TO: Chief Procurement Officer
FROM: Procurement Unit

**Name of Requesting Department**

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

1. **Describe the goods, services, or construction to be procured.**
   Pursuant to HAR Chapter 3-122-81 (6) it states "Repair and maintenance services and supplies from the original equipment manufacturer or its designated representative; when the manufacturer or its designated representative is required to provide the services and supplies to retain the manufacturer’s warranty or guarantee". As such, purchased Kooler Ice’s ice vending machine requires all purchase of supplies are conducted through said vendor in compliance with their warranty. Purchase of supplies shall include at a minimal the plastic bags, wickets of twist ties, filteres, etc. required to package the product sold from the ice vending machine. While under the 3 year warranty, OHA will be purchasing all supplies necessary from Kooler Ice to comply with the warranty.

<table>
<thead>
<tr>
<th>2. <strong>Vendor/Contractor/Service Provider Name:</strong></th>
<th>3. <strong>Amount of Request:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Kooler Ice, Inc.</td>
<td>$2,000.00</td>
</tr>
</tbody>
</table>

4. **Term of contract (shall not exceed 12 months), if applicable:**
   From: 10/7/2016 To: 10/6/2019

5. **Prior SPO-001, Sole Source (SS) No.:**

6. **Describe in detail the following:**
   a. **The unique features, characteristics, or capabilities of the goods, service or construction.**
      The supplies that are intended to be purchased a proprietary items that are specially made for this model ice vending machine during the term of the contract which is from 10/07/16 - 10/06/19.

   b. **How the unique features, characteristics or capabilities of the goods, service or construction are essential for the department**
      The supplies are essential to the ice vending machine in order to function properly.
7. Describe the efforts and results in determining that this is the only vendor/contractor/service provider who can provide the goods, services or construction.

According to the service maintenance, the supplies to be purchased are required in order to maintain the validity of the warranty.

8. Alternate source. Describe the other possible sources for the goods, services, or construction that were investigated but did not meet the department's needs.

9. Identify the primary responsible staff person(s) conducting and managing this procurement. (Appropriate delegated procurement authority and completion of mandatory training required.)
*Point of contact (Place asterisk after name of person to contact for additional information).

<table>
<thead>
<tr>
<th>Name</th>
<th>Division/Agency</th>
<th>Phone Number</th>
<th>E-mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Matthew Kodama</td>
<td>Commercial Property</td>
<td>808-594-1822</td>
<td><a href="mailto:matthewm@oha.org">matthewm@oha.org</a></td>
</tr>
</tbody>
</table>

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

All requirements/approvals and internal controls for this expenditure is the responsibility of the department. I certify that the information provided is to the best of my knowledge, true and correct.

[Signature]
Department Head Signature

9/28/16
Date
For Chief Procurement Officer Use Only

Date Notice Posted: 10/3/16

Submit written objection to this notice to issue a sole source contract within seven calendar days or as otherwise allowed from date notice posted to:

state.procurement.office@hawaii.gov

Chief Procurement Officer (CPO) Comments:

☑ Approved ☐ Disapproved ☐ No Action Required

[Signature]
Chief Procurement Officer Signature Date