

SS 07-001

**HAWAII HEALTH SYSTEMS CORPORATION
NOTICE & REQUEST FOR SOLE SOURCE**

1. TO: Chief Procurement Officer
2. FROM: Dean Abarra
Department/Division/Agency

Pursuant to §103D-306, HRS, and Subchapter 9, Chapter 3-122, HAR, the Department requests sole source approval to purchase the following:

3. Description of goods, services, or construction: Repair, maintenance, and replacement of worn parts by the original equipment manufacturer (OEM) for medical imaging equipment purchased and manufactured by General Electric.	
4. Vendor Name: General Electric (GE) Medical Systems Address: 4828 147 th Place Everett, Washington 98208	5. Price: \$NTE \$2,000,000.00
6. Term of Contract: From: <u>04/01/2007</u> To: <u>3/31/200</u> (mm/dd/yyyy)	7. Prior Sole Source Ref No. N/A
8. Feature: The good, service, or construction has the following unique features, characteristics, or capabilities: The medical imaging equipment employs software to compile and display digital information gathered by the scanning device. This software is unique, proprietary, and integral to the operation of the scanning equipment. GE maintains strict control over access to the operating system and any repairs, system updates, or maintenance requires access to this software. As GE does not grant access to third parties, only the OEM may perform maintenance	
9. Essential Features: How the unique features, characteristics, or capabilities are essential for the agency to accomplish its work: These equipments require special software, tools, and training the OEM only can provide.	

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10: Sole Source No. _____

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11. Alternate source. The following other possible sources for the good, service, or construction were investigated but do not meet our needs because: No other vendor available due to OEM requirements and that use of another service company will void the equipment warranty. In the event the warranty termination clause is no longer applicable due to the age of the equipment or other circumstances, the service will be put out to competitive award.

12. **Direct any inquiries to:**
Department: Biomed
Contact Name/Title: Dean Abarra/Biomed-Imaging Tech.

13. Phone Number: 808-243-2939
Fax Number: 808-243-2939

Expenditure may be processed with a purchase order: Yes No If no, a contract must be executed Agency shall ensure adherence to applicable administrative and statutory requirements.

14. *I certify that the information provided above is to the best of my knowledge, true, correct and that the goods, services, or construction are available through only one source.*



3/16/07

Department Head (sign and print name)

Date

15. Date Notice Posted: 3-21-07

Submit written objections to this intent to issue a sole source contract within seven calendar days or as otherwise allowed from the above posted date to: Chief Procurement Officer
HHSC
3675 Kilauea Ave.
Honolulu, Hawaii 96816

16. Chief Procurement Officer comments:

17. APPROVED DISAPPROVED

NO ACTION REQUIRED

Chief Procurement Officer

Date

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