

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

Department Village Manager's Office

Date 4/1/2026

Division (if applicable) _____

Description of Good/Service Public Entity Risk Management and Loss Control Consulting Services

Manufacturer or Supplier LT Contractual Risk Solutions / Titan Safety Management Inc.

Dollar Amount 413,250.00 Co-op Purchasing Contract # _____

Have Adequate Funds Been Budgeted For This Purchase? Yes No

Account number(s) 6100000-432800

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

LT Contractual Risk Solutions / Titan Safety Management Inc. is the Village's current provider of these services. It is necessary to retain this vendor due to their familiarity with the Village's policies and procedures. Their institutional knowledge would take significant time to transfer to a new provider; therefore, to avoid disruption to operations, the Village will continue services with this vendor for an additional three-year term.

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)

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

Requested By:

Name	Signature	Date
Staff Contact <u>Brandi Watson</u>	<u>Brandi Watson</u> Digitally signed by Brandi Watson Date: 2026.04.01 18:02:06 -05'00'	<u>4/1/2026</u>

Department Head <u>George Koczvara</u>		<u>4/3/26</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