EX 06-27



STATE PROCUREMENT OFFICE NOTICE OF AND REQUEST FOR EXEMPTION FROM CHAPTER 103D, HRS

1. TO: Head of Purchasing Agend	ΓO:	Head	of Purch	nasing	Agenc	y
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z.FROM: Maui Memorial Medical Center

Department/Division/Agency Pursuant to §103D-102(b)(4), HRS, and Chapter 3-120, HAR, the Department requests a procurement exemption to	o purchase the following:
3. Description of goods, services or construction: Original Equipment Maintenance Agreement for Schindler Elevator Corporation.	
4. Name of Vendor: Schindler Elevator Corporation	5. Price: \$115,200.00
Address: 98-723 Kuahao Place, Pearl City	, W113,200.00
Term of Contract: From: 5 Year To:	7 Prior Exemption Ref. No.
 8. Explanation describing how procurement by competitive means is either not practicable not A new wing at Maui Memorial Medical Center has a newly installed state of the art elevator, would like to purchase the maintenance agreement as it has been determined by MMMC that procurement would not be advantages for OEM services. The current schindler elevator has used to maintain the system via remote diagnostics, the system is password protected. Current provided OEM training on the repair of this elevator which is required for warrenties. The st would not be practicable for the services of a maintenance agreement, an exemption would proceed to repair's while not under warrenty, and provide resonable response time on repairs. 9. Details of the process or procedures to be followed in selecting the vendor to ensure maximas practicable: The term of the exemption will be for a five (5) year term. Once the term has expired the hos maintenance and the options availabe on the geared/gearless elevators to determine if any oth knowledge and training to complete the maintenance on this unit. Based on available informs procurement practice will be completed. 	Maui Memorial Medical Center the other methods of s proprietary software which is tly, no other vendor has been andard procurement process revent a disruption in services, num fair and open competition spital will re-evaluate the er vendor have required
10. A description of the agency's internal controls and approval requirements for the exemptor. This exemption shall be from HRS, Section 103-302 all other guidelines, rules and periodic policies and procedures will be followed and periodic reviews of contract action with the section of the exemptor.	licies under Chapter 103D shall

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REQUEST FOR EXEMPTION FROM CHAPTER 103D, HRS (Conl.)

	nel, by position, who wi					
Name	Position			Involver	ment	in Process
Alice Hall	Assistant (General Counsel	· — —	Approval	CHICAGO.	Administration
Wesley Lo		cutive Officer				Administration
Pat Saka	Chief Fina	ancial Officer		Approval		Administration
Nancy Delima	Contract N	Manager		Approval	$\underline{\hspace{0.1cm}}$	Administration
				Approval		Administration
				Approval		Administration
13. Direct inquiries to:	Department: Contract Contact Name: Nancy Phone Number: 808-5 Fax Number: 808-242	Delima 73-1824				
Agenc	y shall ensure adherence	st of exemptions attached to applicable administrative above is, to the best of	and statutor	ry requirente	ents	
Department Head			Date			
Department Head						
Department Head		at Pie Critillatyn (se C	ender de la company	- / One		
Department Head	esti (0-17-17-18-18-18-18-18-18-18-18-18-18-18-18-18-	Mar Date Notice I	Posted 9	1-1	1-06
The Head of the Purchasin	g Agency is in the procto this notice to issue an	0-17-17-18-18-18-18-18-18-18-18-18-18-18-18-18-	Date Notice I t for exempti 3D, HRS, w	ion from Ch	apter	103D, HRS.
The Head of the Purchasin Submit written objections	g Agency is in the proce to this notice to issue an e above posted date to:	ess of reviewing this request exemption from Chapter 10 Head of Purchasing Agen HHISC 3675 Kilauea Ave.	Date Notice I t for exempti 3D, HRS, w	ion from Ch	apter	103D, HRS.

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