

SOLE-SOURCE / SINGLE-SOURCE JUSTIFICATION

It is unlawful for a public servant, with corrupt intent to obtain a benefit for any person or to cause unlawful harm to another, to circumvent a competitive bidding process required by law or rule by using a sole-source contract for commodities or service. Florida Statute, Chapter 838.22

Sole Source Definition:

A source selected for the purchase of goods or service over \$2,500.00 when there are no other sources capable of providing the goods or services except for the one selected.

A soul equipr	rce selected for the ment, replacement sources are availab	purchase of goods or serve parts, training, warranty,	vice over \$2,4 or some oth	500.00 du er unique	ue to the compatibility of e purpose even though	
		********	*****	*****	********	
Genei	ral Information:					
Date:		June 13, 2017	Requestor's	Name:	Scott Slavin	
Total /	Amount:	\$33,725.00	Requestor's	Title:	Sergeant	
Requesting Department:		Police				
*****	******	*****	*****	*****	*******	
Vendo	or Information:					
Vendor Name: <u>TriTech Software Systems - Crime View</u>						
√endo	r Contact:	Jim Harrity				
Street	Address:	9477 Waples Street, Ste. 100				
City/St	ate/Zip:	San Diego, CA 92121				
Email .	Address:	Jim.Harrity@tritech.com				
Phone:		(610) 975-9405	Fax:	(858) 799-7011		
*****	*****	*******	*****		****	
Please	e check all statem	ents applicable to the pu or single source purcha	ırchase of th			
\boxtimes	Sole provider of a	licensed or patented good	d or service			
\boxtimes	Sole provider of items that is compatible with existing equipment, inventory, systems, programs or services					
\boxtimes	Sole provider of goods and services for which the City has established a standard					
	Sole provider of factory-authorized warranty service					
\boxtimes	Sole provider of goods or services that will meet the specialized needs of the City or perform the intended function (attach documentation)					
	None of the above apply. A detailed explanation and justification for this sole source request is attached.					

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Goods/Services Information:

Features Requirements

List the major features/capabilities that are required. What unique design/performance features does this good or provider of the services have that are essential to your requirements? Provide a brief technical explanation as to why these features are essential. Identify the manufacture/model of your existing equipment, if applicable:

Crime View is a software system that will allow the Coconut Creek Police Department to effectively respond to crime trends by utilizing data collected from several record systems. The software pulls information from different sources to be used for strategic and tactical operations to combat crime. It is unique because it is used by the Broward County Sheriff's Office who has integrated it with their local databases.

Competing Brands Investigated

Did you consider other goods or providers of services with similar capabilities? Indicate specific brands/models of competitors' products that were investigated and describe why they do not meet listed Features Requirements. List all contact names and phone numbers for competitors.

No, having access to the integrated databases that the Broward County Sheriff's Office maintains is not possible with other systems. The Broward County Sheriff's Office host's and maintains the server relieving the City of Coconut Creek from this expense.

Brand Name Source

Is the specific brand/model being recommended for procurement available from more than one source (i.e. more than one dealer or distributor)? If yes, list all ruled out vendors, why they were ruled out, and the contact name and phone numbers of those vendors.

No

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Statement of Need:
My department's recommendation for sole source is based upon an objective review of the product/service required and appears to be in the best interest of the City. I know of no conflict of interest on my part or personal involvement in any way with this request. No gratuities, favors or compromising action have taken place. Neither has my personal familiarity with particular brands, types of equipment, materials or firms been a deciding influence on my request to sole source this purchase when there are other known suppliers to exist. I have attached the pertinent documentation showing what market research was conducted to preclude other items from consideration.

Policy:
Sole source purchases exceeding \$25,000 require City Commission approval. A Notification of Intent to Award a Sole Source / Single Source will be posted electronically for at least 7 business days as per Section 287.05(3)(c), Florida Statute as amended from time to time.

Authorization:
*A minimum of two different individual approval signatures are required.
Researcher: Scatt Soven Date: 6/20/17
Requestor: Scr. Scatt 8 Cari Date: 6/20/17
Department Director: <u>Allux</u> (Crusa Date: <u>06/27/2017</u>
*Purchasing Manager: Date: 713117
*Finance Director: Date: 7/5/17
#City Manager: Date: 15/17

PURCHASING USE ONLY:
Advertise Sole Source Notification: Yes No Electronic Posting Date:
Statements of Disagreement Received:

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Business Search - Entity Detail

The California Business Search is updated daily and reflects work processed through Monday, June 19, 2017. Please refer to document Processing Times for the received dates of fillings currently being processed. The data provided is not a complete or certified record of an entity. Not all images are available online.

C1134857 TRITECH SOFTWARE SYSTEMS

Registration Date: Jurisdiction: Entity Type: Status:

Agent for Service of Process:

Entity Address:

Entity Mailing Address:

02/16/1983
CALIFORNIA
DOMESTIC STOCK
ACTIVE
NATIONAL REGISTERED AGENTS, INC.
818 WEST SEVENTH ST STE 930
LOS ANGELES CA 90017
9477 WAPLES STREET, STE 100
SAN DIEGO CA 92121
9477 WAPLES STREET, STE 100
SAN DIEGO CA 92121

A Statement of Information is due EVERY year beginning five months before and through the end of February.

Document Type 11	File Date 17	PDF
SI-NO CHANGE	02/09/2017	
MERGER	07/08/2016	
SI-COMPLETE	02/29/2016	autoria alaborativiti, in de activiti
MERGER	12/20/2012	
MERGER	11/06/2007	
RESTATED REGISTRATION	11/22/2006	Image unavailable. Please request paper copy.
RESTATED REGISTRATION	06/18/1998	Image unavailable. Please request paper copy.
AMENDMENT	11/27/1995	Image unavailable. Please request paper copy.
MERGER.	12/31/1993	Image unavailable. Please request paper copy.
AMENDMENT	11/15/1993	Image unavailable. Please request paper copy.
AMENDMENT	10/07/1985	Image unavailable. Please request paper copy.
REGISTRATION	02/16/1983	Image unavailable. Please request paper copy.

^{*} Indicates the information is not contained in the California Secretary of State's database.

- If the status of the corporation is "Surrender," the agent for service of process is automatically revoked. Please refer to California Corporations Code section 2114 for information relating to service upon corporations that have surrendered.
- For information on checking or reserving a name, refer to Name Availability.
- If the image is not available online, for information on ordering a copy refer to information Requests.
- For information on ordering certificates, status reports, certified copies of documents and copies of documents not currently available in the Business Search or to request a more extensive search for records, refer to Information Requests.
- · For help with searching an entity name, refer to Search Tips.
- For descriptions of the various fields and stalus types, refer to <u>Frequently Asked Questions</u>.

Modify Search

New Search

Back to Search Results

State of California **Secretary of State**

Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations) FEES (Filing and Disclosure): \$25.00. If this is an amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

SI-200 (REV 01/2013)

TRITECH SOFTWARE SYSTEMS

FJ75317 **FILED**

In the office of the Secretary of State of the State of California

FEB-09 2017

			1 25 00	2011		
2. CALIFORNIA CORPORATE NUM	This Space for Filing Use Only					
No Change Statement (Not app	icable if agent address of record is a P.O. B	ox address. See ins	structions.)			
 If there have been any change of State, or no statement of in 	s to the information contained in the las formation has been previously filed, this ge in any of the information contained in the	t Statement of Infor form must be com	mation filed with the Calif pleted in its entirety.			
Complete Addresses for the Fo	llowing (Do not abbreviate the name of the	city. Items 4 and 5 ca	nnot be P.O. Boxes.)			
4. STREET ADDRESS OF PRINCIPAL	EXECUTIVE OFFICE	CITY	STATE	ZIP CODE		
5. STREET ADDRESS OF PRINCIPAL	BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE		
6. MAILING ADDRESS OF CORPORAT	ION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE		
Names and Complete Address officer may be added; however, the p	es of the Following Officers (The corporeprinted titles on this form must not be altered	oration must list these	three officers. A comparable	e title for the specific		
7. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE		
8. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE		
9. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE		
Names and Complete Addresses of All Directors, Including Directors Who are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)						
10. NAME	ADDRESS	CITY	STATE	ZIP CODE		
11. NAME	ADDRESS	CITY	STATE	ZIP CODE		
12. NAME	ADDRESS	CITY	STATE	ZIP CODE		
13. NUMBER OF VACANCIES ON THE	BOARD OF DIRECTORS, IF ANY:					
Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 15 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 15 must be left blank.						
14. NAME OF AGENT FOR SERVICE O						
15. STREET ADDRESS OF AGENT FOR	SERVICE OF PROCESS IN CALIFORNIA, IF AN IN	IDIVIDUAL CITY	STATE	ZIP CODE		
Type of Business						
16. DESCRIBE THE TYPE OF BUSINES	S OF THE CORPORATION					
17. BY SUBMITTING THIS STATEMEN CONTAINED HEREIN, INCLUDING 02/09/2017 BLAKE CLAR	T OF INFORMATION TO THE CALIFORNIA SEC NY ATTACHMENTS, IS TRUE AND CORRECT. K		THE CORPORATION CERTIFIE	S THE INFORMATION		
	NAME OF PERSON COMPLETING FORM	TITLE	SIGNATU	RE		
SI-200 (REV 01/2013)			APPROVED BY S	SECRETARY OF STATE		

Form (Rev. October 2007) Department of the Tressury

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Internal	Revenue Service					
- Si	Name (as shown on your Income tax return)					
	Business name, if different from above					
P	TriTech Software Systems					
Print or type Specific Instructions on page	Check appropriate box: Individual/Sole proprietor Corporation Partnership	d (n)	Exempt			
	☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶					
	Other (see instructions) Address (number street, and apt, or suite no.) Requester's name and address					
	Paddess (tallies) as sed and any					
	City, state, and ZIP code	9477 Waples Street, STE 100				
9	and the second s					
S	San Diego, CA 92121					
See	List account number(s) here (optional)					
Da	Taxpayer Identification Number (TIN)					
Par	Taxpayer identification Number (Tity)					
Enter	your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoi	G .	rity number			
hacki	up withholding. For individuals, this is your social security number (SSN). However, for a resident					
alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.						
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose						
	er to enter.	95	3871079			
Par	t II Certification					
Unde	r penalties of perjury, I certify that:					
	ne number shown on this form is my correct taxpayer identification number (or I am waiting for a	number to be is	ssued to me), and			
2. I	 I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 					
3. 1	am a U.S. citizen or other U.S. person (defined below).					
withh For n	Heatlon Instructions. You must cross out item 2 above if you have been notified by the IRS that olding because you have failed to report all interest and dividends on your tax return. For real es nortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, cor gement (IRA), and generally, payments other than interest and dividends, you are not required to de your correct TIN. See the instructions on page 4.	tate transactions tributions to an	individual retirement			
Sign		aluli	5 .			

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident allen,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301 7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

• The U.S. owner of a disregarded entity and not the entity,