

**CITY OF MARATHON, FLORIDA  
RESOLUTION 2013-10**

**A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, APPROVING CERTAIN PURCHASES IN EXCESS OF \$10,000 AND LESS THAN \$25,000; WAIVING THE CITY'S PURCHASING POLICIES AND PROCEDURES AND AUTHORIZING A SOLE SOURCE PROCUREMENT; AUTHORIZING THE CITY MANAGER TO ENTER INTO AGREEMENTS IN CONNECTION THEREWITH; AND PROVIDING FOR AN EFFECTIVE DATE**

**WHEREAS**, the City Council of the City of Marathon, Florida (the "City"), adopted Purchasing Policies and Procedures after determining that it was fiscally prudent and in the best interests of the City's residents for the City to adopt policies and procedures for City employees and officials regarding the purchasing and acquisition of contractual services, equipment, goods, professional services and other similar types of services; and

**WHEREAS**, pursuant to Resolution 2007-156, the City Council amended the Purchasing Policies and Procedures to provide that any purchases over \$10,000 and less than \$25,000 must be placed on a City Council agenda as a consent item for approval prior to execution of the contract or consummation of the purchase; and

**WHEREAS**, under the Purchasing Policies and Procedures, the City Council may waive competitive bidding in the event that "only two vendor possesses the unique and singularly available capability to meet the requirement of the solicitation (such as technical qualifications)"; and

**WHEREAS**, the City Manager recommends the City Council waive the purchasing policies and procedures due to Stryker Sales Corp. being a sole source vendor for the purchase(s) listed in Exhibit "A."

**WHEREAS**, the City Manager has authorized staff to prepare a purchase order for those items set forth on Exhibit "A," attached hereto and now wishes to bring them before City Council as a consent item; and

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, THAT:**

**Section 1.** The above recitals are true and correct and incorporated herein.

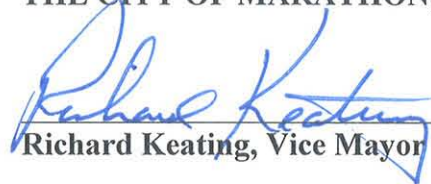
**Section 2.** Based upon the recommendation of the City Manager the City Council finds that Stryker Sales Corp. is a sole source vendor for the purchase approved herein. Accordingly, the City's Purchasing Policies and Procedures are waived and the City Council hereby approves the purchases set forth in Exhibit "A" attached hereto and incorporated herein.

**Section 3.** The City Manager or designee is authorized to execute any agreements in connection with these purchases

**Section 4.** This resolution shall take effect immediately upon its adoption.

**PASSED AND APPROVED BY THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, THIS 22<sup>nd</sup> DAY OF JANUARY, 2013.**

**THE CITY OF MARATHON, FLORIDA**

  
Richard Keating, Vice Mayor

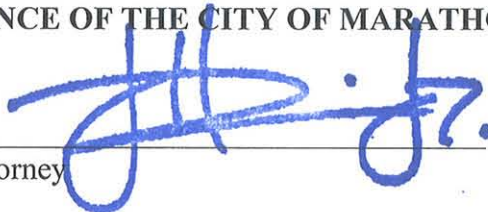
AYES: Bull, Ramsay, Snead, Keating  
NOES: None  
ABSENT: Cinque  
ABSTAIN: None

**ATTEST:**

  
Diane Clavier, City Clerk

(City Seal)

**APPROVED AS TO FORM AND LEGALITY FOR THE USE AND RELIANCE OF THE CITY OF MARATHON, FLORIDA ONLY:**

  
City Attorney

Attachments

a	Stryker Power Cot quote	\$10,800.00
b	FERNO Power Cot quote	\$11,036.38



3800 Centre Ave

Portage, MI

49002

(800) 327-0770

Bill To: Marathon Fire Rescue  
8900 Overseas Highway, Marathon, FL 33050

Ship To: Same

Name John Johnson

Email johnson@marathon.fl.us

End User: Same

PH# 305-743-5266

Account No. 1063511

Quote Date 1/4/2013 Valid thru 01/30/2013

Qty	Part #	Description	Unit Price	Price
1	#6506-000-000	Power Pro XT Cot with all accessories on your 2011 purchase (IV Pole, Equip Hook Head End Storage, Fowler O2 Holder)	\$ 10,800.00	\$10,800.00
			Sub-Total	\$10,800.00
			TOTAL	\$10,800.00

Purchasing Information:

Organization: Marathon Fire Rescue  
Please Print

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Please Print Please Print

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Purchasing Agent

Payment Information:

Net 30 Terms

Visa/MC/AMEX: \_\_\_\_\_

Card Number: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Security #: \_\_\_\_\_

**OTHER**

Purchase Order #: \_\_\_\_\_

**For public services/fire depts:**

Point of Contact at Headquarters: \_\_\_\_\_

Headquarter's Phone: \_\_\_\_\_

Headquarter's Address: \_\_\_\_\_

Comments: Please send your PO to [steve.winsor@stryker.com](mailto:steve.winsor@stryker.com) or FAX to 561-793-2840

NET 30 terms Call Steve Winsor at 561-714-9578 (cell) with any questions!

Remit to: PO BOX 93308  
Chicago, IL 60673

Terms & Conditions: Cot, all cot accessories on original order and aftermarket accessories FOB origin. Order subject to Stryker Corporation's approval. Credit cannot be allowed on returns of special or modified items. All approved returns will be accepted only in Kalamazoo, Michigan. Proposals valid for 30 days from submittal.

