

RESOLUTION NO. \_\_\_\_\_

A RESOLUTION AUTHORIZING THE ADMINISTRATOR FOR THE DEPARTMENT OF PUBLIC WORKS TO ENTER INTO A BLANKET CONTRACT WITH DENALI WATER SOLUTIONS, LLC FOR BENEFICIAL USE OF BIOSOLIDS FOR AN ESTIMATED COST OF ONE MILLION EIGHT HUNDRED THOUSAND DOLLARS (\$1,800,000.00), FOR THE FIRST YEAR WITH THE TERM OF THE CONTRACT TO BE THREE (3) YEARS WITH THE OPTION TO RENEW FOR TWO (2) ADDITIONAL ONE (1) YEAR TERMS.

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BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF CHATTANOOGA, it is hereby authorizing the Administrator for the Department of Public Works to enter into a blanket contract with Denali Water Solutions, LLC for beneficial use of biosolids for an estimated cost of \$1.8 million, for the first year with the term of the contract to be three (3) years with the option to renew for two (2) additional one (1) year terms.

ADOPTED: \_\_\_\_\_, 2015

/mem

# City of Chattanooga



## Resolution Request Form

(This form is only required for resolutions requiring expenditure of City funds)

Date Prepared: \_\_\_\_\_

Preparer: Michael C. Patrick, P.E. Director

Department: Waste Resources Division

*Michael Patrick*

Brief Description of Purpose for Resolution:

Resolution Number (if approved by Council): \_\_\_\_\_

A resolution authorizing the Administrator of the Department of Public Works to enter into a blanket contract with Denali Water Solutions, LLC, for beneficial use of biosolids for an estimated cost of \$1,800,000.00 for the first year with the term of the contract to be three (3) years with the option to renew for two (2) additional 1-year terms.

Name of Vendor/Contractor/Grant, etc.	<u>Denali Water Solutions, LLC</u>	New Contract/Project? (Yes or No)	<u>No</u>
Total project cost \$	<u>1,800,000.00</u>	Funds Budgeted? (YES or NO)	<u>Yes</u>
Total City of Chattanooga Portion \$	<u>1,800,000.00</u>	Provide Fund	<u>6010</u>
City Amount Funded \$	<u>1,800,000.00</u>	Provide Cost Center	<u>K30110</u>
New City Funding Required \$	_____	Proposed Funding Source if not budgeted	_____
City's Match Percentage %	_____	Grant Period (if applicable)	_____

List all other funding sources and amount for each contributor.

Amount(s)
_____
_____
\$ _____
\$ _____

Grantor(s)
_____
_____
_____
_____

Agency Grant Number \_\_\_\_\_

CFDA Number if known \_\_\_\_\_

Approved by: *[Signature]*  
DESIGNATED OFFICIAL/ADMINISTRATOR

Reviewed by: FINANCE OFFICE

Please submit completed form to @budget, accounting, City Attorney, City Finance Officer and Deputy Administrator Finance