



11 MAY 12 P2:59

STATE PROCUREMENT OFFICE
NOTICE & REQUEST FOR SOLE SOURCE

STATE PROCUREMENT OFFICE
STATE OF HAWAII

1. TO: Chief Procurement Officer
2. FROM: Hawaii Community Development Authority
Department/Division/Agency

Pursuant to HRS §103D-306 and HAR Chapter 3-122, Subchapter 9, the Department requests sole source approval to purchase the following:

3. Description of goods, services, or construction:
Installation of a City and County of Honolulu, Board of Water Supply ("BWS"), water meter for the State of Hawaii, Department of Public Safety, Sheriff's Division temporary facility in Kakaako, Oahu, Hawaii.

| | |
|---|---------------------------------|
| 4. Vendor Name: City and County of Honolulu, BWS Address: 630 South Beretania Street Honolulu, Hawaii 96813 | 5. Price: <u>\$25,013.91</u> |
|---|---------------------------------|

| | |
|---|------------------------------------|
| 6. Term of Contract: (mm/dd/yyyy) From: _____ To: _____ | 7. Prior Sole Source Ref No. _____ |
|---|------------------------------------|

8. Feature: The good, service, or construction has the following unique features, characteristics, or capabilities:
The BWS is the only municipal water supplier in the State. The water meter is owned and operated by the BWS and it monitors the water used by the facility.

9. Essential features. How the unique features, characteristics, or capabilities are essential for the agency to accomplish its work: Without the installation of the water meter, this facility will have no water supply and service.

11. Alternate source. The following other possible sources for the good, service, or construction were investigated but do not meet our needs because: None, there is no other municipal water system/supplier.

12. Direct any inquiries to:
Department: DBEDT/HCDA
Contact Name/Title: Neal Imada, Engineering Manager

13 Phone Number:
594-0316
Fax Number:
594-0299

Expenditure may be processed with a purchase order/pCard: Yes No
If no, a contract must be executed and funds certified.

Agency shall ensure adherence to applicable administrative and statutory requirements, including HAR Chapter 3-122, Subchapter 15, Cost or Pricing Data, if required.

14. *I certify that the information provided above is to the best of my knowledge, true, correct and that the goods, services, or construction are available through only one source.*

Mary Alice Eeone
for Department Head Signature

5-10-11
Date

Reserved for CPO Use Only

15 Date Notice Posted: 5/10/2011

Submit written objections to this notice to issue a sole source contract within seven calendar days or as otherwise allowed from the above posted date to: Chief Procurement Officer
State Procurement Office
P.O. Box 119
Honolulu, Hawaii 96810-0119

16. Chief Procurement Officer's comments:

No action is required as this request is exempt pursuant to HRS §103D-102(b)(2)(G).

17. APPROVED DISAPPROVED NO ACTION REQUIRED

Adams. Aguirre
Chief Procurement Officer 6/15/2011
Date



BOARD OF WATER SUPPLY
 City and County of Honolulu
 630 S. Beretania Street
 Honolulu, HI 96843-0001
 boardofwatersupply.com

Water for Life
 Ka Wai Oia



PT. OF ENVIRONMENTAL SERVICES
 City and County of Honolulu
 1000 Uluohia Street, Suite 308
 Kapolei, HI 96707-2040
 ENVhonolulu.org

TOTAL MISCELLANEOUS CHARGES \$25,013.91

Customer Inquiries? Call 808-748-5000
 Water Trouble? Call 808-748-5010 (24 hours)
 Office Hours: Monday thru Friday 7:45 am to 4:30 pm

Sewer Questions? Call 808-768-3330
 Sewer Trouble? Call 808-768-7272 (24 hours)
 Office Hours: Monday thru Friday 7:45 am to 4:30 pm

ACCOUNT INFORMATION

Account Number **1173756-1192382**
 Name HAWAII COMMUNITY DEVELOPMENT AUTHORITY
 Premise Name SHERIFF FAC DEPT PUB SAFETY
 Address 240 KEAWE ST
 Billing Date 04/07/2011

WATER & SEWER BILLING SUMMARY (See back for details)

| | |
|-------------------------|--------------------|
| Service Period | |
| Previous Balance | \$0.00 |
| Payments | \$0.00 |
| Adjustments | \$0.00 |
| Current Charges | \$25,013.91 |
| TOTAL AMOUNT DUE | \$25,013.91 |
| Due Date | 04/27/2011 |

Date Invoice Received **APR 11 2011**
 Date Goods/Services Received **APR 07 2011**
 I certify that goods/services were satisfactorily received.
 APPROVED FOR PAYMENT:
 By *[Signature]*
 Authorized Person Directly Responsible

Indicate address changes below. Please detach and return bottom portion with your payment.

BOARD OF WATER SUPPLY
 CITY AND COUNTY OF HONOLULU
 CUSTOMER CARE DIVISION
 630 S. BERETANIA STREET
 HONOLULU, HI 96843

117375611923820002501391

ACCOUNT NUMBER 1173756-1192382
DUE DATE 04/27/2011

Due dates apply to Current Charges only. All past due amounts are due immediately.

TOTAL AMOUNT DUE
\$25,013.91
AMOUNT ENCLOSED - OAHU



THANK YOU

Make checks payable to:
 BOARD OF WATER SUPPLY

RECEIVED
 2011 APR 11 PM 1 37
 HAWAII COMMUNITY DEVELOPMENT AUTHORITY

BK1467
 APR 11 2011



4350 1 AT 0 357

NEIL IMADA
 HAWAII COMMUNITY DEVELOPMENT AUTHORITY
 SHERIFF'S FACILITY
 461 COOKE ST
 HONOLULU, HI 96813-5320

HBWS44942
 HO 1GRP-1434-T 18
 001399

111737561192382000250139100000000001

STATE OF HAWAII REQUISITION & PURCHASE ORDER

DEPARTMENT OF BUSINESS, ECONOMIC DEVELOPMENT AND TOURISM

Hawaii Community
Development Authority

CASE NO. **00003886**

Date 10/13/10 mt

Deliver Before _____

ORGANIZATION

FUNCTION AND ACTIVITY

NOTICE TO VENDORS

Conditions of purchase are listed on the back side of this purchase order. Please read carefully. Payments may be delayed if all steps are not followed.

DELIVERY ADDRESS

461 Cooke Street
Honolulu, Hawaii 96813

BILLING ADDRESS

Same as above
Phone no. 594-0300

Board of Water Supply
City and County of Honolulu
630 S. Beretania Street
Honolulu, Hawaii 96843-0001

The State of Hawaii is an EQUAL EMPLOYMENT OPPORTUNITY and AFFIRMATIVE ACTION employer. We encourage the participation of women and minorities in all phases of employment.

| QUAN. | UNIT | DESCRIPTION | UNIT PRICE | AMOUNT |
|-------|------|---|------------|-----------|
| | | <p>New water service facility charge to the Department of Public Safety - Sheriff's Facility. This location is between the Historic Pump Station and the new pump station on Keawe Street. **P-card not accepted</p> <p>Reference Document No. BK1000-01</p> | | 25,013.91 |

Neal Imada
Neal Imada REQUISITIONER
594-0316 TELEPHONE

VOUCHER NUMBER
41111
BK1467

AUTHENTICATED BY: _____
Chang
AUTHORIZED SIGNATURE

| | |
|-----------------|-------------------------|
| REQUISITION NO. | FOR DEPARTMENT USE ONLY |
| | |
| VENDOR | |
| NUMBER | SFX |
| XXXXXXXXXXXX | XX |
| 259828 | 00 |

| SFX | TC | F | YR | APP | D | OBJECT | CC | PROJ NO. | PH | ACT | ESTIMATED COST | ACTUAL COST | M | R | OPT DEPT DATA |
|-----|-----|---|----|-----|----|--------|-------|------------|----|-----|----------------|-------------|----|----|----------------|
| XX | XXX | X | XX | XXX | XX | XXXX | XXXXX | XXXXXXXXXX | XX | XXX | XXXXXXXXXXXXXX | XX | XX | XX | XXXXXXXXXXXXXX |
| 01 | 244 | B | 08 | 825 | B | 5200 | 0001 | DPS001 | | | 25,013.91 | 25,013.91 | | | |
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