | | | | |
| Mae Kise | Water Microbio | | Approval | Administration | | | | |
| Kurt Inaba | Civil Engineer \ | | Approval | Administration | | | | |
| Rick Sumada | Waterworks Cor | | | Administration | | | | |
| Keith Okamoto | Manager-Chief l | | | ✓ Administration | | | | |
| | - | Water Supply Mae Kise | | | | | | |
| 10. Direct inquiries to: | | 808-961-8670 | | | | | | |
| | Fax Number: | 808-961-8759 | | | | | | |
| 11. I certify that the infor | mation provided above | is, to the best of my l | knowledge, true and correc | t. | | | | |
| Kenty durala | | | 11/26/18 | | | | | |
| / Div | vision Head Signature | 770/40 | Date | | | | | |
| For Chief Procurement Officer Use Only | | | | | | | | |
| | | | te Notice Posted: | 1 1 2018 | | | | |
| | | | quest for Sole Source. Sub | | | | | |
| this notice to issue a Sole | c Source within seven () Chief Procureme | | s otherwise allowed from t | ne above posted date to: | | | | |
| | Department of V | later Supply | | | | | | |
| | 345 Kekūanaō a Street, Suite 20 | | | | | | | |
| | Hilo, Hawaiʻi 9 | 5720 | | _ | | | | |
| Chief Procurement Office | er's comments: | | | | | | | |
| | | | | | | | | |
| 13. APPROVED I | DISAPPROVED N | O ACTION REQU | IRED | | | | | |
| | | | VIII. | | | | | |
| | | Chief Procurement Offic | er 14.Sole Source N | Date o | | | | |