

Webb County Purchase Justification Form

Funding Sources Requested:				
Capital Outlay Fund # <u>T</u>	o be Determined			
Building Improvement Fund #				
Department: <u>Utilities</u>	Department Head: Adrian G. Montemayor			

Number of Dept. Employees: <u>18</u>

ltem	Qty	Qty on Hand	Condition of item being replaced: Poor/Fair/Good	Unit Price	Extended Price
Discharge Hose 300psi 100 ft.	1	0	Fair	\$1,612.90	\$1,612.90
2 Bolt 4 inch Clamps	20	0	Poor	\$289.60	\$289.60
Freight Charge	1	0	Poor	\$275.00	\$275.00
				1100	
			at. 11.0.		<u> </u>
1C DEPT.	18VH0	W 7U9			

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Total Cost of item(s) being purchased:	\$2,176.60						
Do you have 3 quotes for all items listed abo	ve? Yes <u>X</u>	No					
What is the purpose of each item(s) requested any leaks fixed at the Collection System and a	'						
If the purchase is to replace item(s) is the item(s) being replaced currently in use?							
Yes <u>X</u> No							
What is the impact or risk potential if we dor the Lift stations and will result to fines from T	•	Potential Risk are major leaks at					
Please Circle Priority: (Critical)	Upgrade	Desirable					
PRIORITY 1: CRITICAL – Required to prevent a critical in protect valuable property; and/or comply with insurance PRIORITY 2: UPGRADE – Required for significant upgra operations. PRIORITY 3: DESIRABLE – Required to introduce desira small improvements in operating efficiency, economy and	e or code requiréments. ade in service, operating e able, but optional new serv	fficiency, economy and/or safety of current					
Required with this form:							
 Price quotes Pictures of item(s) to be replaced 5 copies 	De	partment Head Signature					
**** Please note this form must be filled out is	Da n its entirety for purcha	777					

WEBB COUNTY PURCHASING DEPT.

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