



DEPARTMENT HEAD CONTRACT PROCUREMENT CHECKLIST

Date: _____

Name of Person Submitting: _____

Department: _____

Title: _____

Brief contract description: _____

I. Department Head and Budget Department

The department head will contact the Budget Department to confirm availability of funds PRIOR to procuring services of an outside contractor/vendor, and confirm from which department budget account funds will be expended to pay for the services. The department head is required to submit this form to the Budget Department.

Account No./Fund Account No. _____

Verified funds of \$_____ available for the current fiscal year for this project/contract.

Encumbered \$_____ against the appropriate account for the purposes of this contract.

III. Solicitor's Office Verifications (Post Award)

The final stage in approving a contract prior to the Mayor's signature is verification from the Office of the Solicitor.

Done	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Insurance Certificate
<input type="checkbox"/>	<input type="checkbox"/>	Performance Bonds
<input type="checkbox"/>	<input type="checkbox"/>	Labor/Material Bond

Solicitor Sig/Date: _____

After the above is confirmed by the Solicitor's Office, a copy of this form (either a hard copy or a scanned copy) will be provided to the Department Head, Budget, Purchasing, and the Mayor's Office.

Budget Dept. Sig/Date: _____

II. Purchasing

After confirming availability of funds from Budget, the department head is required to contact purchasing and present a bid request letter for the services/goods needed. The department head is to include this form with the bid request. Purchasing agent will confirm the following:

(Pre-Award):

Received bid request letter from department head.

(Post-Award):

Done	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	Contract Number _____
<input type="checkbox"/>	<input type="checkbox"/>	Living Wage form
<input type="checkbox"/>	<input type="checkbox"/>	W-9
<input type="checkbox"/>	<input type="checkbox"/>	Bid Bond
<input type="checkbox"/>	<input type="checkbox"/>	Tax Compliance form
<input type="checkbox"/>	<input type="checkbox"/>	Non-Collusion form
<input type="checkbox"/>	<input type="checkbox"/>	DCAM Certification

Purchasing Sig/Date: _____

Department Head Notes: _____

Budget Notes: _____

Purchasing Notes: _____

Solicitor Notes: _____

Purchasing agent will forward this form to the Solicitor's Office with the award letter.