

**CLERK'S CONTRACT and AGREEMENT COVER PAGE**

**Legistar File ID#:** 2026-0310

**Contract #:** 20260167

**Start date:** 2/1/2026

**End date:** 1/31/2027

**Amount:** \$ 71,182.10

**Contingency Amount:** \$ 0.00

**Department:** IT Department

**Total Contract Amount:** \$ 71,182.10

**Contract Type:** Goods Only

**Contractors Name:** Harris ERP

**Status of Ownership:** N/A

**Status of Sub:** N/A

**Certification:** Attached

Self-Certifying

Did not disclose

**Contract Description:** Harris ERP/Innoprise Renewal



Invoice CSEM0000582  
 Date 3/23/2026  
 Page 1 of 1

Remit Checks To:  
 Harris Enterprise Resource Planning,  
 a division of Harris Systems USA Inc.  
 PO BOX 74008484, Chicago, IL 60674-8484

<b>Bill To</b>
Orland Park, Village of 14700 South Ravinia Orland Park, IL 60462 USA

<b>Ship To</b>
Orland Park, Village of 14700 South Ravinia Orland Park, IL 60462 USA

PO Number	Customer No.	Salesperson ID	Shipping Method	Payment Terms
	ORL01		LOCAL DELIVERY	Start of Maint Term

Ordered	Item Number	Description	Unit Price	Ext Price
1.00	NOTE	Invoice replaces CSEM0000550; Feb 2026 - Jan 2027	US\$0.00	US\$0.00
1.00	ERP-INN-MN	CIS - Read Only: 2/1/2026 to 1/31/2027	US\$22,788.80	US\$22,788.80
1.00	ERP-INN-MN	Citizen Access - CIS - Read Only: 2/1/2026 to 1/31/2027	US\$526.86	US\$526.86
1.00	ERP-INN-MN	Code Enforcements - Read Only: 2/1/2026 to 1/31/2027	US\$5,697.66	US\$5,697.66
1.00	ERP-INN-MN	Financials - Read Only: 2/1/2026 to 1/31/2027	US\$22,788.80	US\$22,788.80
1.00	ERP-INN-MN	Payroll/HR - Read Only: 2/1/2026 to 1/31/2027	US\$18,417.82	US\$18,417.82
1.00	ERP-INN-MN	Cashiering Interface - Read Only: 2/1/2026 to 1/31/2027	US\$962.16	US\$962.16

**VILLAGE OF ORLAND PARK**

By: *George Koczvara*  
 Name: George Koczvara  
 Title: Village Manager  
 Date: 4/21/26

Invoice Questions? Please call Zaki Anonug at 1-888-847-7747, ext 501242 or e-mail ar_erp@harriscomputer.com  Banking Info: Account No. : 4427890967 Beneficiary : Harris Systems USA Inc; 1 Antares Drive, Suite 400, Ottawa, ON, K2E 8C4, Canada ABA No. (ACH Payments) : 111000012 Bank Name & Address : Bank of America; 100 West 33rd St, New York, NY 10001	Subtotal	US\$71,182.10
	Misc	US\$0.00
	Tax	US\$0.00
	Freight	US\$0.00
	Trade Discount	US\$0.00
	<b>Total</b>	<b>US\$71,182.10</b>

Village of Orland Park  
Sole Source Request Form  
Required for Purchases \$5,000 - \$24,999

Department Information Technology

Date 3/24/2026

Division (if applicable) \_\_\_\_\_

Description of Good/Service Harris - read only

Manufacturer or Supplier HARRIS

Dollar Amount \$71,182.10 Co-op Purchasing Contract # \_\_\_\_\_

Have Adequate Funds Been Budgeted For This Purchase? Yes  No

Account number(s) 1004000-463450 IT SOFTWARE

**Option 1 - Sole Source Justification**

A Sole Source Purchase is available from only one supplier and must meet at least one of the following criteria (check the appropriate box):

- One-of-a-Kind The commodity or service has no competitive product alternatives available on the market.
- Compatibility The commodity or service must match existing brand of equipment for compatibility.
- Replacement Part The commodity is a replacement part for a specific brand of existing equipment.
- Operation Continuity The commodity or service is needed to maintain operational continuity.
- Unique Design The commodity or service must meet physical design or quality requirements.
- Delivery Date Only one supplier can meet necessary delivery requirements.
- Emergency PER VILLAGE CODE 1-16-3 (E): URGENT NEED for the item or service does not permit soliciting competitive bids.
- Other \_\_\_\_\_

Explain how your purchase of goods or services meets one or more of the above criteria for a valid sole source

**HARRIS will provide READ ONLY for CIS, Citizen Access, Code Enforcement, financial, and payroll/HR of all the Village data in the ERP system.**

**Price Reasonableness**

I determined that the price is reasonable for one of the following reasons:

Relevant documentation attached

- I compared the proposed price to prices I previously paid for the same or similar services.
- I compared the proposed price to current published catalog, price lists, or market prices as documented in the attachments.
- I compared the proposed price to rough yardsticks and did not discover significant inconsistencies that warrant additional inquiry.
- Based on my knowledge of the market, my experience of prior similar proposals, or knowledge imparted by technical experts.
- The price is set by law or regulations.
- Market research reveals that same or similar goods or services are available for a similar price.

**Option 2 - Joint or Cooperative Purchasing**

Purchase through Cooperative Purchasing (attach contract documentation)

- State of Illinois Joint Purchase Program
- NWMC/Suburban Purchasing Cooperative
- The GSA Schedules
- Sourcewell
- Nat'l Association of State Procurement Officials (NASPO) ValuePoint
- Choice Partners Cooperative
- The Interlocal Purchasing System (TIPS)
- Purchasing Cooperative of America
- Good Buy Purchasing Cooperative
- Omnia Partners - Public Sector
- National Intergovernmental Purchasing Alliance
- The National Cooperative Purchasing Alliance
- HGACBuy
- Municipal Partnering Initiative (MPI)
- Midwestern Higher Education Compact
- National Purchasing Partners (NPPGov)
- 1Government Procurement Alliance (1GPA)
- National BuyBoard (BuyBoard)
- Other: \_\_\_\_\_

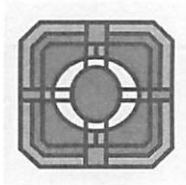
**Requested By:**

<u>Name</u>	<u>Signature</u>	<u>Date</u>
Staff Contact <u>Patricia Tracy</u>	<u>Patricia Tracy</u> Digitally signed by Patricia Tracy Date: 2026.03.24 11:46:00 -05'00'	<u>3/24/2026</u>

Department Head <u>Thaddeus Spencer</u>	<u>Thaddeus Spencer</u> Digitally signed by Thaddeus Spencer Date: 2026.03.24 12:50:47 -05'00'	<u>3/24/2026</u>
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Did legal review Terms & Conditions from vendor, if applicable?  Yes  No  N/A

Have you received a CRT summary from the Risk Manager?  Yes  No  N/A



# VILLAGE OF ORLAND PARK

14700 S. Ravinia Avenue  
Orland Park, IL 60462  
www.orlandpark.org

## Master

File Number: 2026-0310

File ID: 2026-0310	Type: MOTION	Status: PASSED
Version: 0	Reference:	Controlling Body: Board of Trustees
		File Created Date : 03/24/2026
Agenda Entry: Harris ERP/Innoprise Annual Licensing and Support Renewal	Final Action: 04/06/2026	

Title: Harris ERP/Innoprise Annual Licensing and Support Renewal

Notes:

Agenda Date: 04/06/2026

Sponsors:

Res/Ord Date:

Attachments: 2026-3-23 INVOICE - HARRIS - CSEMN0000582,  
Sole Source - HARRIS

Res/Ord Number:

Drafter:

Hearing Date:

Department  
Contact:

Effective Date:

### History of Legislative File

Ver- sion:	Acting Body:	Date:	Action:	Sent To:	Due Date:	Return Date:	Result:
0	Technology Department	04/06/2026	INTRODUCED TO BOARD	Board of Trustees			
	Action Text: INTRODUCED TO BOARD to the Board of Trustees						
0	Board of Trustees	04/06/2026	APPROVED				Pass
	Action Text: This matter was APPROVED on the Consent Agenda.						

### Text of Legislative File 2026-0310

..Title  
Harris ERP/Innoprise Annual Licensing and Support Renewal

#### History

Staff requests approval in the amount of \$71,182.10 for annual renewal of Harris ERP/Innoprise software licenses and support effective February 2026 to January 2027. The Village implemented the Harris ERP/Innoprise software package in 2012. This software package includes core financials, cash receipts, utility billing, online payments, community development and payroll modules. The Village deployed a replacement ERP from Tyler Systems to replace Harris ERP/Innoprise, however we still need access to historical data for the immediate future.

#### Financial Impact

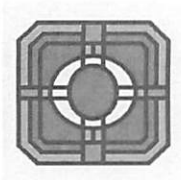
Harris ERP/Innoprise software licensing and support is budgeted for 2026.

#### Recommended Action/Motion

I move to approve the Harris ERP/Innoprise annual software maintenance at a cost not to exceed \$71,182.10;

AND

Authorize the Village Manager to execute all related contracts subject to Village Attorney review.



# VILLAGE OF ORLAND PARK

## Meeting Minutes

### Board of Trustees

14700 S. Ravinia Avenue  
Orland Park, IL 60462  
www.orlandpark.org

*Village President James V. Dodge, Jr.*

*Village Clerk Mary Ryan Norwell*

*Trustees, William R. Healy, Cynthia Nelson Katsenes, Michael R. Milani,  
Dina Lawrence, John Lawler and Joanna M. L. Leafblad*

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Monday, April 6, 2026

7:00 PM

Village Hall

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**2026-0310 Harris ERP/Innoprise Annual Licensing and Support Renewal**

I move to approve the Harris ERP/Innoprise annual software maintenance at a cost not to exceed \$71,182.10;

AND

Authorize the Village Manager to execute all related contracts subject to Village Attorney review.

**This matter was APPROVED on the Consent Agenda.**

Respectfully Submitted,

/s/ Mary Ryan Norwell

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**Mary Ryan Norwell, Village Clerk**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/02/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Marsh Canada Limited 120 Bremner Blvd., Suite 800 Attn: Canada.Certrequest@marsh.com Toronto, ON, M5J 0A8	<b>CONTACT NAME:</b> - <b>PHONE (A/C, No, Ext):</b> <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b>													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A : Federal Insurance Company</td> <td>20281</td> </tr> <tr> <td>INSURER B : ACE American Insurance Company</td> <td>22667</td> </tr> <tr> <td>INSURER C : XL Specialty Insurance Company</td> <td>37885</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Federal Insurance Company	20281	INSURER B : ACE American Insurance Company	22667	INSURER C : XL Specialty Insurance Company	37885	INSURER D :		INSURER E :		INSURER F :
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INSURER F :														
CN102165922-sndrd-GAWUP-25-26 Harris														
<b>INSURED</b> CONSTELLATION SOFTWARE INC. AND HARRIS ENTERPRISE RESOURCE PLANNING 424 SOUTH WOODS MILL ROAD, SUITE 310 CHESTERFIELD, MO 63017														

**COVERAGES**                      **CERTIFICATE NUMBER:** HOU-003831437-17                      **REVISION NUMBER:** 6

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			9950-48-39 EUC	09/27/2025	09/27/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			7360-03-97	09/27/2025	09/27/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$			9365-24-30	09/27/2025	09/27/2026	EACH OCCURRENCE \$ 9,000,000 AGGREGATE \$ 9,000,000 \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N	71764342	09/27/2025	09/27/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Professional Liability Tech E&O & Cyber			US00158150EO25A	09/27/2025	09/27/2026	Limit 10,000,000 SIR 2,500,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
VILLAGE OF ORLAND PARK IS ADDED AS ADDITIONAL INSURED WITH RESPECT TO THE COMMERCIAL GENERAL LIABILITY POLICY, BUT ONLY WITH RESPECT TO LIABILITY ARISING OUT OF THE OPERATIONS OF THE NAMED INSURED WHERE REQUIRED BY WRITTEN CONTRACT.  
WAIVER OF SUBROGATION IS APPLICABLE WHERE REQUIRED BY WRITTEN CONTRACT AND SUBJECT TO POLICY TERMS AND CONDITIONS WITH RESPECT TO GENERAL LIABILITY, AUTO LIABILITY AND WORKER'S COMPENSATION IN FAVOR OF THE VILLAGE OF ORLAND PARK.

<b>CERTIFICATE HOLDER</b> VILLAGE OF ORLAND PARK ATTN: ANNAMARIE MAMPE 14700 S. RAVINIA ORLAND PARK, IL 60462	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE of Marsh USA LLC  <i>Marsh USA LLC</i>
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**ADDITIONAL REMARKS SCHEDULE**

AGENCY Marsh Canada Limited		NAMED INSURED CONSTELLATION SOFTWARE INC. AND HARRIS ENTERPRISE RESOURCE PLANNING 424 SOUTH WOODS MILL ROAD, SUITE 310 CHESTERFIELD, MO 63017	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**  
**FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance**

THE US COMMERCIAL GENERAL LIABILITY POLICY, US AUTOMOBILE POLICY, US WORKER'S COMPENSATION & EMPLOYER'S LIABILITY POLICY AND TECHNOLOGY E&O LIABILITY POLICY HAVE BEEN PLACED BY SERVICE OF MARSH USA INC. MARSH CANADA LIMITED HAS ONLY ACTED IN THE ROLE OF A CONSULTANT TO THE CLIENT WITH RESPECT TO THESE PLACEMENTS WHICH ARE INDICATED HERE FOR YOUR CONVENIENCE.



# Contractual Risk Transfer Evaluation Summary

Date 3/24/26

Vendor/Contractor Name: HARRIS ENTERPRISE RESOURCE PLANNING  
 Contract/Project Name/ #: Legacy ERP Software System Purchase  
 Contract Type:  Contractor  Prof. Svcs  Goods Only  MSA  
 MSA Title \_\_\_\_\_  
 Type of Work: Software Purchase  
 Contract/Project Summary: **Legacy ERP Software System Purchase**  
 Policy Expiration Date: 9/27/26

**Required Coverages/Limits – Per Contract:**

**Compliant:**

General Liability:	\$1 million	\$2 million General Agg.	Other:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
Umbrella Liability:	\$1 million	\$2 million	Other: \$9M/\$9M	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
Auto Liability:	\$1 million	Any Auto/Owned	Other:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
Workers' Comp./ Employer Liability	\$500,000 Each Accident, Each Employee, Policy Limit		Other:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
Prof. Liability:	\$1 million	\$2 million	Other: See below	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
Env. Liability:	\$1 million	\$2 million	Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Exc./Umb. Prof.				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Excess/Umb GL				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Cyber Liability:	\$500,000	\$1 million	Other: See below	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
Builders Risk:	Completed Project Value		Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Other:	Professional Liability, Tech E&O, Cyber		Other: \$10M/\$10M	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA

**Required Endorsements:**

ISO Additional Insured Endorsement: (CG 20 10 or CG 20 26)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
ISO Additional Insured – Completed Operations (CG 20 37)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Broad Form Manuscript Add'l. Insd. Endorsement Reviewed/Acceptable Alternate Accepted Form:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Primary Additional Insured Coverage Provided - ISO CG 20 01 or Acceptable Alternate Accepted Form:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Waiver of Subrogation - General Liability	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Waiver of Subrogation – Workers' Compensation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA

**Additional Coverages/Revisions Approved:**

**Orland Park Hold Harmless/Indemnity Agreement Accepted:**  Yes  No

**Notes / Additional Comments:**

Software Purchase

**Contractual Risk Transfer:** Acceptable  Not Acceptable