

TOWN OF DAVIE

TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: Chief John George/693-8320

PREPARED BY: Herb Hyman/797-1016

SUBJECT: Resolution

AFFECTED DISTRICT: n/a

TITLE OF AGENDA ITEM: A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF SUNGUARD OSSI PUBLIC SAFETY SOLUTIONS TO PROVIDE POLICE DEPARTMENT APPLICATION SOFTWARE AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH PRODUCTS AND SERVICES.

REPORT IN BRIEF: The Town solicited sealed proposals for Police Department application software including training and maintenance. The Town sent out RFP documents to twelve (12) prospective respondents. In addition, the RFP was advertised in Florida Bid Reporting and BidNet and also posted on the Town's website. The Town received two (2) responses. The selection committee visited installations for both vendors to talk to users of the product regarding satisfaction. Additionally, the selection committee invited both vendors to make an oral presentation to the committee. After reading proposals, talking to actual users, and hearing oral presentations, the selection committee has selected Sunguard OSSI Public Safety Solutions as the firm best qualified to supply the products and services needed in accordance with the attached ranking totals.

PREVIOUS ACTIONS: n/a

CONCURRENCES: The firm of Sunguard OSSI Public Safety Solutions was chosen by the selection committee.

FISCAL IMPACT: Yes

Has request been budgeted? Yes

Additional Comments: Contract to be negotiated after approval of vendor selection

RECOMMENDATION(S): Motion to approve the resolution

Attachment(s): Procurement Authorization, Selection Committee Rankings, Incorporation information.

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF SUNGUARD OSSI PUBLIC SAFETY SOLUTIONS TO PROVIDE POLICE DEPARTMENT APPLICATION SOFTWARE AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH PRODUCTS AND SERVICES.

WHEREAS, the Town solicited proposals for police department application software; and

WHEREAS, the selection committee has selected Sunguard OSSI Public Safety Solutions as the firm best qualified to provide the required services; and

WHEREAS, it is in the Town's best interest to execute a contract for such products and services.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept the selection of Sunguard OSSI Public Safety Solutions as the firm best qualified to provide the required services and authorizes the Town Administrator or his designee to negotiate an agreement for such products and services and present that contract for approval at a future meeting date. Should no agreement be reached with the highest ranking firm, then the Town Administrator or his designee shall negotiate with the next ranked firm and present that agreement for approval.

SECTION 2. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS _____ DAY OF _____, 2007

MAYOR/COUNCILMEMBER

Attest:

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2007

TOWN OF DAVIE PROCUREMENT AUTHORIZATION

SEP 18 2006

<u>ACCOUNT NUMBER</u>	<u>BUDGET ITEM & DESCRIPTION</u>	<u>APPROXIMATE COST</u>
001-0520-521-6462	Software & Hardware Police Department	\$ 700,000.00

METHOD OF PROCUREMENT (check the one that applies)

- Open Competitive Bidding
- Piggyback on Contract Number _____
- Sole Source
- Request For Proposals

SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED

Signed _____
 Department Head: John George

Have Funds been reserved *N/A* *CANNOT ENCUMBER*
FY 06/07 FUNDS

Date *9/18/06* Signed _____

Signed _____
 Town Administrator

<u>VENDOR</u>	<u>BIDS SUBMITTED</u>	<u>COST</u>
<i>SUNGUARD OSSE PUBLIC SAFETY SOLUTIONS</i>		<i>RANKED 1ST</i>
<i>USA SOFTWARE, INC</i>		<i>RANKED 2ND</i>

Signed _____
 Procurement Manager

BID SPECIFICATION COMMITTEE'S RECOMMENDATION

<u>Vendor</u>	<u>Cost</u>
<i>SUNGUARD OSSE PUBLIC SAFETY SOLUTIONS</i>	<i>RANKED 1ST</i>

	A	B	C
1			
2			
3		PD Application Software	
4			
5			
6	COMMITTEE MEMBER	OSSI	USA Software
7			
8			
9	W. UNDERWOOD	ABSENT	
10	R. MUNIZ	1	2
11	M. KUTNEY	ABSENT	
12	L. PETERS	1	2
13	G. KILLAM	1	2
14	F. APICELLA	1	2
15	H. HYMAN	1	2
16			
17	TOTAL	5	10
18			
19	RANKING	1 st	2 nd

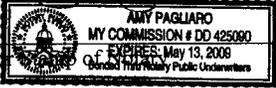
By: [Signature]
Signature of Affiant

Date: 9-28-06

Grant Harbin
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 28th day of September
2006, by Grant Harbin he/she is personally known to me or has
presented _____ as identification.

[Signature]
Notary Public, State of Florida at Large

Print Name: Amy Pagliaro


Serial Number _____

My Commission Expires: 5-13-2009

Form W-9
 (Rev. January 2003)
 Department of the Treasury
 Internal Revenue Service

**Request for Taxpayer
 Identification Number and Certification**

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

Name _____

Business name, if different from above
SunGard HTE Inc.

Check appropriate box: Individual/ Sole proprietor Corporation Partnership Other Exempt from backup withholding

Address (number, street, and apt. or suite no.)
1000 Business Center Drive

City, state, and ZIP code
Lake Mary, FL 32746

List account number(s) here (optional) _____

Requester's name and address (optional) _____

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. 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 number to enter.

Social security number								
OR								
Employer identification number								
5	9	2	1	3	3	8	5	8

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 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
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person Matthew Sacorell Date 12/5/06

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.

U.S. person. 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),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

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.

Foreign person. If you are a foreign person, use the appropriate Form W-8 (see Pub. 518, Withholding of Tax on Nonresident Aliens and Foreign Entities)

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90163 039 ****158.75

DOCUMENT # F50372 1. Entity Name SUNGARD HTE INC.	
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Principal Place of Business 1000 BUSINESS CENTER DRIVE LAKE MARY, FL 32746	Mailing Address 1000 BUSINESS CENTER DRIVE LAKE MARY, FL 32746
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DO NOT WRITE IN THIS SPACE



01262008 No Chg-P CR2ED34 (11/05)

4. FEI Number 59-2133858	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and SSN if applicable. (NOTE: Registered Agent signature required when retaining)

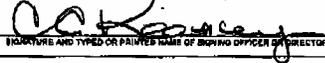
FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GCEO CLARKE, ROBERT F 880 EAST SWEDESFORD ROAD WAYNE, PA 19087
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GCEO LANGSTON, BRUCE E 880 EAST SWEDESFORD ROAD WAYNE, PA 19087
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRUSH, LESLIE S 880 EAST SWEDESFORD ROAD WAYNE, PA 19087
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO SANTOS, GILBERT O 1000 BUSINESS CENTER DRIVE LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C COLEMAN-KEATHLEY, CHRIS 1000 BUSINESS CENTER DRIVE LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPO GOODROW, RONALD E 1000 BUSINESS CENTER DRIVE LAKE MARY, FL 32746

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a) other like empowerer.

SIGNATURE:  **2/23/06 401-304-3235**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
40027636
F50372

SunGard HYE Inc. Officers/Directors		
Officers:	Name:	Address:
Group CEO SunGard Higher Education & Public Sector Systems	Robert F. Clarke	680 East Swedesford Road Wayne, PA 19087
Group CFO SunGard Public Sector Systems	Bruce E. Langston	680 East Swedesford Road Wayne, PA 19087
President & CEO	Gilbert O. Santos	1000 Business Center Drive Lake Mary, FL 32746
Controller	Chris Coleman-Keathley	1000 Business Center Drive Lake Mary, FL 32746
Executive VP - Operations	Ronald E. Goodrow	1000 Business Center Drive Lake Mary, FL 32746
Senior VP - Strategy	Scott Doughman	680 East Swedesford Road Wayne, PA 19087
Vice President - Sales & Marketing	Daniel Conway	1000 Business Center Drive Lake Mary, FL 32746
VP - Development	Phillip Gulliford	1000 Business Center Drive Lake Mary, FL 32746
VP - Finance	C. Sialery	680 East Swedesford Road Wayne, PA 19087
VP - Professional Services	Grant Harbin	1000 Business Center Drive Lake Mary, FL 32746
Asst VP & Asst Secretary	Michael McCarthy	680 East Swedesford Road Wayne, PA 19087
Asst VP & Asst Secretary	Karen Mullane	680 East Swedesford Road Wayne, PA 19087
Asst VP & Asst Secretary	Victoria E. Sibbey	680 East Swedesford Road Wayne, PA 19087
Asst VP & Asst Secretary	Michael J. Ruane	680 East Swedesford Road Wayne, PA 19087
Asst VP & Secretary	Leslie S. Brush	680 East Swedesford Road Wayne, PA 19087
Directors:		
	Robert Clarke	680 East Swedesford Road Wayne, PA 19087
	Victoria E. Sibbey	680 East Swedesford Road Wayne, PA 19087
	Michael J. Ruane	680 East Swedesford Road Wayne, PA 19087

2/28/2005

CT CORPORATION SYSTEM

660 East Jefferson Street
Tallahassee, FL 32301 February 2, 2004
Tel: 850 222 1092
Fax: 850 222 7615

Penny Turner
SunGard FTE Inc.
1000 Business Center Drive
Lake Mary FL 32746

Re: Order #: 6030282 SO
Customer Reference 1:
Customer Reference 2:

Dear Penny Turner:

Per your instructions, enclosed are the following document(s) as issued by the referenced jurisdiction(s):

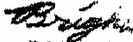
SunGard FTE Inc. (FL)
Obtain Document - Misc - Certificate Re Name change with good standing paragraph,
former name FTE Inc. changed in merger filed 5/28/03
Florida

If you have any questions concerning this order, please contact:

Margaret H Routzahn
Philadelphia Corporate Team 1
Phone: (215) 563-7397
Email: Margaret_Routzahn@coi-lis.com

Thank you for this opportunity to be of service.

Sincerely,



Brigham Weir
Tallahassee Fulfillment Team 1
Brigham_Weir@coi-lis.com